## State of Idaho



Ben Ysursa Secretary of State

## LOBBYIST ANNUAL REPORT FORM

To Be Filed By:

L-2

LOBBYISTS (Sec. 67-6619)

$\checkmark$	Annual	Semi-Annual

Page of Page(s)
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2009 J.M. - 7 P. H. 4: 4: 4:

GEOLLI LUISTATE STATE CE IDAHO

	(Type or print clear See instructions a							C	STATE		
Lobbyis	's name and permanent busine	ess address		Date prepared			Регі	Period covered			
Given	rah E. Nelson s Pursley LLP			January 5, 2009					year end	ing	
	/ Bannock Box 2720						(N	10.)	(Day)	(Yr.)	
	ID 83701						1	2	31	2008	
Item 1	Totals of all reportab	ole expenditures made o	r incurred by Lobb	yist or by	Lobbyist's Empl	loyer on b	ehalf of Lo	bbyis	t's Emplo	yer.	
Reimbi	ntegory of Expenditure arsed Personal Living and Travel as Pertaining to Lobbying Activity	*Total Amount for All Employers	Proportionate amou		uted by each emp	loyer (Ide	ntify emplo	yers,	ınder		
	Not Have to be Reported		Employer No. 1	E	Employer No. 2	Emp	loyer No. 3		Employer	r No. 4	
Entertai Food ar	nment nd Refreshment	\$ 0.00	\$ 0.00	\$ _		\$		_   \$			
Living A	Accommodations			_   _		-					
Adverti	sing			-   -							
Travel				-   -				-			
Telepho	one							-			
Other E	xpenses or Services			_   _							
	Total	s 0.00	s 0.00	\$		s		_ s			
∗U/han (	the number of employers you	l are reporting for requir	os multiple I 2 form	s to be file	ad a total amount	for all an	nnlovare ch	auld b	a antarad	on Page I	
Item	The totals of each expendi		Towns and the second							on rage 1.	
2	Date	Place		nount	Names of Legis					in Group	
None											
	ontinued on attached page(s)										
	INST	RUCTIONS		Item 3	En	nployer(s)	Name(s) and	i Addr	ess(es)		
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code				No. 1 City of Pocatello 922 N 7th Street, P.O. Box 4169, Pocatello, ID 83205						3205	
Filing deadline: Annual report is due on January 31st.  Executive Lobbist semi-annual report due July 31st.				No. 2							
TO BE FILED WITH:											
	Secr	en Ysursa etary of State		No. 3							
	Boise.	Box 83720 ID 83720-0080 852 Fax: (208) 334-2	282	No. 4							

Item 4	perse	onal prop	erty to any Legis	lator, Public or Executive C	Officia	l or for or on behalf of any Legisla	tor, Pub					
	I	Date	Amount	Na	ame of Legislator, Public or Executive Official Receiving or Benefiting							
Item 5 Subject (from	Subjet or Hot the L	ouse Bill, obbyist w Bill, Re	Resolution or other as supporting or o	lion, the number of the Senate legislative activity in which pposing.  Appropriation Bill Number and Section Number	Cod 01 02 03 04 05 06 07 08 09 10 11 12 13 114 15 16	de Subject Agriculture, horticulture, fanning, 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	Code 17  18 19 20 21 22 23 24 25 26  27 28 29 30	MENTIFICATION  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, pennits 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 None	contr	act bid o		ecision, procurement, icial services agreement or opposing.		CERTIFICATION: I hereby certify the correct statement in accordance with 8 cobbyist signature comployer No. 1 signature comployer No. 2 signature						
					] _	nployer No. 3 signature		Date				
					. Ei	nployer No. 4 signature		Date				

## State of Idaho

Ben Ysursa Secretary of State

Lobbyist's name and permanent business address

T	OBBYIST	ANNIJAT.	REPORT	FORM
L	ODDIISI	AINIUAL	KU OKI	L (NIXIA

To Be Filed By:

LOBBYISTS L-2 (Sec. 67-6619)

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2008

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Page(s)

Semi-Annual Annual

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

Date prepared Period covered year ending January 5, 2009

Deborah E. Nelson Givens Pursley LLP 601 W Bannock P.O. Box 2720 Boise, ID 83701

Totals of all reportable expenditures made or incurred by Lohbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer.								
Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity	*Total Amount for	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)						
Do Not Have to be Reported	All Employers	Employer No. 1	Employer No. 2	Employer No. 3	Employer No. 4			
Entertainment Food and Refreshment	\$ _0.00	\$ 0.00	\$	\$	\$			
Living Accommodations								
Advertising								
Travel								
Telephone								
Other Expenses or Services								
Total	s <u>0.00</u>	s_0.00	s	s	s			

\*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.

Item	The totals of	totals of each expenditure of more than fifty dollars (\$50) for a legislator, other holder of public office, and executive officials.							
2	Date	Place	Amount	Names of Legislators, Public and Executive Officials in Group					
None									

Continued on attached page(s)		
INSTRUCTIONS	Item 3	Employer(s) Name(s) and Address(es)
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code		reg Young, Teton Capital Management 2050 Regnart Road, Cupertino, CA 95014-4841
Filing deadline: Annual report is due on January 31st. Executive Lobbist 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	Expe	enditures onal prop	made by the lob erty to any Legisl	byist or by the lobbyist's e ator, Public or Executive O	employer in the nature of contributions of money or other tangible or intangible official or for or on behalf of any Legislator, Public or Executive Official.						
	I	Date	Amount	Nai	ne of Legislator, Public or Executive Official Receiving or Benefiting						
Non											
Item 5	or He	ouse Bill,		ion, the number of the Senate legislative activity in which possing.	Code	LEGISLATIVE SUI					
Subject (from:	Codc	Bill, Re	., .	Appropriation Bill Number and Section Number	01 02 03 04 05 06 07 08 09 10 11		17 18 19 20 21 22 23 24 25 26 27 28 29 30	Subject Itealth service, medicine, drugs and controlled substances, health insurance, hospitals Iligher education Housing, construction, codes Insurance (excluding health insurance) Labor, sataries 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 None	con	tract bid o		ecision, procurement, ncial services agreement or opposing.	En	ERTIFICATION: I hereby certify the preci statement in accordance with Subbyist signature apployer No. 1 signature apployer No. 2 signature	Section 6				
					En	nployer No. 4 signature		Date			