Rev		

State of Idaho

Ben Ysursa

LOBBYIST	ANNUAL.	REPORT	FORM
	AUTOAL	MLI OKI	T OIVI

To Be Filed By:

L-2 LOBBYISTS

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

		Secretary of S		(Sec	c. 67 - 6619)		2011 FEB	122 AM 9:	1 ~
				Annual		 Semi-Annu	ıal gor		17 1
		(Type or print clear See instructions a							
obbyis		nd permanent busine			Date p	repared	TF	Period covered	
18	ELVAS	GALOWAY				year ending			ng
V	174 W	1. A St 5	* 9						(Yr.)
ı	Moscov	. Ib 83	ENB			/ /		61 31	۲007
Item 1	Tot	tals of all reportal	ble expenditures made of	or incurred by Lot	byist or by	Lobbyist's Emp	loyer on behalf of	Lobbyist's Emplo	yer.
		Expenditure al Living and Travel	*Total Amount for	Proportionate am		outed by each emp	loyer (Identify em	ployers, under	
Expense	es Pertaining	to Lobbying Activity to be Reported	All Employers	Employer No		Employer No. 2	Employer No.	3 Employer	No. 4
	inment	ıment	s 97.1S	8	_		s	s	
	Accommo					TTT TIME SECTION TO THE SECTION OF T	,		mercaharan kanda haran sari 1984 di si apis, 1984a
Adverti									
ravel									
Telepho	one								
Other E	xpenses o	r Services			_				
		Total	s <u>97.</u> 16	s	s _		\$	<u> </u>	
When	the number	r of employers you	are reporting for requir	es multiple I -2 for	rms to be fil	ed a total amount	for all employers	should be entered	on Page 1
Item			iture of more than fifty						on rage 1.
2	Date		Place		Amount	Names of Legis	slators, Public and l	Executive Officials	in Group
	Continued o	on attached page(s)							
INSTRUCTIONS			Item 3	En	nployer(s) Name(s)	and Address(es)			
	o should f		ny lobbyist registered u	nder Section	No. 1	1200ciated 2.0. 44253		Unsugaraty To esert	
Fili	ng deadli		rt is due on January 31s obbist semi-annual repo		No. 2				
то	BE FILED								
Ben Ysursa Secretary of State				No. 3					
PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282				No. 4					

Item 4	perso	nal prope	erty to any Legisl	ator, Public or Executive O	or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible or bublic or Executive Official or for or on behalf of any Legislator, Public or Executive Official.					
	Date Amount Nam			ne of Legislator, Public or Executive Official Receiving or Benefiting						
Item 5	or Ho the L	ouse Bill, obbyist w Bill, Re	, , ,	ion, the number of the Senate legislative activity in which posing. Appropriation Bill Number and Section Number	Code 01	LEGISLATIVE SUE Subject Agriculture, horticulture, farming, and livestock		IDENTIFICATION Subject Health service, medicine, drugs and controlled substances, health		
					02	Amusements, games, athletics	19	insurance, hospitals		
08		High	er Ed - Related		03 04 05 06 07 08 09 10 11 12 13 14 15 16	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, municipal Government, special districts Government, state	18 19 20 21 22 23 24 25 26 27 28 29 30	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)		
						ERTIFICATION: I hereby certify the correct statement in accordance with the co				
Item				lecision, procurement,	1 7	obbyist signature		Date		
6			or bid process, fina was supporting or	ancial services agreement or opposing.						
					Er	nployer No. 1 signature		Date		
					Er	nployer No. 2 signature		Date		
					Er	nployer No. 3 signature		Date		
					г.	pployer No. 4 signature		Date		

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