s Rev. 12/2012

LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State

> Secretary of State PO Box 83720

Boise, ID 83720-0080

Phone: (208) 334-2852 Fax: (208) 334-2282

To Be Filed By:

L-3 LOBBYISTS (Sec. 67-6619)

Page	of	Page(s)
THIS SPACE	FOR OFF	ICE USE ONLY

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	Se	e instructions at	rly in black ink) bottom of page							STA	ATE OF	CF : F IDA	STATE HO
•		ermanent busine				Dat	e pi	repared		I	Period cov	ered	
William C. Roden, P.O. Box 2110 599 W. Bannock St., Ste. B Boise, ID 83701-2110					04/14/2014				abla	month e	nding		
				04/14/2014			714	(Mo.) (Day) (Yr.)					
											03	31	14
Item	Totals	s of all reporta	ble expenditures made of	or incurred h	by Lobb	byist or	bv	Lobbyist's Empl	lover on b	ehalf of			
Reimb	ategory of Ex oursed Personal L	penditure iving and Travel	*Total Amount for		ate amo	unts con	trib	outed by each empl				•	
	es Pertaining to I o Not Have to b	obbying Activity e Reported	All Employers	All Employers Employ			er No. 1 Employer No.			2 Employer No. 3			er No. 4
	inment nd Refreshme	ent	\$	s			S		s		s		
Living	Accommoda	tions											
Advert	ising												
Travel									-		_		
Telepho	one												
Other E	Expenses or S	ervices											
				 		-			-				
		Total	s0.00	s	0.00	5	<u></u>	0.00	\$	0.00	\$_	0	.00
*When	the number of	emplovers vou a	I are reporting for requires m	1 ultiple L-2 fc	orms to b	he filed a	ı tot	al amount for all e	I mplovers s	hould be	entered or	Page 1	
Item-	The totals		diture of more than one										ive officia
2	Date		Place		A	mount			Legislator				cials
<u> </u>	Continued on a	ttached page(s)			1	Item							
1		INST	RUCTIONS			3		Ln	nployer(s)	Name(s)	and Addre	ss(es)	
Wh	o should file		ny lobbyist registered un -6617 Idaho Code	nder Section	1	No. 1		enturyLink 99 Main St., 1	1th Floo	or, Bois	e, ID 80	3702	
Fili	ng deadline:		orts due within fifteen (1.		he	No. 2		oeur d'Alene .O. Box 408,		er, ID 8	3851		
TO BE FILED WITH: Ben Ysursa					Delta Dental Plan of Idaho No. 3 555 E. Parkcenter Blvd., Boise, ID 83706								

SelectHealth

P.O. Box 30192, Salt Lake City, UT 84130-0192

Item			ion, the number of the Senate		LEGISLATIVE SUBJECT IDENTIFICATION						
4 Subject	OLTIC	Bill, Resolution or other obbyist was supporting or op Bill, Resolution or Other Legislative Ident. Number HB 384 HB 393 HB 395 HB 418 HB 429 HB 441 SB 1226 SB 1243 Rules Docket 11-0101-1301 Idaho State Racing Commission	legislative activity in which posing. Appropriation Bill Number and Section Number	Code 01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	Agriculture, horticulture, farming, and livestock Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, federal Government, special districts Government, state	17 18 19 20 21 22 23 24 25 26 27 28 29 30	Subject Health service, medicine, drugs and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)				
Item 5 Identify any rule, ratemaking decision, procurement, contract, bid or bid process, financial services or bond lobbyist was supporting or opposing.				CERTIFICATION: I hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 Idaho Code. Lobbyist signature CERTIFICATION: I hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 Idaho Code. Date							