Rev. 05/2008	LOBBYIS	T MON	ITHLY I	REPOR	T FORM		IS SPACE I	_0{Pu -0R 0FF(0s US)	ge(s) FONLY		
State of Idah	T		1	,,,	na arve pi	1,700 ((1.10 13.11					
Ben Ysursa Secretary of Sta		L-3 LOBBY (Sec. 67		7-6619)			R-I AMII: 14 ALL OF STATE TE OF IDAHO				
						SIAIL	r IU <i>F</i>	ANU			
(Type or print clearly See instructions at b	იციო ინ ხავა			Dute prepare			TPeriod 0	Overed			
Lobbyist's name and permanent business	s address			oute brebur	XI		_	√ month end	ding		
Kent W. Day Liberty Mutual Insurance P.O. Box 6358					3/1/10		(Day) (Va)				
							(Ma,)	(Day) 28	(Yr.) 2010		
Boise, ID 83707-6358					. 						
	le expenditures made o								yer.		
Category of Expenditure Reinbursed Pursonal Living and Travel	*Total Amount for		Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)								
Expenses Pertaining to Lohbying Activity Do Not Have to be Reported	Ali Employets	Employer No. 1		Employer No. 2		Employer No. 3		Employer No. 4			
Entertainment	6.00							4.			
rood and iccircaninent		. \$		\$		_		,p			
Living Accommodations Advertising	0.00						Ldunnapp	gergen value a statisti a tida sitis ort			
Travel	0.00										
Telephone	0.00										
Other Expenses or Services	0.00			.							
	0.00				0.00		0.00		0.00		
Total	s0.00	. \$	0.00	. S	0.00	s	0.00	\$	0.00		
*When the number of employers you ar											
The totals of each expend member(s) of their househ		enty-five d	ollurs (\$75)	for a legis	slator, other h	older of public	office,	executive o	(ficials an		
Item-	Mace		Amou				s, Public and Executive Officials				
Date	race			111		na Frousenoia iy	iciniceis i	пОтопр			
Continued on attached page(s)			<u> </u>	ļ							
INSTRUCTIONS				tem 3	Em	Employer(s) Name(s) and Address(es)					
			No.	Libert	ty Mutual Ir	surance, P.	O. Box	6358			
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code			11	Boise, ID 83707-6358							
Filing deadline: Monthly report month for activities of the past a		15) days o	of the No.	2							
TO BE FILED WITH:	nonth.										
			No	3							
Secre	nonth. In Ysursa Itary of State Box 83720		No.	3							

ltem

Item 4 is no longer statutorily required.

Item Subject matter of proposed legislation, the number of the Senate			LEGISLATIVE SUBJECT IDENTIFICATION							
or House Bill, Resolution or other the Lobbyist was supporting or op	legislative activity in which	Code 01 02 03 04 05 06 07 08 09	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,	Code 17 18 19 20 21 22 23 24 25 26	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					
20 S1348 20 S1352 H0586 Item 6 bid or bid process, financial services ing or opposing.		12 13 14 15 16	ussation, revenue, budget, appropriations, hids, fees, funds Gavernment, county Government, federal Government, municipal Government, special districts Government, state CERTIFICATION: I hereby certify the correct statement in accordance with a cobbyist signature	28 29 30 31	Social insurance, unemployment insurance, public assistance, workmen's compensation. Transponation, highways, streets and roads. Utilities, communications, televisions, radlo, newspaper, power, CATV, gas. Other (please specify)					