Rev.]	1/201	1
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State of Idaho

Ben '	Ysursa
Secretar	ry of State

LOBBYIST	DEDADT	FODM
LUBBYISE	REPURI	FORM

	ANNUAL	SEMI-ANNUAL
\Box	2111.1021	SEMI-AMIOAL

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To Be Filed By	1

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			arty in black in it bottom of pag				-		İ	٦,	AIL OI	IDAIIO	
Lobbyis	st's name and per						Da	te prepared	1		Period	covered	
Erik l	Erik Makrush										1	✓ year end	ding
3414 Ridgepark Street Caldwell, ID 83605						1/31/2011		(Mo) (Day)	(Yr.) 2010			
Item 1	Totals	of all reporta	ble expenditu	res made o	r incurred b	y Lobb	yist o	by Lobb	yist's Empl	oyer on be			
Category of Expenditure Rembursed Personal Living and Travel Expenses Pertaining to Lobbying Activity All Employers		Proportionate amounts Item 3, at bottom of		of pag	nts contributed by each employer (Identify en if page.)								
	o Not Have to be	Reported			Employ	yer No. 1		Employ	yer No. 2	Emple	oyer No. 3	Employ	er No 4
	iinment nd Refreshmer	ni	\$	125.41	S	125.4	1	\$		\$		S	
	Accommodati	ons											
Advert	ising				i ——		— j						
Travel			ļ 				-				la tr		
Teleph													
Other	Expenses or Se	rvices											
		Total	s	125.41	S	125.4	1	s	0.00	s	0.00	s	0.00
*When	the number of er												
	The totals of of their hous		iture of more	than one hu	indred (S100	0) for a l	legisla	tor, other	holder of p	ublic offic	e, executive o	officials and	d member(s)
Item- 2		Sitora.	Di				Names of Legislators, Public and Executive Office					icials	
	Date		Place			nount	+		ind Househ	old Members i	r. Group		
	ł												
	Continued on atta	ached page(s)				,					· · · · · · · · · · · · · · · · · · ·		
		INST	RUCTIONS	3		l		Employer(s) Name(s) and Address(es)					
Wh	o should file t		ny lobbyist re -6617 ldaho		der Section	1	No. 1				uilding Offic Caldwell,		i
Filing deadline: Annual report is due on January 31st. Executive Lobbyist semi-annual report due July 31				31st.	No 2 MEDeRx Point of Care Dispensing 3414 Ridgepark Street, Caldwell, ID 83605								
то	BE FILED W		V				Nic 2						
	Ben Ysursa Secretary of State				1	No 3							
	PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282					No 4							

	S. bie	ect matter of proposed legislat	ion the number of the Senate	LEGISLATIVE SUBJECT IDENTIFICATION				
Item		ouse Bill, Resolution or other		l				
4		obbyist was supporting or op	-	Code	Subject	Code	Subject	
	tivo ti	notor ist was supporting or op		01	Agriculture, horticulture,	17	Health service, medicine, drugs	
Subject	Code	Bill, Resolution or Other	Appropriation Bill Number	1 "	farming, and livestock	• ,	and controlled substances, health	
(from t	able	Legislative Ident Number	and Section Number	02	Amusements, games, athletics		insurance, hospitals	
				0-	and sports	18	Higher education	
09	,	1		03	Banking, finance, credit and	19	Housing, construction, codes	
					investments	20	Insurance (excluding health	
11	l	F		04	Children, minors, youth.		insurance)	
12	2			04	senior citizens	21	Labor, salaries and wages,	
13				05	Church and religion	- 1	collective bargaining	
				06	Consumer affairs	22	Law enforcement, courts,	
14	ļ.			00	Feology, environment, pollution,	22	judges, crimes, prisons	
15	,			37	conservation, zoning, land and	23	License, permits	
					water use	24	Liquor	
16)			08	Education	25	Manufacturing, distribution and	
17	7			09	Elections, campaigns, voting.		services	
25	:			"	political parties	26	Natural resources, forest and	
4.	,			10	Equal rights, civil rights,	-5	forest products, fisheries, mining	
		1	f		minority affairs		and mining products	
				11	Government, financing,	27	Public lands, parks, recreation	
				1 ''	taxation, revenue, budget,	28	Social insurance, unemployment	
					appropriations, bids, fees, funds	-0	insurance, public assistance,	
				12	Government, county			
				13		29	workmen's compensation	
		1		14	Government, federal	29	Transportation, highways, streets and roads	
				15	Government, municipal	30	Utilities, communications,	
		i		16	Government, special districts	30	-	
		1	}	10	Government, state		televisions, radio, newspaper,	
]	J	ļ		2.1	power, CATV, gas	
				ł		3 [Other (please specify)	
]		1				
				_				
					ERTIFICATION I hereby certify the brrect statement in accordance with S			
				_	infect statement in accordance with 5	ection 6	7-0024 tuand Code.	
						/	. 1 / /	
					56/71	L	1/34/11	
Item	Identif	y any rule, ratemaking decision	on, procurement.	1	obbyist signature		Date	
5	contra	et bid or bid process, financial	l services agreement or		oboy tot organisto			
.,		obbyist was supporting or op-		ĺ	5 ()	1 0	11 1/3/1	
				_				
				Ex	nployer No 1 signature		Date 1	
					SC / M	Sa S	1/2/11	
					200	- Creation		
				En	nployer No. 2 signature		Date	
				En	nployer No. 3 signature		Date	
				En	nployer No. 4 signature		Date	
		a a	_					

A Self employed as Co-cure of MEDERX and a contracted as a contracted lebbyot