LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State

Phone: (208) 334-2852 Fax: (208) 334-2282

To Be Filed By:

L-3 LOBBYISTS (Sec. 67-6619)

Page 1 of 2 Page(s)
THIS SPACE FOR OFFICE USE ONLY

05 MAR 10 PH 4: 05

SECRETARY OF STATE STATE OF IDAHO

		(Type or print of See instructions													
Lobbyist's name and permanent business address								Date prepared				Period covered			
Debora K. Kristensen												✓ month ending			
601 W. Bannock Street								3-09-05				(Mo.) (Day) (Yr.)			
Boise, ID 83702													28	05	
Item 1	Totals	s of all reportat	ble expend	litures made or	r incurred	by Lobb	yist or	by Lo	bbyist's Empl	oyer on	behalf o	of Lobby	yist's Empl	loyer.	
Category of Expenditure Reimbursed Personal Living and Travel * Total Amount for						Proportionate amounts contributed by each emploitem 3, at bottom of page.)				loyer (Id	oyer (Identify employers, under				
	Not Have to b		All Employers		Empl	. 1	1 Employer No. 2		Employer No. 3		lo. 3	Employer No. 4			
	Entertainment Food and Refreshment			0.00	\$	0.	.00	\$		\$			\$		
Living	Living Accommodations			0.00	0.0						_				
Advert	Advertising			0.00		0.	.00								
Travel	Travel			0.00		0.	.00								
Teleph	Telephone			0.00		0.	.00_			l					
Other I	Other Expenses or Services			0.00		0.	.00								
Total			\$	0.00	\$	0.	.00	\$	0.00	\$	C	0.00	\$	0.00	
**	When the num	ber of employer	i s you are re	porting for requ	 ires multip	le L-3 for	ms to b	e filed a	total amount fo	l or all emp	loyers sh	ould be	entered on P	Page 1.	
Item		of each expend			dollars (\$			tor or				- LU: OS	6-1-1-1-0		
2	Date		Pl	ace		A	mount	+	Names	of Legisla	itors & P	ublic Of	ficials in Gro	oup	
							POSTED								
	Continued on	attached page(s))												
	INSTRUCTIONS							n	En	mployer(s) Name(s) and Address(es)					
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code.						No.I Idaho Allied Dailies 1618 N. Midland Blvd., Nampa, ID 83652									
Filing deadline: Monthly reports due within ten (10) days of the month for activities of the past month.							No.2								
TO BE FILED WITH: Ben Ysursa Secretary of State							No.3								
	PO Box 83720 Boise, ID 83720-0080								No.4						

Item 4	personal prop		erty to any Legislator, or for or on behalf of			· · ·						
	Date		Amount		Name of Legislator Receiving or Benefited							
Item 5 Subject (from the state of the state	Da none Subjector Houtthe Loit Code table)	al propote t matter use Bill, bbylst w Bill, Re	Amount Amount	ion, the number of the Senate legislative activity in which	any le	LEGISLATIVE SUE Subject Agriculture, horticulture, farming, and livestock Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs	or Bene	E Subject Health service, medicine, drugs 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, pemits 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,				
					12 13 14 15 16	Government, federal Government, municipal Government, special districts Government, state	29 30 31	workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas 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.