

LOBBYIST MONTHLY REPORT FORM



State of Idaho
Ben Yursa
Secretary of State

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

POSTED

11 JAN 31 PM 12:05

SECRETARY OF STATE
STATE OF IDAHO

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

SCANNED

Lobbyist's name and permanent business address Larry Benton 1216 Torrey Lane Nampa, ID 83686	Date prepared January 31, 2011	Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr.) Jan 31 2011
--	--	---

Item 1 Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported	*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					
Food and Refreshment	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Living Accommodations					
Advertising					
Travel					
Telephone					
Other Expenses or Services					
Total	\$ 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.

The totals of each expenditure of more than one hundred dollars (\$100) for a legislator, other holder of public office, executive officials and member(s) of their household.				
Item-2	Date	Place	Amount	Names of Legislators, Public and Executive Officials and Household Members in Group

Continued on attached page(s)

In order for the information to fit in the space, put the employer name on the first line and the complete address on the second line.
Employer(s) name(s) and address(es)

INSTRUCTIONS

Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code

Filing deadline: Monthly reports due within fifteen (15) days of the month for activities of the past month.

TO BE FILED WITH:
Ben Yursa
Secretary of State
PO Box 83720
Boise, ID 83720-0080
Phone: (208) 334-2852 Fax: (208) 334-2282

Item 3	Employer(s) name(s) and address(es)
No. 1	Idaho Acupuncture Association 1405 Little Blacktail Rd Cocalalla, ID 83813
No. 2	Idaho Ambulatory Surgical Centers Association PO Box 140357 Garden City, ID 83714
No. 3	Idaho Association of Cosmetology Schools 602 Main Street Lewiston, ID 83501
No. 4	Idaho Association of Nurse Anesthetists 10447 W. Bucktail Dr. Garden City, ID 83714

LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Yursa
Secretary of State

To Be Filed By:

L-3 LOBBYISTS
(Sec. 67-6619)

Click here to clear form.

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

Don't forget to fill out the back of the form!

Lobbyist's name and permanent business address Larry Benton 1216 Torrey Lane Nampa, ID 83686		Date prepared January 31, 2011	Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr.) Jan 31 2011
--	--	--	---

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					
Food and Refreshment	\$	\$	\$	\$	\$
Living Accommodations					
Advertising					
Travel					
Telephone					
Other Expenses or Services					
Total	\$ 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 dollars (\$100) 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)

In order for the information to fit in the space, put the employer name on the first line and the complete address on the second line.
EMPLOYER(S) NAME(S) AND ADDRESS(ES)

INSTRUCTIONS		Item 3
<p>Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code</p> <p>Filing deadline: Monthly reports due within fifteen (15) days of the month for activities of the past month.</p> <p>TO BE FILED WITH:</p> <p style="text-align: center;">Ben Yursa Secretary of State PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282</p>		<p>No. 1 ID Chapter - Am. Asn. of Naturopathic Physician 4219 W. Emerald Boise, ID 83713</p> <p>No. 2 ID Chapter - Am. Institute of Architects 1674 Hill Rd. Boise, ID 83702</p> <p>No. 3 Idaho Health Care Association 1524 W. Cayuse Cr. Dr. Meridian, ID 83646</p> <p>No. 4 Idaho Land Title Association 1014 W. Hemmingway Blvd. Nampa, ID 83651</p>

LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Yursa
Secretary of State

To Be Filed By:

L-3 LOBBYISTS
(Sec. 67-6619)

Click here to clear form.

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

Don't forget to fill out the back of the form!

Lobbyist's name and permanent business address Larry Benton 1216 Torrey Lane Nampa, ID 83686	Date prepared January 31, 2011	Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr.) Jan 31 2011
--	--	---

Item 1 Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported	*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					
Food and Refreshment	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Living Accommodations					
Advertising					
Travel					
Telephone					
Other Expenses or Services					
Total	\$ 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 dollars (\$100) 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)

In order for the information to fit in the space, put the employer name on the first line and the complete address on the second line.
EMPLOYER(S) NAME(S) AND ADDRESS(ES)

INSTRUCTIONS		Item 3
<p>Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code</p> <p>Filing deadline: 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>		<p>No. 1 Idaho Midwifery Council 207 W. Washington Boise, ID 83702</p> <p>No. 2 Idaho Optometric Physicians Association 11368 W. Hickory Hill Ct. Boise, ID 83713</p> <p>No. 3 Idaho Orthopaedic Society PO Box 140357 Garden City, ID 83714</p> <p>No. 4 Idaho State Broadcasters Association 1674 Hill Road Boise, ID 83702</p>

LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Yursa
Secretary of State

To Be Filed By:

L-3 LOBBYISTS
(Sec. 67-6619)

Click here to clear form.

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

Don't forget to fill out the back of the form!

Lobbyist's name and permanent business address Larry Benton 1216 Torrey Lane Nampa, ID 83686	Date prepared January 31, 2011	Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr.) Jan 31 2011
--	--	---

Item 1 Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported	*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					
Food and Refreshment	\$	\$	\$	\$	\$
Living Accommodations					
Advertising					
Travel					
Telephone					
Other Expenses or Services					
Total	\$ 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 dollars (\$100) 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)

In order for the information to fit in the space, put the employer name on the first line and the complete address on the second line.
EMPLOYER(S) NAME(S) AND ADDRESS(ES)

<p align="center">INSTRUCTIONS</p> <p>Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code</p> <p>Filing deadline: 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>	Item 3	
	No. 1	Northwest Career Colleges Federation 16700 NE 79th #201 Redmond, WA 98052
	No. 2	Northwest Specialty Hospital 1593 Poulston Avenue Post Falls, ID 83854
	No. 3	Treasure Valley Hospital 8100 W. Emerald Boise, ID 83704
	No. 4	Idaho State Broadcasters Association 1674 Hill Road Boise, ID 83702

LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Yursa
Secretary of State

To Be Filed By:

L-3 LOBBYISTS
(Sec. 67-6619)

Click here to clear form.

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

Don't forget to fill out the back of the form!

Lobbyist's name and permanent business address Larry Benton 1216 Torrey Lane Nampa, ID 83686	Date prepared January 31, 2011	Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr.) Jan 31 2011
--	--	---

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 Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported	*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					
Food and Refreshment	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Living Accommodations					
Advertising					
Travel					
Telephone					
Other Expenses or Services					
Total	\$ 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 dollars (\$100) 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)

In order for the information to fit in the space, put the employer name on the first line and the complete address on the second line.
Employer(s) Name(s) and Address(es)

INSTRUCTIONS

Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code

Filing deadline: Monthly reports due within fifteen (15) days of the month for activities of the past month.

TO BE FILED WITH:
Ben Yursa
Secretary of State
PO Box 83720
Boise, ID 83720-0080
Phone: (208) 334-2852 Fax: (208) 334-2282

Item 3	Employer(s) Name(s) and Address(es)
No. 1	Jan Lan Company 1216 Torrey Lane Nampa ID 83686
No. 2	Taxpayer Accountability Committee 1216 Torrey Lane Nampa, ID 83686
No. 3	
No. 4	

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.

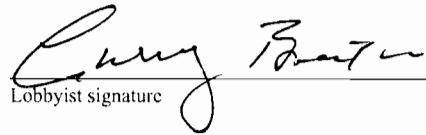
Subject Code (from table)	Bill, Resolution or Other Legislative Ident. Number	Appropriation Bill Number and Section Number
11, 17 20, 28, 8 23, 19 12, 30, 8 18, 14		

Item 5 Identify any rule, ratemaking decision, procurement, contract, bid or bid process, financial services or bond lobbyist was supporting or opposing.

LEGISLATIVE SUBJECT IDENTIFICATION

Code	Subject	Code	Subject
01	Agriculture, horticulture, farming, and livestock	17	Health service, medicine, drugs and controlled substances, health insurance, hospitals
02	Amusements, games, athletics and sports	18	Higher education
03	Banking, finance, credit and investments	19	Housing, construction, codes
04	Children, minors, youth, senior citizens	20	Insurance (excluding health insurance)
05	Church and religion	21	Labor, salaries and wages, collective bargaining
06	Consumer affairs	22	Law enforcement, courts, judges, crimes, prisons
07	Ecology, environment, pollution, conservation, zoning, land and water use	23	License, permits
08	Education	24	Liquor
09	Elections, campaigns, voting, political parties	25	Manufacturing, distribution and services
10	Equal rights, civil rights, minority affairs	26	Natural resources, forest and forest products, fisheries, mining and mining products
11	Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds	27	Public lands, parks, recreation
12	Government, county	28	Social insurance, unemployment insurance, public assistance, workmen's compensation
13	Government, federal	29	Transportation, highways, streets and roads
14	Government, municipal	30	Utilities, communications, televisions, radio, newspaper, power, CATV, gas
15	Government, special districts	31	Other (please specify) _____
16	Government, state		

CERTIFICATION: I hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 Idaho Code.

 2/1/2011
 Lobbyist signature Date