LOBBYIST REPORT FORM



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State of Idaho

Ben Ysursa Secretary of State

To Be Filed Hy:

LOBBYISTS (Sec. 67-6619) 03 JAN 30 PM 3:45 TE OF IDAHO

(Type or print clearly in black ink) See instructions at bottom of page Period covered Lobbyist's name and permanent business address Date prepared Paul Jasosh year ending 1-15-08 7200 Burrister (Day) (Mo.)(Yr.) Boise, ID 83704 07 30 12 Item Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer. Proportionate amounts contributed by each employer (Identify employers, under Category of Expenditure Reimbursed Personal Living and Travel *Total Amount for Item 3, at bottom of page.) All Employers Expenses Pertaining to Lobbying Activity Do Not Have to be Reported Employer No. 1 Employer No. 2 Employer No. 3 Employer No. 4 Entertainment 490 Food and Refreshment Living Accommodations Advertising Travel Telephone Other Expenses or Services Total *When the number of employers you are reporting for requires multiple L-2 forms to be filed a total amount for all employers should be entered on Page 1. The totals of each expenditure of more than fifty dollars (\$50) for a legislator, other holder of public office, and executive officials. ltem 2 Amount Names of Legislators, Public and Executive Officials in Group 7630 Rep. Edmonson 3-8-07 Quest arena Rep. Labrador 7630 3-8-07 Quest arena 7630 Rep. Crane QUEST arena 3-8-07 76 30 Rep. Hagadorn 3-8-07 76 30 ReP. 3-8-07 Quest arena Continued on attached page(s) Item INSTRUCTIONS Employer(s) Name(s) and Address(es)

I sano Fraternal Grover of Police Who should file this form: Any lobbyist registered under Section NO. 1 P.O BOX 1542 67-6617 Idaho Code Idano Fulls, ID 83403 Filing deadline: Annual report is due on January 31st. No. 2 Executive Lobbyist semi-annual report due July 31st. TO BE FILED WITH: No. 3 Ben Ysursa Secretary of State PO Box 83720 Boise, ID 83720-0080 No. 4 Phone: (208) 334-2852 Fax: (208) 334-2282

Item 4	perso	personal property to any Legislator, Public		ator, Public or Executive Of	y the lobbylst's employer in the nature of contributions of money or other tangible or intangit ic or Executive Official or for or on behalf of any Legislator, Public or Executive Official.				
		Onte	Amount		ne of 1.	egislator, Public or Executive Offi			
Item 5					Code	LEGISLATIVE SUB		Subject	
Subject (from			esolution or Other tive Ident. Number	Appropriation Bill Number and Section Number S 112.3	01 02 03 04 05 06 07 08 09 10 11	Ol Agriculture, horticulture, farming, and livestock O2 Amusements, games, athletics and sports O3 Banking, finance, credit and investments O4 Children, minors, youth, senior citizens O5 Church and religion O6 Consumer affairs O7 Ecology, environment, pollution, conservation, zoning, land and water use O8 Education O9 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	17 18 19 20 21 22 23 24 25 26 27 28 29 30	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, 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)	
Item 6	cor	Identify any rule, ratemaking decision, procurement, contract bid or bid process, financial services agreement and lobbyist was supporting or opposing.		ancial services agreement or	En En	certification: I hereby certify the orrect statement in accordance with a complex signature complex No. 2 signature complex No. 2 signature complex No. 3 signature complex No			
·						mployer No. 4 signature		Date	