3000 E Pine Ave	03:15 OF STATE				
Secretary of State To Be Filed By: It JAN 13 PM 15 PM	OF STATE				
L-2 LOBBYISTS (Sec. 67-6619) SECRETARY STATE O Lobbyist's name and permanent business address Date prepared Blue Cross of Idaho Health Service Inc 3000 E Pine Ave Date prepared					
(Type or print clearly in black ink) See instructions at bottom of page (Sec. 67-6619) STATE O Lobbyist's name and permanent business address Date prepared Period covered Blue Cross of Idaho Health Service Inc 1/13/2014 Image: Period covered 3000 E Pine Ave Image: Period covered Image: Period covered	F IDAHO				
See instructions at bottom of page Lobbyist's name and permanent business address Blue Cross of Idaho Health Service Inc 3000 E Pine Ave					
Blue Cross of Idaho Health Service Inc1/13/20143000 E Pine Ave1/13/2014					
3000 E Pine Ave					
Maridian JD 88040	year ending				
Meridian, ID 83642 (Mo.) (D	y) (Yr.)				
12 31	2013				
Item Item 1 Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Er	iployer.				
Category of Expenditure Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.) Reimbursed Personal Living and Travel *Total Amount for All Employers					
	oyer No. 4				
Entertainment \$_\$0.00 \$_\$					
Living Accommodations \$0.00 \$0.00					
Advertising \$0.00 \$0.00					
Travel \$0.00					
Telephone \$0.00 \$0.00					
Other Expenses or Services \$0.00 \$0.00					
Total \$\$					
*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 Pag					
The totals of each expenditure of more than one hundred five dollars (\$105) for a legislator, other holder of public office, execut and member(s) of their household.	ve officials				
Names of Legislators, Public and Executive	Officials				
2 Date Place Amount and Household Members in Group					
Continued on attached page(s)					
INSTRUCTIONS Item 3 Employer(s) Name(s) and Address(es	Employer(s) Name(s) and Address(es)				
Who should file this form: Any lobbyist registered under Section Blue Cross of Idaho Health Service Inc					
67-6617 Idaho Code No. 1 3000 E Pine Ave Meridian ID 83642 USA	No. 1 3000 E Pine Ave Meridian ID 83642 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					

Item Subject matter of proposed legislation, the number of the Senate			LEGISLATIVE SUBJECT IDENTIFICATION				
4	<i>A</i> or House Bill, Resolution or other legislative activity in which				C L	6.1.4	
	the L	obbyist was supporting or op	posing.	Code 01	Subject Agriculture, horticulture,	Code 17	Subject Health service, medicine, drugs
Subject	Code	Bill, Resolution or Other	Appropriation Bill Number		farming, and livestock	1 /	and controlled substances, health
(from table) Legislative Ident. Number and Section Number		02	Amusements, games, athletics		insurance, hospitals		
17		-			and sports	18	Higher education
17				03	Banking, finance, credit and	19	Housing, construction, codes
				0.5	investments	20	Insurance (excluding health
				04	Children, minors, youth,		insurance)
					senior citizens	21	Labor, salaries and wages,
				05	Church and religion		collective bargaining
				06	Consumer affairs	22	Law enforcement, courts,
				07	Ecology, environment, pollution,		judges, crimes, prisons
					conservation, zoning, land and	23	License, permits
					water use	24	Liquor
				08	Education	25	Manufacturing, distribution and
				09	Elections, campaigns, voting,		services
					political parties	26	Natural resources, forest and
				10	Equal rights, civil rights,		forest products, fisheries, mining
					minority affairs	27	and mining products
				11	Government, financing,	27 28	Public lands, parks, recreation
					taxation, revenue, budget, appropriations, bids, fees, funds	28	Social insurance, unemployment 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	20	televisions, radio, newspaper,
							power, CATV, gas
						31	Other (please specify)
				C	ERTIFICATION: I hereby certify th	at the at	pove is a true, complete and
				cc	prrect statement in accordance with S	ection 6	7-6624 Idaho Code.
				E	Electronically signed		1/13/2014
Item		y any rule, ratemaking decision of the bid or bid process, financial		L	obbyist signature		Date
5		obbyist was supporting or opp					
	oona i	obbyist was supporting of opp	505mg.	- 1			
			Er	nployer No. 1 signature		Date	
				nployer No. 2 signature		Date	
			nproyer 190. 2 signature		Date		
				Er	nployer No. 3 signature		Date
				$\frac{1}{\text{Er}}$	nployer No. 4 signature		Date

Please refer to the designated lobbyist Julie Taylor.