LOBBYIST ANNUAL REPORT FORM

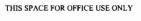


State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

L-2

LOBBYISTS (Sec. 67-6619)



CL AUG 10 PM 1:41 ECAL 12 0 PM 1:41 STATE OF IDAHO

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

Lobbyist's name and permanent business address						Date prepared				Period covered		
MIKE TAYLOR										year ending		
6975 S.W. SANDBERG RD., SUITE 160						8/9/2004			(Mo.)	(Day)	(Yr.)	
TIGARD, OREGON	197223-	8073							12	31	2004	
Item Totals of a	Il reportab	le expenditures made or	r incurred	by Lobb	viet or	hy I	abbuiet's Empl	over on behalf o	<u> </u>		L	
Category of Expend		ic expenditures made of		-					-		ycı.	
Reimbursed Personal Living a	and Travel	Total	Item 3, at bottom of			nts contributed by each employer (Identify f page.)				Janpioyet st, under		
Expenses Pertaining to Lobbying Activity Do Not Have to be Reported		Expenditure	Employer No. 1		Employer No. 2		nployer No. 2	Employer No. 3		Employer No. 4		
Entertainment Food and Refreshment		s 0.00	\$			\$		 \$		\$		
Living Accommodations		0.00										
Advertising		0.00									٠.	
Travel		0.00							DUG.	TEN		
Telephone		0.00							LAS	ILV	,	
Office Expenses		0.00										
Other Expenses or Services		0.00			_							
		Political										
	Total	\$0.00	s	0.0	00	s	0.00	\$	0.00	\$	0.00	
	h expendi	ture of more than fifty	dollars (\$5			tor o						
2 Date		Place		Ar	nount		Names o	f Legislators & P	ublic Offic	cials in Grou	ıp	
NO EXPENDITURES OVER \$			\$50 REQUI			IRED		TO BE REPORTED				
						İ						
Continued on attache	ed page(s)											
INSTRUCTIONS						n	En	Employer(s) Name(s) and Address(es)				
Who should file this form: Any lobbyist registered under Section					No. 1 NATIONAL COUNCIL ON COMPENSATION							
67-6617 Idaho Code					INSURANCE							
Filing deadline: Annual report is due on January 31st.					No. 2 6975 S.W. SANDBERG RD., SUITE 160 TIGARD, OREGON 97223-8073							
TO BE FILED WITH: Ben Ysursa												
Secretary of State PO Box 83720					No. 3							
Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282					No. 4							

Item 4					by the lobbyist's employer in the nature of contributions of money or other tangible or intangible for or on behalf of any legislator.						
	Date		Amount		Name of Legislator Receiving or Benefited EXPENDITURES MADE OR INCURRED PER ITEM 4						
	N/A - I		N/A - NO	D EXPENDITUR							
Item 5	or Ho	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.			1	LEGISLATIVE SUE	Subject				
•		,	esolution or Other ive Ident. Number	Appropriation Bill Number and Section Number	01	Agriculture, horticulture, farming, and livestock	17	Health service, medicine, drugs and controlled substances, health			
20,28	, ,		N/A		02 03 04 05 06 07 08 09 10 11	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	18 19 20 21 22 23 24 25 26 27 28 29 30	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)			
CEPTU		ON. He		*The making and enforcement of the laws of the State of Idaho and the Policy underlying the same.		Employer No. 1 signatur	е	Date			
correct	stateme	nt in acco	ordance with Section	above is a true, complete and n 67-6624 Idaho Code.		Employer No. 2 signatur	e	Date			
M	P. K	().	Keldy.	otornay for 8 holo4		Employer No. 3 signatur	e	Date			
Lobbyis	st signat	ture	/	Date	-	Employer No. 4 signatur	e	Date			