Rev. 12/2012



State of Idaho

Ben Ysursa Secretary of State

LOBBYIST MONTHLY REPORT FORM

To Be Filed By:

LOBBYISTS (Sec. 67-6619) Page__ _of_ ___Page(s) THIS SPACE FOR OFFICE USE ONLY

18 MAR - 7 PM 1:12 STATE OF IDAHO

(Type or print clearly in black ink)
See instructions at bottom of page

Lobbyist's name and permanent business address							Date prepared				Period covered			
Marty Durand						2/2/2044					month ending			
P.O. Box 2864						3/6/2014								
Boise, ID 83701											(Mo.)	(Day)	(Yr.)	
											02	28	2014	
Item 1	Totals	of all reportal	ble expenditures made o	or incurred b	y Lobt	yist or	by L	obbyist's Empl	oyer on bel	half of	Lobbyis	st's Emplo	yer.	
Category of Expenditure Proportionate amounts contributed by each employed									oyer (Identi	fy emp	loyers, u	nder		
Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported			All Employers	Employer No. 1			Employer No. 2		Employer No. 3		.3	Employer No. 4		
Entertainment							-							
Food and Refreshment			s	s			_ \$. s		:	S		
Living Accommodations				.		.					.			
Adverti	sing					.			·		-			
Travel						.					-			
Telephone											-			
Other Expenses or Services						.					-			
											-			
Total			s0.00	_ s0.00			S	0.00 s 0.00		0.00	:	<u>. 0.</u>	00	
#Whan	he number of	employers von s	! are reporting for requires m	 	orms to l	l he filed :	n tats	d amount for all e	i -molovers sh	ould be	entered :	on Page I.		
When			diture of more than one										ve officials	
Item-	and member(s) of their household.													
2	Date Place		- A	Amount		Names of Legislators, Public and Executive Officials and Household Members in Group								
								·						
													-	
	Continued on a	 sttached page(s)	•											
						Iten 3	n	Employer(s) Name(s) and Address(es)						
INSTRUCTIONS														
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code						Idaho Building Trades Council No. 1 225 N. 16th, Suite 110, Boise, ID								
Filing deadline: Monthly reports due within fifteen (15) days of the month for activities of the past month.						Idaho Care Providers Network No. 2 12502 SMith Ave., Nampa, ID								
TO BE FILED WITH:								***************************************						
Ben Ysursa Secretary of State						No. 3								
PO Box 83720						 								
Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282						No. 4								
Filolie, (200) 334-2032 FBX: (200) 334-2202														

	Subje	ect matter of proposed legislat	ion, the number of the Senate	LEGISLATIVE SUBJECT IDENTIFICATION							
Item	or He	or House Bill, Resolution or other legislative activity in which			•						
4	the L	the Lobbyist was supporting or opposing.		Code	Subject	Code	Subject				
				01	Agriculture, horticulture,	17	Health service, medicine, drugs				
Subject Code Bill, Resolution or Other Appropriation Bill Number				farming, and livestock		and controlled substances, health					
(from	table)	Legislative Ident. Number	and Section Number	02	Amusements, games, athletics		insurance, hospitals				
21		S1337			and sports	18	Higher education				
_	•	S1334		03	Banking, finance, credit and	19	Housing, construction, codes				
		G 100+			investments	20	Insurance (excluding health				
				04	Children, minors, youth,		insurance)				
					senior citizens	21	Labor, salaries and wages,				
				05	Church and religion		collective bargaining				
				06	Consumer affairs	22	Law enforcement, courts,				
				07	Ecology, environment, pollution,		judges, crimes, prisons				
				ļ	conservation, zoning, land and	23	License, permits				
				ŀ	water use	24	Liquor				
				08	Education	25	Manufacturing, distribution and				
	,			09	Elections, campaigns, voting,		services				
					political parties	26	Natural resources, forest and				
				10	Equal rights, civil rights,		forest products, fisheries, mining				
		*		۱	minority affairs		and mining products				
				11	Government, financing,	27	Public lands, parks, recreation				
					taxation, revenue, budget,	28	Social insurance, unemployment				
				١	appropriations, bids, fees, funds		insurance, public assistance,				
				12	Government, county		workmen's compensation				
				13	Government, federal	29	Transportation, highways,				
				14	Government, municipal		streets and roads				
				15	Government, special districts	30	Utilities, communications,				
				16	Government, state		televisions, radio, newspaper,				
				l			power, CATV, gas				
				l		31	Other (please specify)				
				l							
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	1										
					CERTIFICATION: I hereby certify the	hat the a	have is a true complete and				
				correct statement in accordance with							
Item		y any rule, ratemaking decision		`	oriest statement in accordance with	occuell (7/ OUAT AUBIU CUUC.				
5			or bond lobbyist was support-	١,							
ing or opposing.					Mark. Wared		3.1111				
				4	TIMIN DUMINIC		3017				
				I	obyist signature		Date				
							•				