Rev. 11/2011

State of Idaho

Ben Ysursa Secretary of State

LOBBYIST REPORT FORM

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SECRETARY OF STATE STATE OF IDAHO

To Be Filed By:				
L-2	LOBBYISTS (Sec. 67-6619)			

(Type or print clearly in black ink) See instructions at bottom of page Lobbyist's name and permanent business address Date prepared Period covered Melissa Nelson 1/2/2013 year ending PO Box 2896 Boise, ID 83701 (Mo.) (Day) (Yr.) 12 31 2012 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 Expenses Pertaining to Lobbying Activity All Employers Do Not Have to be Reported Employer No. 1 Employer No. 2 Employer No. 3 Employer No. 4 Entertainment Food and Refreshment \$ \$3,286.80 \$_\$3,286.80 Living Accommodations \$0.00 \$0.00 Advertising \$0.00 \$0.00 Travel \$0.00 \$0.00 Telephone \$0.00 \$0.00 Other Expenses or Services \$306.00 \$306.00 \$ \$3,592.80 Total \$ \$3,592.80 *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 one hundred (\$100) 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) Idaho Society of CPAs Who should file this form: Any lobbyist registered under Section No. 1 67-6617 Idaho Code PO Box 2896 Boise ID 83701 USA 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

Itom	Subje	ect matter of proposed legislat	ion, the number of the Senate	LEGISLATIVE SUBJECT IDENTIFICATION			
Item 4		ouse Bill, Resolution or other					
4	the L	obbyist was supporting or op	posing.	Code	Subject		Subject
Subject	Codo	Bill, Resolution or Other	Appropriation Bill Number	01	Agriculture, horticulture,	17	Health service, medicine, drugs
(from t		Legislative Ident. Number	and Section Number		farming, and livestock		and controlled substances, health
	aute)	H.B. 634, H.B. 355	and Section Number	02	Amusements, games, athletics		insurance, hospitals
31		П.Б. 634, П.Б. 355			and sports	18	Higher education
				03	Banking, finance, credit and	19	Housing, construction, codes
					investments	20	Insurance (excluding health
				04	Children, minors, youth,	21	insurance)
				0.5	senior citizens	21	Labor, salaries and wages,
				05	Church and religion	22	collective bargaining
				06	Consumer affairs Ecology, environment, pollution,	22	Law enforcement, courts,
				07	conservation, zoning, land and	23	judges, crimes, prisons License, permits
					water use	23	Liquor
				08	Education	25	Manufacturing, distribution and
				09	Elections, campaigns, voting,	23	services
				09	political parties	26	Natural resources, forest and
				10	Equal rights, civil rights,	20	forest products, fisheries, mining
				10	minority affairs		and mining products
				11	Government, financing,	27	Public lands, parks, recreation
				''	taxation, revenue, budget,	28	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		streets and roads
				15	Government, special districts	30	Utilities, communications,
				16	Government, state	50	televisions, radio, newspaper,
				10	Go verminent, state		
						31	Other (please specify) accounting matters
				_			
					ERTIFICATION: I hereby certify the certify the certify the certification or rect statement in accordance with S		
	T 1	1 . 1 . 1		_	Electronically signed		1/2/2013
5	contra	y any rule, ratemaking decision bid or bid process, financia	l services agreement or		obbyist signature		Date
	oona l	obbyist was supporting or opp	osing.	↓ _ !	MRN		1/2/2013
Form PTE-WX and related rules		Е	mployer No. 1 signature		Date		
				E	mployer No. 2 signature		Date
		_					
				Е	mployer No. 3 signature		Date
				$\frac{1}{E}$	mployer No. 4 signature		Date