

**LOBBYIST MONTHLY REPORT FORM**



**State of Idaho**  
Ben Yursa  
Secretary of State

To Be Filed By:  
**L-3** LOBBYISTS  
(Sec. 67-6619)

14 MAR 12 PM 04:10  
SECRETARY OF STATE  
STATE OF IDAHO

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

Lobbyist's name and permanent business address Ryan Armbruster PO Box 1539 Boise, ID 83701	Date prepared 3/12/2014	Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr.) 2   28   2014
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Item 1	Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer.				
Category of Expenditure <small>Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported</small>	*Total Amount for All Employers	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)			
		Employer No. 1	Employer No. 2	Employer No. 3	Employer No. 4
Entertainment	\$ \$0.00	\$ \$0.00	\$ \$0.00	\$ \$0.00	\$ \$0.00
Food and Refreshment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Living Accommodations	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Advertising	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Telephone	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other Expenses or Services	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Total</b>	\$ \$0.00	\$ \$0.00	\$ \$0.00	\$ \$0.00	\$ \$0.00

\*When the number of employers you are reporting for requires multiple L-2 forms to be filed a total amount for all employers should be entered on Page 1.

Item-2	The totals of each expenditure of more than one hundred five dollars (\$105) for a legislator, other holder of public office, executive officials and member(s) of their household.			
	Date	Place	Amount	Names of Legislators, Public and Executive Officials and Household Members in Group

Continued on attached page(s)

<p style="text-align: center;"><b>INSTRUCTIONS</b></p> <p><b>Who should file this form:</b> Any lobbyist registered under Section 67-6617 Idaho Code</p> <p><b>Filing deadline:</b> Monthly reports due within fifteen (15) days of the month for activities of the past month.</p> <p>TO BE FILED WITH:                      Ben Yursa                      Secretary of State                      PO Box 83720                      Boise, ID 83720-0080                      Phone: (208) 334-2852 Fax: (208) 334-2282</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Item 3</th> <th>Employer(s) Name(s) and Address(es)</th> </tr> </thead> <tbody> <tr> <td>No. 1</td> <td>Ada County Drainage District No 3 PO Box 1539 Boise ID 83701 USA</td> </tr> <tr> <td>No. 2</td> <td>Driggs Urban Renewal Agency PO Box 971 Driggs ID 83422 USA</td> </tr> <tr> <td>No. 3</td> <td>Garden City Urban Renewal Agency 6015 Glenwood St Garden City ID 83714 USA</td> </tr> <tr> <td>No. 4</td> <td>Idaho Fall Redevelopment Agency PO Box 50220 Idaho Falls ID 83405 USA</td> </tr> </tbody> </table>	Item 3	Employer(s) Name(s) and Address(es)	No. 1	Ada County Drainage District No 3 PO Box 1539 Boise ID 83701 USA	No. 2	Driggs Urban Renewal Agency PO Box 971 Driggs ID 83422 USA	No. 3	Garden City Urban Renewal Agency 6015 Glenwood St Garden City ID 83714 USA	No. 4	Idaho Fall Redevelopment Agency PO Box 50220 Idaho Falls ID 83405 USA
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Item 4	Subject matter of proposed legislation, the number of the Senate or House Bill, Resolution or other legislative activity in which the Lobbyist was supporting or opposing.		LEGISLATIVE SUBJECT IDENTIFICATION																																																																					
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Item 5	Identify any rule, ratemaking decision, procurement, contract, bid or bid process, financial services or bond lobbyist was supporting or opposing.		<p>CERTIFICATION: I hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 <b>Idaho Code</b>.</p> <p><u>Electronically signed</u> <span style="float: right;"><u>3/12/2014</u></span></p> <p>Lobbyist signature <span style="float: right;">Date</span></p>																																																																					



Employer No.	Employer Name(s)	Employer Address(es)
No.5	Rexburg Redevelopment Agency	PO Box 280 Rexburg ID 83440 USA