Rev. 11/2011

LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

LOBBYISTS (Sec. 67-6619)

Page____of___Page(s) THIS SPACE FOR OFFICE USE ONLY

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SECRETARY OF STATE STATE OF IDAHO

(Type or print clearly in black ink)

		instructions at										
Lobbyist's name and permanent business address						Date prepared			Period covered			
JoAn Condie 1015 W Hays St						3/6/2012			month ending			
	N Hays St ID 83702											
Doise,	10 03702							(Mo.	1	(Yr.)		
								2	29	2012		
Item 1	Totals	of all reportal	ble expenditures made of	or incurred by L	obbyist or	by Lobbyist's Empl	oyer on beha	ılf of Lobb	yist's Emplo	oyer.		
Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity All Employers				Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)								
Expenses Pertaining to Lobbying Activity Do Not Have to be Reported			projeto	Employer No. 1		Employer No. 2 Employ		r No. 3 Employer No. 4		r No. 4		
Entertai	nment											
Food an	d Refreshme	nt	\$_\$0.00	\$_\$0.00		\$	\$		\$			
Living A	Accommodat	ions	\$0.00	\$0.00								
Advertis	sing		\$0.00	\$0.00								
Travel			\$0.00	\$0.00								
Telepho	ne		\$0.00	\$0.00								
Other Expenses or Services			\$0.00	\$0.00								
		Total	\$ \$0.00	\$ \$0.00		\$	\$		\$			
		10111	Ψ	Ψ		Ψ	Ψ		Ψ			
*When t			are reporting for requires m									
		•	diture of more than one	hundred dollars	s (\$100) fo	or a legislator, other	holder of pu	blic office,	executive of	officials and		
Item-	member(s) of their housel		nord.			Names of Legisl		ors, Public and Executive Officials				
2 Date			Place		Amount				ld Members in Group			
	ontinued on a	ttached page(s)										
	John March 1911 a	mached page(s)			Iten	,						
INSTRUCTIONS						Eı	Employer(s) Name(s) and Address(es)					
Who should file this form: Any lobbyist registered under Section						Idaho Cable Telecommunications Association No. 1						
		67	-6617 Idaho Code		\vdash	1015 W Hays St Bo	ise ID 83702	USA				
Filing deadline: Monthly reports due within fifteen (15) days of the month for activities of the past month.						No. 2						
TO 1) E EH EF W	лти.										
101	BE FILED W		en Ysursa		No. 3							
Secretary of State												
PO Box 83720 Boise, ID 83720-0080												
Phone: (208) 334-2852 Fax: (208) 334-2282						No. 4						

	Subject matter of proposed legislation, the number of the Senate				LEGISLATIVE SUBJECT IDENTIFICATION					
Item 4	or H	ouse Bill, Resolution or other	legislative activity in which	Codo						
Subjection 30	the L	Bill, Resolution or other obbyist was supporting or op Bill, Resolution or Other Legislative Ident. Number H.B. H.B.		Code 01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	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, taxation, revenue, budget, appropriations, bids, fees, funds Government, federal Government, municipal Government, special districts Government, state	Code 17 18 19 20 21 22 23 24 25 26 27 28 29 30	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 Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas			
Item 5	bid or hid process financial services or hand labbyist was sup-				CERTIFICATION: I hereby certify correct statement in accordance with Electronically signed Lobbyist signature					