Rev. 05/2008



State of Idaho

Ben Ysursa Secretary of State

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

LOBBYIST	REPORT	FORM
DODDIEST	MEI OILI	LOM

✓ ANNUAL SEMI-ANNUAL

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

To Be Filed By:

L-2 LOBBYISTS (Sec. 67-6619)

09 JAN 30 PM 3: 12

STATE OF IDAHO

(Type or print clearly in black ink) See instructions at bottom of page Lobbyist's name and permanent business address Date prepared Period covered year ending Steven A Millard P O Box 1278 (Mo.) (Day) (Yr.) Boise, ID 83701-1278 01/30/2009 2009 31 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 *Total Amount for Item 3, at bottom of page.) Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity All Employers Do Not Have to be Reported Employer No. 1 Employer No. 4 Employer No. 2 Employer No. 3 Entertainment 2,977.80 2,977.80 Food and Refreshment Living Accommodations Advertising 1,207.03 1,207.03 Travel Telephone 360.00 360.00 Other Expenses or Services 4,544.83 4,544.83 0.00 0.00 0.00 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 ! The totals of each expenditure of more than seventy-five dollars (\$75) for a legislator, other holder of public office, executive officials and member(s) of their household. Item-Names of Legislators, Public and Executive Officials 2 Date Place Amount and Household Members in Group NONE Continued on attached page(s) Item INSTRUCTIONS Employer(s) Name(s) and Address(es) Who should file this form: Any lobbyist registered under Section Idaho Hospital Association 67-6617 Idaho Code P O Box 1278 Boise, ID 83701-1278 Filing deadline: Annual report is due on January 31st. Executive Lobbyist semi-annual report due July 31st. No. 2 TO BE FILED WITH: No. 3 Ben Ysursa Secretary of State PO Box 83720 Boise, ID 83720-0080 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, for any or on behalf of any Legislator, Public or Executive Official or Household Member(s).								
	D	ate	Amount	Name of Legis	Name of Legislator, Public or Executive Official and Household Member(s) Receiving or Benefiting				
Item				ion, the number of the Senate legislative activity in which		LEGISLATIVE SUI	зјест	IDENTIFICATION	
5			as supporting or op		Code	Subject	Code	Subject	
Subject (from	table)	Legislat Pl	esolution or Other ive Ident. Number ease see attached	Appropriation Bill Number and Section Number	01 02 03 04 05 06 07 08 09 10 11	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 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	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	contract hid or hid process financial carvious agreement or		F F	CERTIFICATION: 1 hereby certify the orrect statement in accordance with st					
					J E	mployer No. 4 signature	_	Date	