

State of Idaho

Ben Ysursa Secretary of State

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

LOBBYIST	REPORT	FORM
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LOBBYISTS (Sec. 67-6619)

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(Type or print clearly in black ink) See instructions at bottom of page Lobbyist's name and permanent business address Date prepared Period covered year ending Erika E. Malmen Perkins Coie LLP (Mo.) (Day) (Yr) 1111 West Jefferson Street, Suite 500 01/06/11 Boise, Idaho 83702 2010 Item 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 Item 3, at bottom of page.) Reimbursed Personal Living and Travel All Employers Expenses Pertaining to Lobbying Activity Employer No 4 Do Not Have to be Reported Employer No. 1 Employer No. 2 Employer No. 3 Entertainment 0.00 Food and Refreshment \$ 0.00 Living Accommodations 0.00 Advertising 0.00 Travel 0.00 Telephone 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 seventy-five dollars (\$75) 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 Place Amount and Household Members in Group Date Continued on attached page(s) Item INSTRUCTIONS Employer(s) Name(s) and Address(es) Intermountain Forest Association Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code 204 E. Sherman Avenue, Coeur d'Alene, ID 83814 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

Item 4 is no longer statutorily required.

Item			ion, the number of the Senate legislative activity in which	LEGISLATIVE SUBJECT IDENTIFICATION			
5 Subject	the L	obbyist was supporting or op Bill, Resolution or Other	Appropriation Bill Number	Code 01	Subject Agriculture, horticulture, farming, and livestock	Code 17	Subject Health service, medicine, drugs and controlled substances, health
(from t		Legislative Ident. Number	and Section Number	02	Amusements, games, athletics and sports	18	insurance, hospitals Higher education
0	7			03	Banking, finance, credit and investments	19 20	Housing, construction, codes Insurance (excluding health
1 ¹				04	Children, minors, youth, senior citizens Church and religion	21	Insurance) Labor, salaries and wages, collective bargaining
20 21				06 07	Consumer affairs Ecology, environment, pollution,	22	Law enforcement, courts, judges, crimes, prisons
29				08	conservation, zoning, land and water use Education	23 24 25	License, permits Liquor Manufacturing, distribution and
				10	Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs	26	services Natural resources, forest and forest products, fisheries, mining and mining products
				11	Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county	27 28	Public lands, parks, recreation Social insurance, unemployment insurance, public assistance,
				13 14 15	Government, federal Government, municipal	29 30	workmen's compensation Transportation, highways, streets and roads Utilities, communications,
				16	Government, special districts Government, state	31	televisions, radio, newspaper, power, CATV, gas Other (please specify)
					ERTIFICATION: I hereby certify the prrect statement in accordance with S	at the ab	nove is a true, complete and
6	contrac	y any rule, ratemaking decisions of the process, financial or bid process, financial obbyist was supporting or oppositing or oppositions.	l services agreement or	L	oyoyist signature		Date
				Ei	nployer No. 1 signature		Date
				Eı	nployer No. 2 signature		Date
				Ei	mployer No 3 signature		Date
				Ei	mployer No. 4 signature		Date

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LOBBYIST REPORT FORM

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LOBBYISTS (Sec. 67-6619)

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 Erika E. Malmen year ending Perkins Coie LLP (Mo.) (Day) (Yr.) 1111 West Jefferson Street, Suite 500 01/06/11 Boise, Idaho 83702 2010 Item 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 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. 4 Employer No. 1 Employer No. 2 Employer No. 3 Entertainment 0.00 Food and Refreshment \$ \$ 0.00 Living Accommodations 0.00 Advertising 0.00 Travel 0.00 Telephone 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 seventy-five dollars (\$75) 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 Continued on attached page(s) Item INSTRUCTIONS Employer(s) Name(s) and Address(es) SysTech International Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code 6681 South Cottonwood Street, Murray, Utah 84107 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

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Item		ect matter of proposed legislat	ion, the number of the Senate legislative activity in which	LEGISLATIVE SUBJECT IDENTIFICATION			
5		obbyist was supporting or opp		Code	Subject	Code	Subject
Subject	Code	Bill, Resolution or Other	Appropriation Bill Number	01	Agriculture, horticulture,	17	Health service, medicine, drugs
(from t	able)	Legislative Ident. Number	and Section Number	02	farming, and livestock		and controlled substances, health
0.	,			02	Amusements, games, athletics and sports	18	insurance, hospitals Higher education
0.				03	Banking, finance, credit and	19	Housing, construction, codes
1					investments	20	Insurance (excluding health
1:	2			04	Children, minors, youth,		insurance)
1:	3				senior citizens	21	Labor, salaries and wages.
1				05	Church and religion	22	collective bargaining
				06	Consumer affairs	22	Law enforcement, courts,
1:	5			07	Ecology, environment, pollution, conservation, zoning, land and	23	judges, crimes, prisons License, permits
16	6				water use	24	Liquor
29	9			08	Education	25	Manufacturing, distribution and
_	•			09	Elections, campaigns, voting,		services
				ł	political parties	26	Natural resources, forest and
				10	Equal rights, civil rights,		forest products, fisheries, mining
				١	minority affairs		and mining products
				11	Government, financing,	27	Public lands, parks, recreation
					taxation, revenue, budget,	28	Social insurance, unemployment
				12	appropriations, bids, fees, funds Government, county		insurance, public assistance, workmen's compensation
				13	Government, federal	29	Transportation, highways,
			-	14	Government, municipal		streets and roads
				15	Government, special districts	30	Utilities, communications,
				16	Government, state		televisions, radio, newspaper,
			,	ĺ			power, CATV, gas
				l		31	Other (please specify)
					ERTIFICATION. I hereby certify the perfect statement in accordance with Se		
Item	Identif	y any rule, ratemaking decision	on, procurement,	-	oboyist signature		Date
6	1	ct bid or bid process, financial obbyist was supporting or opporting o	2		oboyist signature		Date
				Er	nployer No. 1 signature		Date
				Er	nployer No. 2 signature		Date
				Eı	nployer No. 3 signature		Date
				Er	nployer No. 4 signature		Date