Rev. 06/2006

LOBBYIST ANNUAL REPORT FORM



State of Idaho

Ben Ysursa: Secretary of State

101 111	TOTIL TEDA OTO						
To Be Filed By:							
L-2	LOBBYISTS (Sec. 67-6619)						

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

(Type or print clearly in black ink)

SECTION OF STATE
STATE OF CAHO

Boise, ID 88703		12	3/	2008
490 W. State St.	1 15 /2008	(Mo.)	(Day)	(Yr.)
Lobbyist's name and permanent business address	Date prepared	Period cov	year endir	ng
See instructions at bottom of page				

Category of Expenditure	Category of Expenditure Proportionate amounts contributed by each employer (Identify employers, under						
Reimbursed Personal Living and Tra Expenses Pertaining to Lobbying Acti Do Not Have to be Reported	VA	Employer No. 1	Employer No. 2	Employer No. 3	Employer No. 4		
Entertainment Food and Refreshment Living Accommodations	s	s	\$	s	s		
Advertising Travel Telephone							
Other Expenses or Services				-			
Tota	s _0.00	s <u>O.</u> 60	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 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			

INSTRUCTIONS	Item 3	Employer(s) Name(s) and Address(es)		
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code Filing deadline: Annual report is due on January 31st. Executive Lobbist semi-annual report due July 31st.		Idaho Auto Dealers Association 4980 W State Street		
		Boise, ID 83703		
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			

Expenditures made by the lobbyist or by the lobbyist's employer in the nature of contributions of money of personal property to any Legislator, Public or Executive Official or for or on behalf of any Legislator, Public or					lic or Executive Official.			
	Date Amount Nam			ne of L	egislator, Public or Executive Office	cial Red	eiving or Benefiting	
Item 5	or Ho	ouse Bill, obbyist w		ion, the number of the Senate legislative activity in which oposing. Appropriation Bill Number	Code	LEGISLATIVE SUB Subject Agriculture, horticulture,		IDENTIFICATION Subject Health service, medicine, drugs
(from			ive Ident. Number	and Section Number	02 03 04 05 06 07 08 09 10 11	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 27 28 29 30	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	Identify any rule, ratemaking decision, procurement, contract bid or bid process, financial services agreement or bond lobbyist was supporting or opposing.		L Er	DERTIFICATION: I hereby certify the orrect statement in accordance with St				
						nployer No. 4 signature		Date

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