Rev. 05/2008



State of Idaho

Ben Ysursa Secretary of State

LOBBYIST REPORT FORM

		 1
✓	ANNUAL	SEMI-ANNUA

Page	of	Page(s)
THIS SPAC	E FOR OFFI	CE USE ONLY

To Be Filed By:

LOBBYISTS (Sec. 67-6619)

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			arly in black ink)		`		ĺ		ST	ATE	OF ID	AHA	Ė
obbyis			t bottom of page			Date	prepared				Period co		
Lobbyist's name and permanent business address						Daw	prepared	•		1	ري احا	year endir	1σ
Steven Meade 222 N 13th St.											<u> </u>	year endir	1.R
Boise, ID 83702							1/29/09				(Mo.)	(Day)	(Yr.)
D0130, 1D 00702							1720700			12	31	80	
Item	Total	e of all reportal	ble expenditures made o	r inquered b	y I obb	wist or	by Labb	uict's Empl	over on b	abalf of	'I obbydd	t'e Employ	L/Ar
1			T Table to		•	•	•		•		•		
Category of Expenditure Reimbursed Personal Living and Travel			*Total Amount for All Employers	Item 3, at bottom of			nts contributed by each employer (Identify employers, under f page.)						
Expenses Pertaining to Lobbying Activity Do Not Have to be Reported		Employer No. 1		Employer No. 2		Employer No. 3			Employer No. 4				
Enterta	inment					•							
	nd Refreshme	ent	\$0.00	s		5	\$		s		5	S	
Living.	Accommoda	tions									,		
Adverti	sing												
Travel													
Telepho	ne												
_	expenses or S	Services				_ -							
				·		_							
		Total	\$ 0.00	\$	0.0	0 .	\$	0.00	s	0	.00	S	0.00
		IOLAI	J	•——		_],	₽		J			'	
*When t			re reporting for requires m						-				
		of each expend of their housel	liture of more than seve	enty-five do	llars (\$	75) for	a legisla	itor, other h	older of	public c	office, ex	ecutive of	fficials and
Item-	memoer(s)	Of their nouser	noid.					Names of Legislators, Public and Executive Officials					
2 Date			Place	Amount									
				l									
	Continued on a	ttached page(s)				•	_			_	_		
INSTRUCTIONS						Iten 3	3	Employer(s) Name(s) and Address(es)					
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code						No. 1 Idaho School Boards Association PO Box 9797, Boise ID 83707							
Filing deadline: Annual report is due on January 31st. Executive Lobbyist semi-annual report due July 31st.						No. 2							
													TO BE FILED WITH:
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	property to any for any or on hehalf of any Legislator Public or Executive Official or Household Member(s)											
	Date Amount Name of Legisl					lator, Public or Executive Official and Household Member(s) Receiving or Benefiting						
Item 5	or Ho	ouse Bill, obbyist w		ion, the number of the Senate legislative activity in which posing.	Code	LEGISLATIVE SUE Subject Agriculture, horticulture,		IDENTIFICATION Subject Health service, medicine, drugs				
(from					*-	farming, and livestock	••	and controlled substances, health				
(Irom	(a Die)	Legislative Ident. Number and Section Number		02 03 04 05 06 07 08 09 10 11	Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion	18 19 20 21 22 23 24 25 26 27 28 29 30	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)					
						ERTIFICATION: I hereby certify the correct statement in accordance with s						
Item Identify any rule, ratemaking decision, procurement,						Obpyist signature		Date				
contract bid or bid process, financial services agreement or bond lobbyist was supporting or opposing.					4	Kann Ede Verra miloyer No. 1 signature	ノ	/ <u>129/08</u> Date				
				E	mployer No. 2 signature		Date					
					E	nployer No. 3 signature		Date				
						mployer No. 4 signature		Date				