

State of Idaho

Ben Ysursa Secretary of State

LOBBYIST REPORT FORM

~	ANNUAL	
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To Be Filed By:

SEMI-ANNUAL

Pag	e	1	_of	2	Pag	ge(s)
THIS	SPA	CE I	FOR	OFFICE	USE	ONLY

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4				L-2		BBY c. 67-	ISTS 6619)		5	ECHE IM STATE		STATE AHO	
		See instructions a	arly in black ink) at bottom of page							SINIL	0,		
-		permanent busine	ss address			D	ate prepared			Period	covered		
Dan Richter											year ending		
Avimor Partners LLC 18454 No. McLeod Way				} ,			la	nuary 2	2011	(Mo.) (Day)	(Yr.)	
Boise, ID 83714				January 2, 2011				12	12 31 2010				
Item 1	Total	ls of all reporta	ble expenditures made o	r incurred b	y Lobt	yist o	or by Lobb	yist's Emp	loyer on 1	behalf of Lobb	yist's Empl	oyer.	
С	ategory of E	•	*T14					y each empl	oyer (Ide	ntify employers	, under		
Expens	es Pertaining to	Living and Travel Lobbying Activity	*Total Amount for All Employers	Item 3, at bottom of									
	o Not Have to I	be Reported		Employer No. 1		l 	Employer No. 2		Employer No. 3		Employer No. 4		
	inment nd Refreshm	enf	\$ 0.00	\$			\$		s		s		
	Accommoda		0.00							11/2 12 13			
Advert			0.00										
Travel	B		0.00										
Telepho	one		0.00										
Other Expenses or Services		0.00			_					-			
		Total	s0.00	s	0.0	0	\$	0.00	. s	0.00	s	0.00	
*When	the number of	employers you a	 are reporting for requires m	 ultiple L-2 fo	rms to b	e filed	a total amo	unt for all e	 mployers :	should be entere	 d on Page 1.		
		of each expend of their housel	liture of more than seve	nty-five do	llars (\$	75) fo	or a legisla	tor, other	nolder of	public office,	executive of	officials and	
Item-		of their flouser								rs, Public and Executive Officials			
	Date	 	Place	A					and House	hold Members i	n Group		
		}		}									
	Continued on a	attached page(s)											
INSTRUCTIONS						Item Employer(s) Name(s) and Address(es)							
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code						No. 1 Avimor Partners LLC - 18454 No. McLeod Way Boise, ID 83714							
Fili	ng deadline		is due on January 31st. obyist semi-annual repor	rt due July 3	31st.	No. 2	2						
ТО	BE FILED V	WITH:				_							
Ben Ysursa					No.	3							
Secretary of State PO Box 83720 Boise, ID 83720-0080					No. s	1							

No. 4

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

Item 4 is no longer statutorily required.

Item			ion, the number of the Senate					
5			legislative activity in which					
	ine L	obbyist was supporting or op	posing.		Subject		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	
				02	Amusements, games, athletics and sports	18	insurance, hospitals Higher education	
01	1			03	Banking, finance, credit and	19	Housing, construction, codes	
07	7			03	investments	20	Insurance (excluding health	
12		1		04	Children, minors, youth,	20	insurance)	
				04	senior citizens	21	Labor, salaries and wages,	
13	3			05	Church and religion		collective bargaining	
14	4			06	Consumer affairs	22	Law enforcement, courts,	
15	5			07	Ecology, environment, pollution,		judges, crimes, prisons	
			}	ł	conservation, zoning, land and	23	License, permits	
16				ĺ	water use	24	Liquor	
19	9	'		08	Education	25	Manufacturing, distribution and	
26	3			09	Elections, campaigns, voting,		services	
27		}			political parties	26	Natural resources, forest and	
		}		10	Equal rights, civil rights,		forest products, fisheries, mining	
29	9			١.,	ininority affairs	27	and mining products	
				11	Government, financing, taxation, revenue, budget,	27 28	Public lands, parks, recreation Social insurance, unemployment	
			}	}	appropriations, bids, fees, funds	20	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		televisions, radio, newspaper,	
					•		power, CATV, gas	
				J		31	Other (please specify)	
				}				
					CDTYPIO ATTONI A L	1	1.4	
		l	}		ERTIFICATION: I hereby certify the prect statement in accordance with S			
				60	orrect statement in accordance with s	ection 6	/-0024 Idano Code.	
				j –	1 1			
				ļ			, ,	
			ĺ		Illes I		1/4/2011	
Item	Identif	y any rule, ratemaking decisi	on, procurement,	1 -	obbyist signature		Date Contract of the Contract	
6	contrac	et bid or bid process, financia	l services agreement or	"	bobyist signature		Date	
Ů	bond le	obbyist was supporting or opp	posing.		Or A		1/4/2011 Date)/4/2011	
		<u> </u>		<u> </u>	W.C.	_	1/4/601	
				En	nployer No. 1 signature		Date	
				[
				En	nployer No. 2 signature		Date	
				_				
				En	nployer No. 3 signature		Date	
				En	nployer No. 4 signature		Date	