

TO BE FILED WITH:

Ben Ysursa

Secretary of State PO Box 83720 Boise, ID 83720-0080

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

State of Idaho

Ben Ysursa Secretary of State

LOBBYIST	REPORT	FORM
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To Be Filed By

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		L-2		3YISTS 67-6619)			SECE	EVANY OF STATE	
(Type or print clea See instructions a	it bottom of page						STA	TE OF IDAHO	
Lobbyist's name and permanent busine	ss address			Date prepare	d		Period	covered	
Bob Naerebout							year ending		
1182 Eastland drive North, 3 Twin Falls, Idaho 83301			01/12/09			(Mo	(Mo.) (Day) (Yr.)		
		02.00				12 31 08			
Item Totals of all reporta	ble expenditures made of	or incurred l	by Lobbyi	ist or by Lobb	yist's Emp	loyer on l	behalf of Lobb	yist's Employer.	
Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity	*Total Amount for All Employers	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)							
Do Not Have to be Reported	All Elliployers	Employer No. 1		Emplo	Employer No. 2		oloyer No. 3	Employer No. 4	
Entertainment Food and Refreshment	\$ 13,774.62	s 13	3,774.62	_ s_		\ s		\ \ \	
Living Accommodations	383.51		383.51	_ -		*			
Advertising	0.00		0.00	_					
Travel	414.11		414.11	_					
Telephone	600.00	600.00		_					
Other Expenses or Services	66.42	ļ	66.42	_					
Total	s 15,238.66	s15	,238.66	_ s	0.00	. s	0.00	s0.00	
*When the number of employers you a									
The totals of each expend member(s) of their house		enty-five do	ollars (\$75	i) for a legisla	ator, other l	holder of	public office,	executive officials and	
2 Date	Place		Amo	Names of Legislators, Public and Executive Official ount and Household Members in Group					
				Ì					
			1						
Continued on attached page(s)									
INSTRUCTIONS				Item 3					
Who should file this form: A	ny lobbyist registered u	nder Section	n	_{No. 1} Idaho	Dairymer	n's Asso	ociation		
Filing deadline: Annual report	t is due on January 31st. bbyist semi-annual repo		31st.	No. 2 Twin 5	Eastland	Drive N	orth Suite A	<u> </u>	

No. 3

No. 4

Item	Expenditures made by the lobbyist or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible person property to any, for any or on behalf of any Legislator, Public or Executive Official or Household Member(s).										
4						lator, Public or Executive Official and Household Member(s) Receiving or Benefiting					
Item				ion, the number of the Senate		LEGISLATIVE SUB	JJECT	IDENTIFICATION			
5			Resolution or other as supporting or op	legislative activity in which							
Subject (from 0	t Code table)	H393, H428, H484,		Appropriation Bill Number and Section Number	01 02 03 04 05 06 07 08 09 10 11	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	17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	Subject 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	contrac	ct bid or b	, ratemaking decisi id process, financia as supporting or opt	services agreement or	I E	CERTIFICATION: I hereby certify the correct statement in accordance with S cobbyist signature mployer No. 1 signature mployer No. 2 signature mployer No. 3 signature					
] _ E	mployer No. 4 signature		Date			