Rev. 05/2008

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

09 APR 16 PM 4: 35
SECRETARY OF STATE
STATE OF IDAHO

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

Lobbyist's name and permanent business address							prepared	Period covered				
	rt Vande M								0	month en	ding	
802 W Bannock, suite 304 Boise, ID 83702									(Mo.)	(Day)	(Yr.)	
	•		·				4/16/09	9	3	31	2009	
Item 1	Totals	of all reporta	ble expenditures made o	r incurred b	y Lobbyi	st or b	y Lobbyist's Empl	oyer on behalf	of Lobby	ist's Emplo	yer.	
	tegory of Ex		*Total Amount for	Proportion Item 3, at			ributed by each emplo	oyer (Identify en	nployers,	under		
Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported			All Employers	Employer No. 1		Employer No. 2		Employer No. 3		3 Employer No. 4		
Entertainment			_	Employer 140. 1			Employer No. 2	6. 2 Employer N		8. 3 Employer N		
Food and Refreshment			\$0.00	0.00		_ \$		\$		\$		
Living Accommodations			0.00	0.00		<u> </u>						
Adverti	sing		0.00	0.00		<u> </u>						
Travel			0.00	0.00		_ _						
Telepho	ne		0.00	0.0		_ _						
Other Expenses or Services			0.00	0.0		_ _						
			0.00		0.00		0.00		0.00		0.00	
		Total	s0.00	\$	0.00	_ \$_	0.00	\$	0.00	\$	0.00	
*When t	he number of e	emplovers vou a	nre reporting for requires m	ultiple L-2 fo	orms to be	l filed a	total amount for all e	ı mnlovers should l	ı be entered	l on Page 1		
	The totals of	of each expen	diture of more than seve				_				fficials and	
Item-	member(s)	of their house	hold.				Names of	f Legislators, Publ	lic and Ex	ecutive Office	ials	
	Date		Place		Amo	ount		and Household M				
	-		-	-		-						
	Continued on a	ttached page(s)										
INSTRUCTIONS						Item 3	En	Employer(s) Name(s) and Address(es)				
					——[.	. 1	daho Health Ca	are Association	on			
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code Filing deadline: Monthly reports due within fifteen (15) days of the month for activities of the past month. TO BE FILED WITH: Ben Ysursa						No. 1 802 W Bannock suite 304, Boise Id 83702						
						No. 2 No. 3 No. 4						
Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282												

4	Date			nalf of any Legislator, Public or Executive Official or Household Member(s). Name of Legislator, Public or Executive Official and Household Member(s) Receiving or Benefiting						
bject (17 17 17 17 17 17	Subject or Hous the Lobl	matter of proposed legislative Bill, Resolution or other byist was supporting or opp	ion, the number of the Senate legislative activity in which			BJECT IDENTIFICATION Code Subject 17 Health service, medicine, drugs and controlled substances, health insurance, hospitals 18 Higher education 19 Housing, construction, codes 20 Insurance (excluding health insurance) 21 Labor, salaries and wages, collective bargaining 22 Law enforcement, courts, judges, crimes, prisons 23 License, permits 24 Liquor 25 Manufacturing, distribution and services 26 Natural resources, forest and forest products, fisheries, mining and mining products 27 Public lands, parks, recreation 28 Social insurance, unemployment insurance, public assistance, workmen's compensation 29 Transportation, highways, streets and roads 30 Utilities, communications, televisions, radio, newspaper, power, CATV, gas 31 Other (please specify)				
6		. ,	n, procurement, contract, or bond lobbyist was support-	1	CERTIFICATION: 1 hereby certify correct statement in accordance with Lobbyist signature					

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