

LOBBYIST MONTHLY REPORT FORM

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



State of Idaho
Ben Yursa
Secretary of State

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

06 MAR 13 AM 11:46
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 Larry Benton P.O. Box 667 Wilder, ID 83676	Date prepared March 10, 2006	Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr.) Mar 10 2006
--	-------------------------------------	--

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 <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	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Food and Refreshment	_____	_____	_____	_____	_____
Living Accommodations	_____	_____	_____	_____	_____
Advertising	_____	_____	_____	_____	_____
Travel	_____	_____	_____	_____	_____
Telephone	_____	_____	_____	_____	_____
Other Expenses or Services	_____	_____	_____	_____	_____
Total	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>

*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

POSTED

Continued on attached page(s)

<p style="text-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 Optometric Assn, PO Box 667 Wilder ID 83676</i></p> <p>No.2 <i>Idaho Assn. of Nurse Practitioners 2560 Northrup Blvd McCall ID</i></p> <p>No.3 <i>Coalition of Kos HMB Providers 864 Cleveland Caldwell ID 83405</i></p> <p>No.4 <i>ID Res. Supportal Group ASDC 1562 Chestnut Boise ID 83725</i></p>
--	---

LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Yursa
Secretary of State

To Be Filed By:

L-3 LOBBYISTS
(Sec. 67-6619)

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

Lobbyist's name and permanent business address Larry Benton P.O. Box 667 Wilder, ID 83676	Date prepared March 10, 2006	Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr.) Mar 10 2006
--	-------------------------------------	--

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 <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	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Food and Refreshment	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Living Accommodations	_____	_____	_____	_____	_____
Advertising	_____	_____	_____	_____	_____
Travel	_____	_____	_____	_____	_____
Telephone	_____	_____	_____	_____	_____
Other Expenses or Services	_____	_____	_____	_____	_____
Total	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>

*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
NONE			

Continued on attached page(s)

<p style="text-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 ID Lumber Trade Assn. 7154 W. State St. Boise, ID 83703 (Boise)</p> <p>No.2 ID. Bd. of Dev. Disabilities Agencies 518 W. 6th Meridian, ID 83642</p> <p>No.3 ID. Naturopathic Physicians Assn. 4219 W. Emerald Boise, ID 83705</p> <p>No.4 Idaho Acupuncture Assn. 4219 W. Emerald Boise, ID 83705</p>
--	--

LOBBYIST MONTHLY REPORT FORM



State of Idaho
Ben Yursa
Secretary of State

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

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

Lobbyist's name and permanent business address Larry Benton P.O. Box 667 Wilder, ID 83676	Date prepared March 10, 2006	Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr.) Mar 10 2006
--	---------------------------------	--

Item 1 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	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>

*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	
None				

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	Idaho Progressive HealthCare Assn. 461 W. Center Dr Chicago IL 60601
	No.2	Idaho Assisted Living Assn. 338 LINDALE ST BOISE, ID 83805
	No.3	ID. Chapter - Am. Inst. Architects 270 N. 27th BOISE, ID 83702
	No.4	ID. Podiatry Medical Assn. 270 N. 27th BOISE, ID 83702

LOBBYIST MONTHLY REPORT FORM



State of Idaho
Ben Yursa
Secretary of State

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

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

Lobbyist's name and permanent business address Larry Benton P.O. Box 667 Wilder, ID 83676	Date prepared March 10, 2006	Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr.) Mar 10 2006
--	---------------------------------	--

Item 1 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	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>	\$ <u>0.00</u>

*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
	NONE			

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>	Item 3	Employer(s) Name(s) and Address(es)
	No.1	Idaho State Broadcaster S 270 W. 27th Boise ID 83702
	No.2	
	No.3	
	No.4	

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
	None		

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	Code	Subject
	11 12 16 17 28 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 services, 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, workman'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.

Curry Bouten 10 Mar 06
 Lobbyist signature Date