Continued on attached page(s)

Rev. 05/2008

LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State

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To Be Filed By:

LOBBYISTS (Sec. 67-6619)

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THIS SPACE FOR OFFICE USE ONLY

OB FEB -6 AM 11:00

STATE OF IDAHO

(Type or print clearly in black ink) See instructions at bottom of page Lobbyist's name and permanent business address Date prepared Period covered Steve Tobiason month ending 3000 E. Pine Avenue (Mo.) (Day) (Yr.) Meridian, ID 83642 2/6/09 31 09 Ilem Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer. Proportionate amounts contributed by each employer (Identify employers, under Category of Expenditure Total Amount for Reimbursed Personal Living and Travel Item 3, at bottom of page.) Expenses Pertaining to Lobbying Activity All Employers Do Not Have to be Reported Employer No. 1 Employer No. 2 Employer No. 3 Employer No. 4 Entertainment 0.00 0.00 Food and Refreshment Living Accommodations Advertising Travel Telephone Other Expenses or Services 0.00 0.00 0.00 0.00 0.00 Total *When the number of employers you are reporting for requires multiple 1-2 forms to be filed a total amount for all employers should be entered on Page 1. The totals of each expenditure of more than seventy-five dollars (\$75) for a legislator, other holder of public office, executive officials and member(s) of their household. Jtem-Names of Legislators, Public and Executive Officials 2 Place Amount and Household Members in Group Date

Employer(s) Name(s) and Address(cs) INSTRUCTIONS Steve Tobiason No. I Who should file this form: Any lobbyist registered under Section Blue Cross of Idaho Health Service, Inc. 67-6617 Idaho Code 3000 E. Pine Avenue Filing deadline: Monthly reports due within fifteen (15) days of the No. 2 Meridian, ID 83642 month for activities of the past month. TO BE FILED WITH: No. 3 Ben Ysursa Secretary of State PO Box 83720 Boise, 1D 83720-0080 No. 4 Phone: (208) 334-2852 Fax: (208) 334-2282

Item 4	property to any, for any or on behalf of any Legislator, Pub							
	Da	te	Amount	Name of Legis	slator, F	Public of Executive Official and Hou	sehold M	tember(s) Receiving or Benefiting
Item Subject matter of proposed legislation, the number of the Senate or House Bill, Resolution or other legislative activity in which				LEGISLATIVE SUBJECT IDENTIFICATION				
5 Subject (from	t Code	Bill. Re	as supporting or oppesolution or Other ive Ident, Number	Appropriation Bill Number and Section Number	01 02 03 04 05 06 07 08 09 10 11	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	Code 17 18 19 20 21 22 23 24 25 26 27 28 29 30	and controlled substances, health insurance, hospitals
Item 6		l proces:		n, procurement, contract, or bond lobbyist was support-		CERTIFICATION: I hereby certify correct statement in accordance with Lobby ist signature	that the a	above is a true, complete and 67-6624 Idaho Code.