LOBBYIST MONTHLY REPORT FORM

State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

LOBBYISTS (Sec. 67-6619) Page of Page(s) THIS SPACE FOR OFFICE USE ONLY

14 APR -2 PM 1:13

CORETARY OF STATE
STATE OF IDAHO

| | Se | e instructions at | bott | om of page | | | | | | | | | | |
|--|-----------------------------------|-------------------|------------|--|-------------|---|---|----------------|-------------------------------------|----------------|----------------------------|----------------|------------|--|
| Lobbyist's name and permanent business address | | | | | | | | Date prepared | | | | Period covered | | |
| Corey Surber Saint Alphonsus Health System | | | | | | | | 4/2/2014 | | | | month ending | | |
| 1055 N. Curtis Road Boise, ID 83706 | | | | | | | | | | | | (Mo.) | (Day) | (Yr.) |
| | , | | | | | | | | | | | 03 | 31 | 2014 |
| Item 1 | Total | s of all reportal | ole (| expenditures made | or incu | итеd by L | obbyist | or b | y Lobbyist's Emple | oyer on | behalf o | of Lobbyi | st's Emplo | yer. |
| Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity | | | | *Total Amount for All Employers | | Item 3, at bottom of | | | | | | | | |
| | o Not Have to b | e Reported | | | | Employer No. 1 | | Employer No. 2 | | Employer No. 3 | | Employer No. 4 | | |
| Enterta Food as | inment nd Refreshm | ent | \$_ | 591.26 | s 591. | | 26 | \$_ | | \$ | | | \$ | |
| Living Accommodations | | | | | | | | | | | | | | |
| Adverti | | | | | | | | | | | | | | |
| Travel | | | | | | | | | | | | | | |
| Telepho | one | | _ | | | | | _ | | | | | | |
| Other E | Expenses or S | Services | | | | | | _ | | | | | | and the second s |
| | · | | | | - | | | ⊨ | | | | | | |
| | | Total | S _ | 591.26 | _ s | 591.2 | 26 | \$_ | 0.00 | \$ | 0.00 | { | 0.0 | 00 |
| Item- | and member(s) of their household. | | | | ed five do | | Names of Legislators, Public and Executive Officials Amount and Household Members in Group | | | | | | | |
| | Date | | Place | | | Amo | | unt and | | nd Hous | Household Members in Group | | | |
| | Continued on a | stached page(s) | | | | | | | | | | | | |
| | | TRICION | D. X 7. | CYPTONY | | i | | em 1 | Employer(s) Name(s) and Address(es) | | | | | ************************************** |
| INSTRUCTIONS | | | | | | | - | 3 | | | | | | |
| Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code | | | | | | No. I Saint Alphonsus Health System 1055 N. Curtis Rd Boise, ID 83706 | | | | | | | | |
| Filin | ng deadline: | | | ue within fifteen (1 es of the past month | | s of the | No. 1 | 2 | | | | | | |
| то і | BE FILED W | | | | | | | | | | | | | |
| Ben Ysursa Secretary of State | | | | | | | No. 3 | , | | | | | | |
| PO Box 83720 | | | | | | - | | | | | | | | |
| Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282 | | | | | | | No. 4 | 1 | | | | | | |

| | Subia | ect matter of proposed legislat | ion, the number of the Senate | LEGISLATIVE SUBJECT IDENTIFICATION | | | | | | | |
|--------------|----------|--|--------------------------------|------------------------------------|--|-----------|---|--|--|--|--|
| Item | 1 . | or House Bill, Resolution or other legislative activity in which | | | | | | | | | |
| 4 | 1 | the Lobbyist was supporting or opposing. | | Code | Subject | Code | Subject | | | | |
| | "" | the boody ist was supporting of opposing. | | 01 | Agriculture, horticulture, | 17 | Health service, medicine, drugs | | | | |
| Subjec | t Code | Bill, Resolution or Other | Appropriation Bill Number | 1 " | farming, and livestock | • • | and controlled substances, health | | | | |
| (from table) | | Legislative Ident, Number | and Section Number | 02 | Amusements, games, athletics | | insurance, hospitals | | | | |
| | | | | 1 "- | and sports | 18 | Higher education | | | | |
| 17 | | SB 1329 | | 03 | Banking, finance, credit and | 19 | Housing, construction, codes | | | | |
| 17 | | SB 1351 | 1 | | investments | 20 | Insurance (excluding health | | | | |
| 17 | | SB 1363 | | 04 | Children, minors, youth, | 20 | insurance) | | | | |
| | | | | 04 | senior citizens | 21 | Labor, salaries and wages, | | | | |
| 17 | | SB 1352 | | 05 | Church and religion | 21 | collective bargaining | | | | |
| | | | | 06 | Consumer affairs | 22 | Law enforcement, courts, | | | | |
| | i | | | 07 | Ecology, environment, pollution, | 22 | | | | | |
| | | | | 0, | conservation, zoning, land and | 23 | judges, crimes, prisons License, permits | | | | |
| | í | | | | water use | 24 | Liquor | | | | |
| | | | | 08 | Education | 25 | Manufacturing, distribution and | | | | |
| | - 1 | | | 09 | Elections, campaigns, voting, | 23 | services | | | | |
| | 1 | | | 0.5 | political parties | 26 | | | | | |
| | | | | 10 | Equal rights, civil rights, | 20 | Natural resources, forest and | | | | |
| | i | | | 10 | minority affairs | | forest products, fisheries, mining | | | | |
| | | | | 11 | Government, financing, | 27 | and mining products | | | | |
| | | | | 11 | taxation, revenue, budget, | 28 | Public lands, parks, recreation | | | | |
| | - | | | | | 20 | Social insurance, unemployment | | | | |
| | 1 | | | 12 | appropriations, bids, fees, funds | | insurance, public assistance, | | | | |
| | Ì | | | 1.2 1.3 | Government, county | 20 | workmen's compensation | | | | |
| | 1 | | | 14 | Government, federal | 29 | Transportation, highways, | | | | |
| | | Î | | 15 | Government, municipal | 20 | streets and roads | | | | |
| | | | | 16 | Government, special districts | 30 | Utilities, communications, | | | | |
| | | | | 10 | Government, state | | televisions, radio, newspaper, | | | | |
| | - 1 | Į. | | | | | power, CATV, gas | | | | |
| | i | | | | | 31 | Other (please specify) | | | | |
| | - 1 | ļ | | | | | | | | | |
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| | | | | | ERTIFICATION: I hereby certify the | | | | | | |
| - | Identify | any rule, ratemaking decisio | n, procurement, confract | C- | orrect statement in accordance with S | Section 6 | 7-6624 Idaho Code. | | | | |
| ltem | | | or bond lobbyist was support- | | i la | | _ | | | | |
| 5 | | pposing. | or dona loody at was supported | | (λ) | | 1-10/10 | | | | |
| | ing or c | pposing. | | | May / L | - | 41714 | | | | |
| | | | Apparagn | Ţ | obbyist signature | | —————————————————————————————————————— | | | | |
| | | | Angele | 1. | oody as signature/ | | Date | | | | |
| | | | 2000 | | \ / | | | | | | |
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