02/04/2014 14:39 3884

LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

L-3 LOBBYISTS (Sec. 67-6619)

Page	 ſ	Page(s)

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SECRETARY OF STATE STATE OF IDAHO

31

2014

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

Lobbyist's name and permanent business address

ROBERT CARTER
2465 OVERLAND RD.

BOISE, ID 83705-3155

SIALE OF IDAHO

Period covered

month ending

(Mo.) (Day) (Yr.)

) tem Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer. Proportionate amounts contributed by each employer (Identify employers, under Category of Expenditure *Total Amount for Item 3, at bottom of page.) Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity All Employers Do Not Have to be Reported Employer No. 1 Employer No. 2 Employer No. 3 Employer No. 4 Entertainment 0.00 0.00 Food and Refreshment \$ 0.00 0.00 Living Accommodations 0.00 0.00 Advertising 0.00 0.00 Travel 0.00 0.00 Telephone 0.00 0.00 Other Expenses or Services 0.00 0.00 0.00 0.00 0.00 Total \$

*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. 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. Item-Names of Logislators, Public and Executive Officials 2 and Household Members in Group Place Amount Date NONE NONE NONE 0.00 Continued on attached page(8) Item 3 Employer(s) Name(s) and Address(es) INSTRUCTIONS BOISE PROJECT BOARD OF CONTROL Who should file this form: Any lobbyist registered under Section 2465 OVERLAND RD., BOISE, ID 83705 67-6617 Idaho Code Filing deadline: Monthly reports due within fifteen (15) days of the No. 2 month for activities of the past month. TO BE FILED WITH: No. 3 Ben Ysursa Secretary of State PO Box 83720 Boisc, ID 83720-0080 No. 4 Phone: (208) 334-2852 Fax: (208) 334-2282

Subject matter of proposed legislation, the number of the Senate			LEGISLATIVE SUBJECT IDENTIFICATION				
or House Bill, Resolution or other legislative activity in which		l					
•	the L	obbyist was supporting or op-	posing.		Subject		Subject
Cabina		Bill, Resolution or Other	A	01	Agriculture, horticulture.	17	Health service, medicine, drugs
Subjec			Appropriation Bill Number		farming, and livestock		and controlled substances, health
(from	(abic)	Legislative Ident. Number	and Section Number	02	Amusements, games, athletics		insurance, hospitals
NC	NE	NONE	NONE		and sports	18	Higher education
,,,			110112	03	Banking, finance, credit and	19	Housing, construction, codes
				ł	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
				l	conservation, zoning, land and	23	License, permits
				0.0	Willer use	24	Liquor
				08	Education	25	Manufacturing, distribution and
				09	Elections, campaigns, voting,		services
				1,0	political parties	26	Natural resources, forest and
				10	Equal rights, civil rights,		forest products, fisheries, mining
				111	minority affairs	77	and mining products
				1 ''	Government, financing,	27	Public lands, parks, recreation
					taxation, revenue, budget,	28	Social insurance, unemployment
				12	appropriations, bids, fees, funds		insurance, public assistance,
				13	Government, county Government, federal	29	workmen's compensation
				14		29	Transportation, highways,
				15	Government, municipal Government, special districts	30	streets and roads
				16	Government, state	211	Utilities, communications,
				10	Government, state		televisions, radio, newspaper, nower, CATV, gas
				ļ		31	Other (please specify)
						31	Other (picase specify)
				1			
				!			
						_	
				1			
	ĺ	!			CERTIFICATION: I hereby cortify t	hat the al	sove is a true complete and
					orrect statement in accordance with		
Item		y any rule, ratemaking decision				1	
5			or bond lobbyist was support-				
	ing or	opposing,			Kills All	X.	2/3/2014
				ī	obbyist signature		Date
				_			Date