

LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Yursa
Secretary of State

To Be Filed By:

L-3 LOBBYISTS
(Sec. 67-6619)

12 APR 24 AM 08:45
SECRETARY OF STATE
STATE OF IDAHO

(Type or print clearly in black ink)
See instructions at bottom of page

Lobbyist's name and permanent business address Kate Haas 910 W Main Boise, ID 83702	Date prepared 4/23/2012	Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr.) 3 31 2012
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Item 1	Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer.				
Category of Expenditure <small>Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported</small>	*Total Amount for All Employers	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)			
		Employer No. 1	Employer No. 2	Employer No. 3	Employer No. 4
Entertainment	\$ \$0.00	\$ \$0.00	\$ \$0.00	\$ \$0.00	\$ \$0.00
Food and Refreshment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Living Accommodations	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Advertising	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Telephone	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other Expenses or Services	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Total	\$ \$0.00	\$ \$0.00	\$ \$0.00	\$ \$0.00	\$ \$0.00

*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.

Item 2	The totals of each expenditure of more than one hundred dollars (\$100) for a legislator, other holder of public office, executive officials and member(s) of their household.			
	Date	Place	Amount	Names of Legislators, Public and Executive Officials and Household Members in Group

Continued on attached page(s)

<p style="text-align: center;">INSTRUCTIONS</p> <p>Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code</p> <p>Filing deadline: Monthly reports due within fifteen (15) days of the month for activities of the past month.</p> <p>TO BE FILED WITH: Ben Yursa Secretary of State PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;">Item 3</th> <th>Employer(s) Name(s) and Address(es)</th> </tr> </thead> <tbody> <tr> <td>No. 1</td> <td>Idaho Association of Building Official PO Box 8224 Boise ID 83707 USA</td> </tr> <tr> <td>No. 2</td> <td>Idaho Petroleum Council Inc PO 984 Boise ID 83701 USA</td> </tr> <tr> <td>No. 3</td> <td>Idaho Press Club PO Box 2221 Boise ID 83701 USA</td> </tr> <tr> <td>No. 4</td> <td>Medco Health Solutions Inc and Affiliates 19520 Yellow Wing Ct Colorado Springs CO 80908 USA</td> </tr> </tbody> </table>	Item 3	Employer(s) Name(s) and Address(es)	No. 1	Idaho Association of Building Official PO Box 8224 Boise ID 83707 USA	No. 2	Idaho Petroleum Council Inc PO 984 Boise ID 83701 USA	No. 3	Idaho Press Club PO Box 2221 Boise ID 83701 USA	No. 4	Medco Health Solutions Inc and Affiliates 19520 Yellow Wing Ct Colorado Springs CO 80908 USA
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Item 4	Subject matter of proposed legislation, the number of the Senate or House Bill, Resolution or other legislative activity in which the Lobbyist was supporting or opposing.		LEGISLATIVE SUBJECT IDENTIFICATION	
	Subject Code (from table)	Bill, Resolution or Other Legislative Ident. Number	Appropriation Bill Number and Section Number	
7, 26 30	H.B. 526, H.B. 379 H.B. 464, H.B. 463 H.B. 462, H.B. 460 H.B. 561			
Item 5	Identify any rule, ratemaking decision, procurement, contract, bid or bid process, financial services or bond lobbyist was supporting or opposing.		<p>CERTIFICATION: I hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 Idaho Code.</p> <p><u>Electronically signed</u> <u>4/23/2012</u></p> <p>Lobbyist signature Date</p>	

- | Code | Subject | Code | Subject |
|------|---|------|--|
| 01 | Agriculture, horticulture, farming, and livestock | 17 | Health service, medicine, drugs and controlled substances, health insurance, hospitals |
| 02 | Amusements, games, athletics and sports | 18 | Higher education |
| 03 | Banking, finance, credit and investments | 19 | Housing, construction, codes |
| 04 | Children, minors, youth, senior citizens | 20 | Insurance (excluding health insurance) |
| 05 | Church and religion | 21 | Labor, salaries and wages, collective bargaining |
| 06 | Consumer affairs | 22 | Law enforcement, courts, judges, crimes, prisons |
| 07 | Ecology, environment, pollution, conservation, zoning, land and water use | 23 | License, permits |
| 08 | Education | 24 | Liquor |
| 09 | Elections, campaigns, voting, political parties | 25 | Manufacturing, distribution and services |
| 10 | Equal rights, civil rights, minority affairs | 26 | Natural resources, forest and forest products, fisheries, mining and mining products |
| 11 | Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds | 27 | Public lands, parks, recreation |
| 12 | Government, county | 28 | Social insurance, unemployment insurance, public assistance, workmen's compensation |
| 13 | Government, federal | 29 | Transportation, highways, streets and roads |
| 14 | Government, municipal | 30 | Utilities, communications, televisions, radio, newspaper, power, CATV, gas |
| 15 | Government, special districts | 31 | Other (please specify)_____ |
| 16 | Government, state | | |

Employer No.	Employer Name(s)	Employer Address(es)
No.5	Shoshone Piate Enterprize Board	PO 1786 Nampa ID 83653 USA
No.6	Snake River Oil & Gas LLC	PO Box 500 Magnolia AR 71754 USA
No.7	Utah Association of Municipal Power Systems	155 N 400 W Ste 480 Salt Lake City UT 84101 USA

Date	Place	Amount	Names of Legislators, Public and Executive Officials and Household Members in Group