LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

L-3

LOBBYISTS (Sec. 67-6619)

Page___of__Page(s)
THIS SPACE FOR OFFICE USE ONLY

08 MAR - 7 PM 3:58 CONCLARY OF STATE STATE OF IDAHO

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

	See instructions a						1		
Lobbyist	's name and permanent busi	ness address		Date p	repared		Period covered		
Ru	ssell W Newc	omb, MD		'			month ending		
33	92 Highlawn	Drive		1			(Mo.) (Day) (Yr.)		
T_{V}	in Falls, ID	83301					2 29 2008		
Item 1	Totals of all report	able expenditures made o	r incurred by Lob	byist or by	Lobbyist's Emp	loyer on behalf	of Lobbyist's Employer.		
Ca Reimbu	tegory of Expenditure		portionate amounts contributed by each employer (Identify employers, m 3, at bottom of page.)			employers, under			
	s Pertaining to Lobbying Activit Not Have to be Reported	y All Employers	Employer No.	1	Employer No. 2	Employer l	No. 3 Employer No. 4		
Entertai Food an	nment d Refreshment	\$	\$	\$_		\$	\$		
Living A	Accommodations			-					
Adverti	sing			_ -					
Travel				_ -					
Telepho	ne			_ -					
Other E	xpenses or Services			_ -					
	Total	\$	\$	\$.		\$	\ \$		
*\\/hen	the number of employers t	you are reporting for requir	es multiple I -2 for	ms to he f	iled a total amour	t for all employ	rers should be entered on Page 1.		
Item		diture of more than fifty d			ther holder of pu	blic office, and	executive officials.		
2	Date	Place	A	mount	Names of Legis	slators, Public ar	nd Executive Officials in Group		
			[
	1								
П	 Continued on attached page	(s)	1		I				
	INS	TRUCTIONS		Item 3	Employer(s) Name(s) and Address(es)				
							cial Association		
•		Any lobbyist registered u	ınder Section	No. 1		W Jeff			
67-6	6617 Idaho Code	•		Boise, ID 83702					
	ng deadline: Monthly ath for activities of the pa	reports due within ten (st month.	10) days of the	No. 2					
то	BE FILED WITH:								
		Ben Ysursa		No. 3					
	P	cretary of State O Box 83720							
		e, ID 83720-0080 -2852 Fax: (208) 334-2	2282	No. 4					
	Filone: (208) 334	-2032 Fax. (200) 334-2	-404						

Item 4	Expenditures made by the lobbyist or by the lobbyist's employer in the nature of contributions of money or other tangible or intang personal property to any Legislator, Public or Executive Official or for or on behalf of any Legislator, Public or Executive Official.									
	Date Amount		Amount	Nan	me of Legislator, Public or Executive Official Receiving or Benefiting					
Item 5	or Hou	se Bill, l		ion, the number of the Senate legislative activity in which	Code	LEGISLATIVE SUB		IDENTIFICATION Subject		
Subject				Appropriation Bill Number	01	Agriculture, horticulture,	17	Health service, medicine, drugs		
(from t	able) l	Legislati	ve Ident. Number	and Section Number	02	farming, and livestock Amusements, games, athletics		and controlled substances, health insurance, hospitals		
17	1	HI	1420			and sports	18	Higher education		
, Ø		SR	1420		03	Banking, finance, credit and investments	19 20	Housing, construction, codes Insurance (excluding health		
ig		30	. 7.60		04 05 06 07 08 09 10 11 12 13 14 15 16	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	20			
Identify any rule, ratemaking decision, procurement, contract, bid or bid process, financial services or bond lobbyist was supporting or opposing.					Jussell a Mount					
						Lobbyist signature		Date		