State of Idaho

Ben Ysursa Secretary of State

LOBBYIST MONTHLY REPORT FORM

To Be Filed By:

L-3

LOBBYISTS (Sec. 67-6619)

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

CS 2PR 10 PH 4:55

		be or print clear								STATE OF	iDA _H	0	
Lobbyis		permanent busine					D	ate p	prepared		Period co	vered	
	eil V. Colwe							·	·			month er	nding
	ista Corpo		•						April 10, 2	2008	(Mo.)	(Day)	(Yr.)
802 W. Bannock, Ste 306 Boise, ID 83702								7,5111 10, 2000			03	1	1 ` ´
	1000										03	31	2008
Item 1	Totals	s of all reportat	ole expend	litures made o	r incurred	by Lobb	yist o	or by	Lobbyist's Empl	loyer on behalf	of Lobbyis	st's Emplo	yer.
Category of Expenditure Reimbursed Personal Living and Travel *Total Amount for					Proportion Item 3, a			s contributed by each employer (Identify employers, under page.)					
Expenses Pertaining to Lobbying Activity Do Not Have to be Reported			All	Employers	Employer No. 1			Employer No. 2		Employer No. 3		Employer No. 4	
Entertainment Food and Refreshment			\$	637.30	s			\$		\$	\	·	
Living	Accommodat	ions											
Adverti	sing												
Travel													
Telepho	one			40.00									
•	Expenses or S	ervices											
		Total	s	677.30	\$	0.0	00	\$.	0.00	s	0.00	·	0.00
*When	the number o	f employers you	i u are renoi	ting for requir	ı es multinle	L-2 form	ns to	he f	iled a total amoun	t for all employe	rs should b	ne entered	on Page 1
Item									other holder of pu				on ruge 1:
2	Date		Pla	nce		A	mount		Names of Legis	lators, Public and	l Executive	Officials	in Group
			NO	NE									
	Continued on	attached page(s)				'							
		INST	RUCTIO	NS			Ite 3	m	En	mployer(s) Name(s	s) and Add	ress(es)	
		this form: A	ny lobbyi	st registered u	nder Section	on	No. 1		vista Corporat O Box 3727, S		99220-3	3727	
	6617 Idaho C									· · · · · · · · · · · · · · · · · · ·			
Fili mor	ng deadline th for activit	: Monthly repaires of the past	ports due month.	within ten (10) days o	of the	No. 2						· · · · · · · · · · · · · · · · · · ·
то	BE FILED V	VITH:											
	Ben Ysursa Secretary of State						No. 3						
		PO	Box 8372	0									
	Phor	Boise, l ne: (208) 334-2	ID 83720- 852 Fax	0080 (: (208) 334 - 2	282		No. 4						

Item 4	personal prop		erty to any Legisl		ublic or Executive Official or for or on behalf of any Legislator, Public or Executive Official. Name of Legislator, Public or Executive Official Receiving or Benefiting							
	1	aic	Amount	NONE		begistator, ratine of Executive on	icial ixe	ecting of Benefiting				
item 5	or Ho	use Bill,	Resolution or other		Cod	LEGISLATIVE SUBJECT IDENTIFICATION Code Subject Code Subject						
or He				legislative activity in which		Code Subject 01 Agriculture, horticulture, farming, and livestock 02 Amusements, games, athletics and sports 03 Banking, finance, credit and investments 04 Children, minors, youth, senior citizens 05 Church and religion 06 Consumer affairs 07 Ecology, environment, pollution, conservation, zoning, land and water use 08 Education 09 Elections, campaigns, voting, political parties 10 Equal rights, civil rights, minority affairs 11 Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds 12 Government, county 13 Government, federal 14 Government, special districts 16 Government, state		Code 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 identify any rule, ratemaking decision, procurement, contract, bid or bid process, financial services or bond lobbyist was supporting or opposing. NONE						CERTIFICATION: I hereby certificorrect statement in accordance of the control of	ry that the vith Sec	the above is a true, complete and tion 67-6624 Idaho Code. 20 4/10/08 Date				