

## State of Idaho

Ben Ysursa Secretary of State

Phone: (208) 334-2852 Fax: (208) 334-2282

LOPBYIST RE		
ANNUAL	☐ SEMI-ANNUA	L

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LOBBYISTS (Sec. 67-6619)

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Lobbyist		ermanent busines					Dε	ate prep	ared			Period c	overed	
David Lehman										<u> </u>	year end	ing		
802 W. Bannock St, Ste 700						2/15/201	11				·			
Boise	, ID 83702								2/15/20	' '		(Mo.) (Day) (Yr.)		
							$\perp$					12	31	2010
Item 1	Totals	s of all reportal	ole expenditu	res made o				-		_				oyer.
Category of Expenditure Reimbursed Personal Living and Travel *Total Amount for			Proportion Item 3, at				ed by each emplo	oyer (Ide	ntify en	aployers,	under			
Expense		Lobbying Activity	1	All Employers					Employer No. 2 Employer N			No. 3 Employer No. 4		
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	nd Refreshm		<b>\$</b>	0.00	ا ع	0.0	— I	) P——	0.00	J		0.00	Φ	0.00
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Telepho	one			0.00		0.0	00		0.00			0.00		0.00
-	Expenses or S	Services		0.00		0.0	00		0.00			0.00		0.00
		Total	s	0.00	s	0.0	00	\$	0.00	s		0.00	<u> </u>	0.00
*When t		employers you a of each expendi usehold.							ther holder of p	ublic off	ice, exe	ecutive o	fficials and	
2	Date		Place			Ar	nount	Names of Legislators, Public and Executive Officials and Household Members in Group						cials
	N/A		N/A		N/			/A N/A						
Z	Continued on a	attached page(s)							n order for the in the first line and					
		INST	RUCTION	8				em 3		nployer(s				
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code			n	AAA Idaho No. 1 7155 W Denton St										
Fili	ng deadline:	Annual report Executive Lo				31st.	No.	•	rris Commu 20 224th Av	nicatior	าร			
то	BE FILED V	В	Ben Ysursa				No.	IA0	601 W McM		d, Ste	102	_	
Secretary of State PO Box 83720 Boise, ID 83720-0080						No.	 _ IA[	<u></u>	-					

818 W 16th St

	Subie	ect matter of proposed legislat	ion the number of the Senate	$\overline{}$	LEGISLATIVE SUE	RIECT	IDENTIFICATION
Item		ouse Bill, Resolution or other					
4		obbyist was supporting or opp		Code	Subject	Code	Subject
	u.c 2	occyna w w supportung or opp		01	Agriculture, horticulture,	17	Health service, medicine, drugs
Subject	Code	Bill, Resolution or Other	Appropriation Bill Number	]	farming, and livestock		and controlled substances, health
(from t	able)	Legislative Ident. Number	and Section Number	02	Amusements, games, athletics		insurance, hospitals
				1	and sports	18	Higher education
11				03	Banking, finance, credit and	19	Housing, construction, codes
17	•				investments	20	Insurance (excluding health
29	1			04	Children, minors, youth,		insurance)
					senior citizens	21	Labor, salaries and wages,
30	)			05	Church and religion		collective bargaining
10	)			06	Consumer affairs	22	Law enforcement, courts,
28				07	Ecology, environment, pollution,		judges, crimes, prisons
20	•				conservation, zoning, land and	23	License, permits
					water use	24	Liquor
				08	Education	25	Manufacturing, distribution and
				09	Elections, campaigns, voting,		services
					political parties	26	Natural resources, forest and
				10	Equal rights, civil rights,		forest products, fisheries, mining
					minority affairs		and mining products
				11	Government, financing,	27	Public lands, parks, recreation
				'	taxation, revenue, budget,	28	Social insurance, unemployment
					appropriations, bids, fees, funds		insurance, public assistance,
				12	Government, county		workmen's compensation
				13	Government, federal	29	Transportation, highways,
				14	Government, municipal	2)	streets and roads
				15	Government, special districts	30	Utilities, communications,
				16	Government, state	30	televisions, radio, newspaper,
				10	Government, state		power, CATV, gas
						31	
						31	Other (please specify)
				_			
					ERTIFICATION: I hereby certify the	nat the al	nove is a true complete and
					orrect statement in accordance with S		· •
				_			
				•			/-/
					1111		6/15/11
Item	Identi	fy any rule, ratemaking decisi	on, procurement,	T.	obbyist signature		Date
5	contra	ct bid or bid process, financia	l services agreement or	-	ood) iot oigiatuit		, Dute ,
3	bond 1	obbyist was supporting or op	posing.				
				1 =	1		
				E	mployer No. 1 signature		Date
				<del> </del>	mployer No. 2 signature		Date
				l E	mpiojei 110. 2 signature		Date
				<u> </u>	mployer No. 3 signature		Data
				E	mployer No. 3 signature		Date
				$\frac{1}{E_1}$	mployer No. 4 signature		Date

## State of Idaho

Ben Ysursa Secretary of State

## LOBBYIST REPORT FORM

ANNUAL

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To Be Filed By:

**LOBBYISTS** (Sec. 67-6619)

(Type or print clearly in black ink) See instructions at bottom of page Lobbyist's name and permanent business address Date prepared Period covered **David Lehman** year ending 802 W. Bannock St, Ste 700 2/15/2011 Boise, ID 83702 (Mo.) (Day) (Yr.) 12 31 2010 Item Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer. 1 Proportionate amounts contributed by each employer (Identify employers, under Category of Expenditure Reimbursed Personal Living and Travel \*Total Amount for Item 3, at bottom of page.) Expenses Pertaining to Lobbying Activity All Employers Do Not Have to be Reported Employer No. 1 Employer No. 4 Employer No. 2 Employer No. 3 Entertainment 0.00 0.00 0.00 0.00 0.00 Food and Refreshment 0.00 0.00 0.00 0.00 0.00 Living Accommodations 0.00 0.00 0.00 0.00 0.00 Advertising 0.00 0.00 0.00 0.00 0.00 Travel 0.00 0.00 0.00 0.00 0.00 Telephone 0.00 0.00 0.00 0.00 0.00 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 L-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 one hundred (\$100) for a legislator, other holder of public office, executive officials and member(s) of their household. Item-Names of Legislators, Public and Executive Officials 2 Date Place Amount and Household Members in Group N/A N/A N/A N/A In order for the information to fit in the space, put the employer name on Continued on attached page(s) the first line and the complete address on the second line. Item INSTRUCTIONS Employer(s) Name(s) and Address(es) **KMC** Who should file this form: Any lobbyist registered under Section No. 1 2003 Kootenai Health Way 67-6617 Idaho Code DIAL--- ID 00044 Filing deadline: Annual report is due on January 31st. Executive Lobbyist semi-annual report due July 31st. No. 2 TO BE FILED WITH: Ben Ysursa No. 3 Secretary of State PO Box 83720 Boise, ID 83720-0080

No. 4

Phone: (208) 334-2852 Fax: (208) 334-2282

tem '	ect matter of proposed legislati	•	LEGISLATIVE SUBJECT IDENTIFICATION					
em or Ho	ect matter of proposed legislationse Bill, Resolution or other obbyist was supporting or opposed legislative Ident. Number	legislative activity in which	01 02 03 04 05 06 07 08 09 10 11	Subject Agriculture, horticulture, 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, special districts Government, state  ERTIFICATION: I hereby certify the precet statement in accordance with States	Code 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31	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)		
5 contrac	y any rule, ratemaking decision of bid or bid process, financial obbyist was supporting or opp	services agreement or	L	oboyist signature				
	11		Er	nployer No. 1 signature		Date		
			Er	nployer No. 2 signature		Date		
			Er	nployer No. 3 signature		Date		
			Er	nployer No. 4 signature		Date		