



State of Idaho
Ben Yursa
Secretary of State

LOBBYIST ANNUAL REPORT FORM

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

To Be Filed By:
L-2 LOBBYISTS
(Sec. 67-6619)

05 APR 19 AM 9:44

SECRETARY OF STATE
STATE OF IDAHO

Employment Terminated 2/28/05

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

Date prepared

2/28/05

Period covered

year ending

(Mo) (Day) (Yr)
2 | 28 | 05

Lobbyist's name and permanent business address
Jerry Deckard, CapitolWest
P. O. Box 953
Boise, ID 83701

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 Remember 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	\$575.30				
Food and Refreshment	\$694.40	\$694.40			
Living Accommodations					
Advertising					
Travel					
Telephone					
Other Expenses or Services					
Total	\$694.40	\$694.40			

*When the number of employers you are reporting for requires multiple L-2 forms to file 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. Names of Legislators & Public Officials in Group

Continued on attached page(s)

INSTRUCTIONS

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

Filing deadline: Annual report is due on January 31st.

TO BE FILED WITH:

Ben Yursa
Secretary of State
PO Box 33720
Boise, ID 83720-0080
Phone: (208) 334-2852 Fax: (208) 334-2282

Item 3 Employer(s) Name(s) and Address(es)

No. 1 GRECH Corporation
55 Technology Way
West Greenwich, RI 02817

No. 2

No. 3

No. 4

POSTED

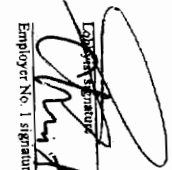
Item #	Date	Amount	Name of Legislator Receiving or Benefited
Expenditures made by the lobbyist or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible personal property to any Legislator, or for or on behalf of any legislator.			

Item #	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 Item Number	Appropriation Bill Number and Section Number


LEGISLATIVE SUBJECT IDENTIFICATION

- | | |
|--|--|
| 01 Agriculture, horticulture, farming, and livestock | 17 Health services, medicine, drugs and controlled substances, health insurance, hospitals |
| 02 Amusements, games, salutes 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 | 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, debt, 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, television, radio, newspaper, power, C.A.T.V., 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 67-6612a Idaho Code.



 Employer No. 1 signature _____ Date 3/1/05



 Employer No. 2 signature _____ Date _____

Employer No. 3 signature _____ Date _____

Employer No. 4 signature _____ Date _____