



State of Idaho

Ben Yursa
Secretary of State

LOBBYIST MONTHLY REPORT FORM

To Be Filed By:

L-3 LOBBYISTS
(Sec. 67-6619)

Page 1 of 5 Page(s)
THIS SPACE FOR OFFICE USE ONLY

05 APR 12 AM 11:50
SECRETARY OF STATE
STATE OF IDAHO

Summary sheet

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

Lobbyist's name and permanent business address <i>Larry Isentson P.O. Box 667 Wilder ID 83676</i>	Date prepared <i>4/12/2005</i>	Period covered <input type="checkbox"/> month ending (Mo.) (Day) (Yr.) <i>4 30 2005</i>
--	-----------------------------------	--

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	\$ <i>- 0 -</i>	\$ _____	\$ _____	\$ _____	\$ _____

*When the number of employers you are reporting for requires multiple L-3 forms to be filed a total amount for all employers should be entered on Page 1.

Item 2	Date	Place	Amount	Names of Legislators & Public Officials in Group

POSTED

Continued on attached page(s)

INSTRUCTIONS Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code. Filing deadline: Monthly reports due within ten (10) 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	<i>Summary Sheet</i>
	No.2	
	No.3	
	No.4	



State of Idaho
Ben Yursa
Secretary of State

LOBBYIST MONTHLY REPORT FORM

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

Page 1 of 5 Page(s)
THIS SPACE FOR OFFICE USE ONLY

05 APR 12 AM 11:50
SECRETARY OF STATE
STATE OF IDAHO

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

Lobbyist's name and permanent business address <i>Larry Isenton T.O. Box 667 Wilder, ID 83616</i>	Date prepared <i>4/12/2005</i>	Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr.) <i>4 30 2005</i>
--	-----------------------------------	---

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	\$ - 0 -	\$ _____	\$ _____	\$ _____	\$ _____
Food and Refreshment					
Living Accommodations					
Advertising					
Travel					
Telephone					
Other Expenses or Services					
Total	\$ - 0 -	\$ - 0 -	\$ - 0 -	\$ - 0 -	\$ - 0 -

*When the number of employers you are reporting for requires multiple L-3 forms to be filed a total amount for all employers should be entered on Page 1.

Item 2	Date	Place	Amount	Names of Legislators & Public Officials in Group

POSTED

Continued on attached page(s)

<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 ten (10) 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>Item 3 Employer(s) Name(s) and Address(es)</p>
	<p>No.1 <i>Idaho Pediatric Med. Assn Boise 83702</i></p>
	<p>No.2 <i>Idaho Family Healthcare Coalition Chicago</i></p>
	<p>No.3 <i>Idaho State Broadcasters Assn. Boise</i></p>
	<p>No.4 <i>Idaho LHV Co. W.ilder</i></p>



State of Idaho
Ben Yursa
Secretary of State

LOBBYIST MONTHLY REPORT FORM

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

Page 3 of 5 Page(s)
THIS SPACE FOR OFFICE USE ONLY

05 APR 12 AM 11:50
SECRETARY OF STATE
STATE OF IDAHO

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

Lobbyist's name and permanent business address <i>LARRY BENYON P.O. Box 667 Wilder, ID 83276</i>	Date prepared <i>4/12/2005</i>	Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr.) <i>4 30 2005</i>
---	-----------------------------------	---

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	\$ <i>-0-</i>	\$ <i>-0-</i>	\$ <i>-0-</i>	\$ <i>-0-</i>	\$ <i>-0-</i>

*When the number of employers you are reporting for requires multiple L-3 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 fifty dollars (\$50) for a legislator or other holder of public office.			
Date	Place	Amount	Names of Legislators & Public Officials in Group	
		<i>N/A</i>		

POSTED

Continued on attached page(s)

<p>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 ten (10) 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	Employer(s) Name(s) and Address(es)
	No.1	<i>Am. Institute of Architects</i>
	No.2	<i>Boise Idaho Land Title Assn.</i>
	No.3	<i>ID. Naturopathic Physicians Assn.</i>
No.4	<i>Boise Idaho Optometric Assn</i>	



State of Idaho
Ben Yursa
Secretary of State

LOBBYIST MONTHLY REPORT FORM

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

Page 4 of 5 Page(s)
THIS SPACE FOR OFFICE USE ONLY

05 APR 12 AM 11:50
SECRETARY OF STATE
STATE OF IDAHO

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

Lobbyist's name and permanent business address <i>Larry Bentley, P.O. Box 667 W. Latah, ID 83676</i>	Date prepared <i>4/12/2005</i>	Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr.) <i>4 30 05</i>
---	-----------------------------------	---

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	\$ <i>00-</i>	\$ <i>00-</i>	\$ <i>00-</i>	\$ <i>00-</i>	\$ <i>00-</i>

*When the number of employers you are reporting requires multiple L-3 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 fifty dollars (\$50) for a legislator or other holder of public office.			
Date	Place	Amount	Names of Legislators & Public Officials in Group	
		<i>NA</i>		

POSTED

Continued on attached page(s)

<p>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 ten (10) 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	Employer(s) Name(s) and Address(es)
	No.1	<i>Coalition of Idaho Natl Producers CAIHW11</i>
	No.2	<i>Idaho Accountants Assn. Borel</i>
	No.3	<i>ID Assn. of Div. Disabilities Agencies Borel</i>
	No.4	<i>ID Assn. of Rural Businesses Mocul</i>



State of Idaho
Ben Ysursa
Secretary of State

LOBBYIST MONTHLY REPORT FORM

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

Page 5 of 5 Page(s)
THIS SPACE FOR OFFICE USE ONLY

05 APR 12 AM 11:50
SECRETARY OF STATE
STATE OF IDAHO

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

Lobbyist's name and permanent business address <i>LAUREY BENGTON P.O. Box 667 Wilder, ID 83676</i>	Date prepared <i>4/12/05</i>	Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr.) <i>4 30 2005</i>
---	---------------------------------	---

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	\$ <i>-0-</i>	\$ <i>-0-</i>	\$ <i>-0-</i>	\$ _____	\$ _____

*When the number of employers you are reporting for requires multiple L-3 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 fifty dollars (\$50) for a legislator or other holder of public office.			
Date	Place	Amount	Names of Legislators & Public Officials in Group	
		<i>N/A</i>		

Continued on attached page(s)

<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 ten (10) days of the month for activities of the past month.</p> <p>TO BE FILED WITH: Ben Ysursa Secretary of State PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282</p>	<p>Item 3 Employer(s) Name(s) and Address(es)</p>
	<p>No.1 <i>N.Y. Building of Adams</i></p> <p><i>Boise</i></p>
	<p>No.2 <i>W.N. Assistant (Lobbying Adams)</i></p> <p><i>Boise</i></p>
	<p>No.3</p> <p>No.4</p>

Item 4	Expenditures made by the lobbyist or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible personal property to any Legislator, or for or on behalf of any legislator.		
	Date	Amount	Name of Legislator Receiving or Benefited
		N/A	

Item 5	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.		LEGISLATIVE SUBJECT IDENTIFICATION		
	Subject Code (from table)	Bill, Resolution or Other Legislative Ident. Number	Appropriation Bill Number and Section Number	Code Subject	Code Subject
	1 3 4 7 11 12 16 17 19 20 26 28 29 30			01 Agriculture, horticulture, farming, and livestock 02 Amusements, games, athletics and sports 03 Banking, finance, credit and investments 04 Children, minors, youth, senior citizens 05 Church and religion 06 Consumer affairs 07 Ecology, environment, pollution, conservation, zoning, land and water use 08 Education 09 Elections, campaigns, voting, political parties 10 Equal rights, civil rights, minority affairs 11 Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds 12 Government, county 13 Government, federal 14 Government, municipal 15 Government, special districts 16 Government, state 17 Health service, medicine, drugs and controlled substances, health insurance, hospitals 18 Higher education 19 Housing, construction, codes 20 Insurance (excluding health insurance) 21 Labor, salaries and wages, collective bargaining 22 Law enforcement, courts, judges, crimes, prisons 23 License, permits 24 Liquor 25 Manufacturing, distribution and services 26 Natural resources, forest and forest products, fisheries, mining and mining products 27 Public lands, parks, recreation 28 Social insurance, unemployment insurance, public assistance, workmen's compensation 29 Transportation, highways, streets and roads 30 Utilities, communications, televisions, radio, newspaper, power, CATV, gas 31 Other (please specify) _____	

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

Larry Bente *April 12, 2005*
 Lobbyist signature Date