State of Idaho

Ben Ysursa Secretary of State

ľ	ORR	VIST	REPORT	FORM
L	UDD	1121	KELOKI	LOKA

\neg	A)	VN	T	A I
- 1	A 1	414	1 8 J.	_

☐ SEMI-ANNUAL

Page	of	Page(s)
THIS SPACE	E FOR OFFI	CE USE ONLY

To Be Filed By:

LOBBYISTS (Sec. 67-6619)

11 FEB 10 PM 3: 04

-	• •	-	,							S	ECK	ATE (OF IDA	HO
Lobbyist's name and permanent business address							Date prepared Period covered							
Reberger												[year end	ding
SULLIVAN & REBERGER									12/31/20	10			(D-)	
									12/31/20	10		l ` ′		1
e, ID 8370)1											12	31	10
Total	s of all reportal	ble expend	litures made o	or incurred l	by Lobb	yist o	r by	Lobby	ist's Empl	oyer on	behalf o	of Lobby	ist's Empl	oyer.
	•													
es Pertaining to	Lobbying Activity													
o Not Have to b	e Reported			Emplo	yer No. 1	1	E	Employ	er No. 2	Em	ployer N	0. 3	Employ	er No. 4
		_					_							
nd Refreshm	ent	\$		- S			\$			 \$			\$	
Accommoda	tions]				
sing														
										l				
one														
expenses or S	Services													
				_						_				
	Total	s	0.00	. s	0.0	00_	\$		0.00	s		0.00	\$	0.00
				1		.				١.		ı		
			-	-									_	I mambar(s)
				marca (\$10	70) IOI a	logisi	ator,		norder or p	uone on		cutive o		
Date		Pla	ace		An	1							cials	
			_							110 410	onote tire		Оточер	
							ļ							
ontinued on a		PLICTIO	. Ne	_	<u> </u>	Ite	m		Г.		\ \\\	- \ d A d	14()	
			<u> </u>						En	nproyer(s	Name(s	and Ac	dress(es)	
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code						No. 1 Green Valley Holding Co. PO Box 9467, Boise, ID 83708								
Filing deadline: Annual report is due on January 31st. Executive Lobbyist semi-annual report due July 31st.							No. 2 TracFone Wireless Inc. 9700 Northwest 112th Ave.,, Miama, FL 33178							
TO BE FILED WITH:												,		
	В					No. 3	3							
Secretary of State PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282							ı							
	Reberger LIVAN & R SOX 1703 E, ID 8370 Total ategory of Exursed Personal in the Not Have to be in the number of The totals of their hou Date Continued on a	See instructions a at's name and permanent busine Reberger LIVAN & REBERGER BOX 1703 e, ID 83701 Totals of all reportal ategory of Expenditure aursed Personal Living and Travel es Pertaining to Lobbying Activity o Not Have to be Reported inment and Refreshment Accommodations ising one Expenses or Services Total the number of employers you a The totals of each expendi of their household. Date Continued on attached page(s) INST o should file this form: Ar 67- ang deadline: Annual report Executive Lob BE FILED WITH: B Secre PO	See instructions at bottom of it's name and permanent business address Reberger LIVAN & REBERGER BOX 1703 P., ID 83701 Totals of all reportable expenditure attegory of Expenditure aursed Personal Living and Travel in Properties of Not Have to be Reported inment and Refreshment Accommodations are incomply a single one Expenses or Services Total Total S Total Total S Total S Total The totals of each expenditure of more of their household. Date Pla Continued on attached page(s) INSTRUCTIO To should file this form: Any lobby is 67-6617 Idal and deadline: Annual report is due on Executive Lobby ist sem BE FILED WITH: Ben Ysursa Secretary of St PO Box 8372	Reberger LIVAN & REBERGER BOX 1703 a, ID 83701 Totals of all reportable expenditures made of a lategory of Expenditure are personal Living and Travel are Pertaining to Lobbying Activity on Not Have to be Reported in the Implement and Refreshment Accommodations are reporting for requires made of their household. Total \$ 0.00 The number of employers you are reporting for requires made of their household. Date Place Continued on attached page(s) INSTRUCTIONS To should file this form: Any lobbyist registered ure 67-6617 Idaho Code and deadline: Annual reports by the security of State PO Box 83720 Be FILED WITH: Ben Ysursa Secretary of State PO Box 83720	See instructions at bottom of page If's name and permanent business address Reberger IVAN &	See instructions at bottom of page it's name and permanent business address Reberger LIVAN & REBERGER BOX 1703 a, ID 83701 Totals of all reportable expenditures made or incurred by Lobe ategory of Expenditure ursed Personal Living and Travel so Pertaining to Lobbying Activity o Not Have to be Reported inment and Refreshment Accommodations ising Total Total \$ 0.00 \$ 0.0 Employer No. The totals of each expenditure of more than one hundred (\$100) for a of their household. Date Place Ar TOTAL Place Ar TOTAL Ar TOTAL Place Ar The totals of each expenditure of more than one hundred (\$100) for a of their household. Date Place Ar The totals of each expenditure of more than one hundred (\$100) for a of their household. Date Place Ar The totals of each expenditure of more than one hundred (\$100) for a of their household. Date Place Ar The totals of each expenditure of more than one hundred (\$100) for a of their household. Date Place Ar The totals of each expenditure of more than one hundred (\$100) for a of their household. Date Place Ar The totals of each expenditure of more than one hundred (\$100) for a of their household. Date Place Ar The totals of each expenditure of more than one hundred (\$100) for a of their household. Date Place Ar The totals of each expenditure of more than one hundred (\$100) for a of their household. Date Place Ar The totals of each expenditure of more than one hundred (\$100) for a of their household. Date Place Ar The totals of each expenditure of more than one hundred (\$100) for a of their household. Date Place Ar The totals of each expenditure of more than one hundred (\$100) for a of their household. Date Place Ar The totals of each expenditure of more than one hundred (\$100) for a of their household. Date Place Ar The totals of expenditure of more than one hundred (\$100) for a of their household. Date Place Ar The totals of expenditure of more than one hundred (\$100) for a of their household.	See instructions at bottom of page it's name and permanent business address Reberger LIVAN & REBERGER BOX 1703 a, ID 83701 Totals of all reportable expenditures made or incurred by Lobbyist of lategory of Expenditure used Personal Living and Travel se Pertaining to Lobbying Activity Not Have to be Reported inment and Refreshment Accommodations sising Total \$ 0.00 \$ 0.00 the number of employers you are reporting for requires multiple L-2 forms to be filed of their household. Date Place Amount INSTRUCTIONS Total Total The totals of each expenditure of more than one hundred (\$100) for a legisl of their household. Place Amount Amount Living and Travel seprenditure of more than one hundred (\$100) for a legisl of their household. Date Place Amount The totals of each expenditure of more than one hundred (\$100) for a legisl of their household. Date Place Amount Living and Travel seprenditure of more than one hundred (\$100) for a legisl of their household. Date Place Amount The totals of each expenditure of more than one hundred (\$100) for a legisl of their household. Date Place Amount No. 1 Be FILED WITH: Ben Ysursa Secretary of State PO Box 83720 Price IN 26270 0080	See instructions at bottom of page It's name and permanent business address Reberger LIVAN & REBERGER lox 1703 p., ID 83701 Totals of all reportable expenditures made or incurred by Lobbyist or by attegory of Expenditure ursed Personal Living and Travel are Proportionate amounts contribution of Not Have to be Reported iniment and Refreshment Accommodations Sising Total \$ 0.00 \$ 0.00 \$ Employer No. I I Employers Total \$ 0.00 \$ 0.00 \$ S The totals of each expenditure of more than one hundred (\$100) for a legislator, of their household. Date Place Amount INSTRUCTIONS Item No. 1 G Permitted No. 2 Tile Ber Illed WITH: Ben Ysursa Secretary of State PO Box 83720	See instructions at bottom of page Is name and permanent business address Reberger INVAN & REBERGER IOX 1703 9, ID 83701 Totals of all reportable expenditures made or incurred by Lobbysist or by Lobbysist permissing to Lobbysing Activity attegory of Expenditure used Personal Living and Travel se Permissing to Lobbysing Activity of Nort Have to be Reported imment and Refreshment Accommodations issing Total S 0.00 S Employer No. 1 Employ Employer No. 1 Employ Total S 0.00 S the number of employers you are reporting for requires multiple L-2 forms to be filed a total amount of their household. Date Place Amount INSTRUCTIONS Total INSTRUCTIONS Total INSTRUCTIONS Total S Total Place Amount INSTRUCTIONS Temploy Temploy Temploy Temploy Temploy Temploy Temploy Temploy Temploy Total Temploy Total The totals of each expenditure of more than one hundred (\$100) for a legislator, other of their household. Date Place Amount The totals of each expenditure of more than one hundred (\$100) for a legislator, other of their household. Date Place Amount Temploy Temp	See instructions at bottom of page Is name and permanent business address Reberger IVAN & REBERGER Jox 1703 a, ID 83701 Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Emplategory of Expenditure under Personal Living and Travel see Permaining to Lobbying Activity of Not Have to be Reported inment and Refreshment Accommodations Issing Total Total	Total of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on attegory of Expenditure used resonal Living and Travel se Fernanting to Johying Activity *Total Amount for All Employers **ONA THAVE NOTE TO TOTAL TOTAL TOTAL SET TOTAL AMOUNT FOR ALL Expenditure of more than one hundred (\$100) for a legislator, other holder of public of of their household. **Date Place Amount Names of Legislator, other holder of public of of their household.** **Date Place Amount Travel Employers (Iditudent) **Date Proportionate amounts contributed by each employer (Iditudent) **Employer No. 1 Employer No. 2 Employer No. 1 Employer No. 2 Semination to Johying Activity **Employer No. 1 Employer No. 2 Seminated (Iditudent) **Employer No. 1 Seminated (Iditudent) **Emplo	Total of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of all groups of Expenditure and Proportionate amounts contributed by each employer (Identify en and Trevel as Pertaining to Lobbying Activity of Not Have to be Reported imment and Refreshment Accommodations issing Total \$ 0.00 \$ 0.00 \$ 0.00 \$ 5 0.00	Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobby attagory of Expenditure of Ex	See instructions at bottom of page See instructions at bottom of page INAN & REBERGER INAN &

LOBBYIST ANNUAL REPORT FORM



State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

LOBBYISTS (Sec. 67-6619) Page_1 of __Page(s) THIS SPACE FOR OFFICE USE ONLY

1 JAN 28 AM 10: 56

SECLATION STATE

(Type or print clearly in black ink)

		See instructions	at bottom of page											
Lobbyist's name and permanent business address								epared		Period covered				
Phil Reberger									year endi	ng				
SULL	IVAN & R	EBERGER				1		12/31/10)		(Mo.)	(Day)	(Yr.)	
	OX 1703					1					12	31	10	
BOISE. ID 83701													10	
Item 1	Totals	of all reportab	le expenditures made or										уег.	
Reimbursed Personal Living and Travel * Total Amount for Item 3,					portionate amounts contributed by each employer (Identify employers, under m 3, at bottom of page.)									
Expenses Pertaining to Lobbying Activity Do Not Have to be Reported			All Employers	Employ	yer No.	1	En	nployer No. 2	Empl	oyer N	o. 3	Employ	er No. 4	
Enterta Food a	inment nd Refreshm	ent	\$	\$		_	\$_		\$			\$		
Living	Accommoda	ations					_							
Advert	ising						_					*		
Travel							_							
Telepho	one						_							
Other I	Expenses or	Services												
		Total	\$	\$	0.	00	\$_	0.00	\$.00	\$	0.00	
•1			l you are reporting for requi								ould be en	tered on Pa	ige 1.	
Item	The totals	of each expend	iture of more than fifty of	iollars (\$50) for a	legisla	tor (
2	Date		Place		An	nount	_	Names o	f Legislat	tors & P	ublic Offic	ials in Gro	цр	
	Continued on	attached page(s)		ı			١							
	_	INST	RUCTIONS			Iten		En	Employer(s) Name(s) and Address(es)					
							A D.	/ANTAGE 14	MPYE	D 00	MOEN	CATION		
	o should file		ny lobbyist registered u	nder Section	on	No.1 ADVANTAGE WORKER COMPENSATION PO Box 571918, SLC, UT 84157								
			ort is due on January 31	st.				EVA NC, INC						
то	BE FILED	WITH:					480	00 Hampden	Ln, Ste	1100	, Bethe	sda, Mi	20814	
Ben Ysursa							AS	SOC GENER	AL CC	NTR	ACTOR	S of ID/	AHO	
		PO	etary of State Box 83720			No.3 ASSOC GENERAL CONTRACTORS of IDAHO 1649 Shoreline Dr., Boise, ID 83702								
	Pho		ID 83720-0080 2852 Fax: (208) 334-2	282		No.4		EAR SPRING						
<u> </u>							P.O. Box 712. Buhl. ID 83316							

LOBBYIST ANNUAL REPORT FORM



State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

L-2

LOBBYISTS (Sec. 67-6619)

Page 2 of Page(s)
THIS SPACE FOR OFFICE USE ONLY

11 JAN 28 AM 10: 56

SECNETION STATE 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 year ending Phil Reberger 12/31/10 SULLIVAN & REBERGER (Mo.) (Day) (Yr.) PO Box 1703 12 31 10 Boise ID 83701 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 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. 5 Employer No.(Employer No. Employer No Entertainment 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 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 fifty dollars (\$50) for a legislator or other holder of public office. Item Names of Legislators & Public Officials in Group 2 Date Place Amount Continued on attached page(s) Employer(s) Name(s) and Address(es) INSTRUCTIONS No. CORRECTIONAL MEDICAL SERVICES Who should file this form: Any lobbyist registered under Section 12647 Olive Blvd., St. Louis, MO 63141 67-6617 Idaho Code. No.[;DORAL DENTAL USA LLC (DentaQuest) Filing deadline: Annual report is due on January 31st. 12121 Corporate Way, Mequon, WI 53092 TO BE FILED WITH: Ben Ysursa No 7HOSPITAL CORPORATION of AMERICA Secretary of State One Park Plaza, Nashville, TN 37203 PO Box 83720 Boise, ID 83720-0080 № %ID. SCHOOL BOARDS ASS'N Phone: (208) 334-2852 Fax: (208) 334-2282

P.O. Box 9797. Boise. ID 83707-9797

LOBBYIST ANNUAL REPORT FORM



State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

L-2

LOBBYISTS (Sec. 67-6619) Page 3 of Page(s)
THIS SPACE FOR OFFICE USE ONLY

11 JAN 28 AM 10: 56

SECTAL LABOR STATE STATE OF IDAHO

16 Hawk Ridge Dr., Lake St. Louis, MO 63367

			learly in black ink) s at bottom of page										_
Lobbyis	t's name and	permanent busine			-	Da	te prep	ared		F	eriod	covered	
PHIL	REBERG	ER		year endi						ing			
SULL	IVAN & R	EBERGER				12/31/10)		(Mo.)	(Day)	(Yr.)		
	30x 1703								12	31	1 10		
Boise	ID 8370												
1	Totals	of all reportab	le expenditures made or										oyer.
Reimburse	tegory of Ex ed Personal Livi Pertaining to Lo		* Total Amount for All Employers	Item 3, at	bottom	of pag	e.)	ed by each empl					
Do	Not Have to b	e Reported	Till Employers	Emplo	yer No.	9	Emp	loyer No. 10	Emp	loyer No.	11.	Employ	er No. N
Enterta Food a	inment nd Refreshn	nent	s	\$	0.0	00	\$	0.00	\$	0.	.00	\$	0.00
Living	Accommod	ations				l					_		
Advert	ising					_							
Travel						_					_		
Telepho	one					_					_		
Other I	expenses or	Services				_					_		
		Total	\$0.00	s	0.0	00	\$	0.00	\$	0.0	00	\$	0.00
*1			l you are reporting for requi								ıld be	entered on Pa	ge 1.
Item		of each expend	iture of more than fifty o	iollars (\$50			tor or				17- 06		
	Date		Place		Am	ount	+	Names O	Legisia	iors & Pub	HIC OF	ficials in Gro	ар
				- 1									
	Continued on	attached page(s)											
		INST	RUCTIONS		- [Item 3	<u> </u>	Employer(s) Name(s) and Address(es)					
Who	should file	this form: A	ny lobbyist registered u	nder Secti	on	No.¶Thomson Medstat 777 E. Eisenhower, Ann Arbor, MI 48108							
67-6617 Idaho Code.											,	10100	
Filing deadline: Annual report is due on January 31st.						Nc PURS (fka Washington Group Int'l) 2345 Crystal Drive - Ste 708, Arlington, VA 22202							22202
то	TO BE FILED WITH:											,, 0, 1,	
		_	en Y sursa etary of State					nountain Ga					
		PO	Box 83720				P.O.	Box 7608, E	Boise,	ID 837	07		
	Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282						No.('⁄Medical Transportation Management						

Item	Expenditures made by the lobbyist or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible personal property to any Legislator, or for or on behalf of any legislator.												
•	Date		Amount		Name of Legislator Receiving or Benefited								
	Suhie	et maller	of removed legislat	tion, the number of the Senate		LEGISLATIVE SUE							
item 5				r legislative activity in which	1	LEGISLATIVE SUE	MECI	DENTIFICATION					
Subject (from	Code	Bill, Re	supporting or operation or Other ive Ident. Number	Appropriation Bill Number and Section Number	01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	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, municipal Government, special districts Government, state Employer No. 1 signature	17 18 19 20 21 22 23 24 25 26 27 28 29 30	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)					
						Employer No. 2 signature		Date					
				shove is a true, complete and n 67-6624 Idaho Code.		Employer No. 3 signature Employer No. 4 signature		Date					