Rev. 12/2012		LOBBYIST REPORT FORM					PageofPage(s)				
CREI	T SEAT	State of Ida	ho 🔽	ANNUA	L	SEMI-A	ANNUAL	4	THIS SP.	ACE FOR OFFICE	USE ONLY
THE	C OF 107	Ben Ysursa Secretary of State		To Be Filed I	•	VICTO	]			3 03 AM 1 <sup>2</sup> RETARY (	
				L-2	LOBB (Sec. 6					TATE OF	
		(Type or print clea									
Lobby	See instructions at bottom of page Lobbyist's name and permanent business address					Date prepare	:d		Peri	iod covered	
	Wyatt Prescott PO Box 15397 Boise, ID 83715				2		2/3/2014		year ending		
									(1	Mo.) (Day	) (Yr.)
									12	2 31	2013
Item 1	Item 1 Totals of all reportable expenditures made				y Lobbyist	or by Lob	byist's Empl	loyer on be	ehalf of Lo	bbyist's Emp	loyer.
Rein	bursed Person	Expenditure al Living and Travel to Lobbying Activity	*Total Amount for All Employers	Proportionate amounts contributed by each employer (Ide Item 3, at bottom of page.)				oyer (Iden	entify employers, under		
		to be Reported		Employ	ver No. 1	Employer No. 2		Employer No. 3		Employer No. 4	
	tainment and Refresł	nment	\$ <u>\$1,862.80</u>	\$\$1,8	62.80	\$		\$		\$	
Livin	g Accommo	odations	\$0.00	\$0.0	0	-					
Adver	rtising		\$0.00		0						
Trave	1		\$0.00	\$0.0	0	-					
Telepl	hone		\$0.00 \$		0	-					
Other	Expenses of	or Services	\$0.00	\$0.0	0	-					
								-			
		Total	\$\$1,862.80	\$_\$1,8	62.80	\$		_ \$		\$	
*Wher		of employers you a	re reporting for requires m	ultiple L-2 for	rms to be fil	ed a total arr		mployers sl		tered on Page 1	
	The tota	of employers you a	re reporting for requires m iture of more than one h	ultiple L-2 for	rms to be fil	ed a total arr		mployers sl		tered on Page 1	
*When Item	The tota	of employers you a ls of each expendi	re reporting for requires m iture of more than one h	ultiple L-2 for	rms to be fil	ed a total am ()5) for a leg	gislator, othe Names of	mployers sl er holder of	f public off	tered on Page 1 fice, executive	e officials
Item	The tota and men	of employers you a ls of each expendi	re reporting for requires m iture of more than one household.	ultiple L-2 for	rms to be fil dollars (\$10	ed a total am ()5) for a leg	gislator, othe Names of	mployers sl er holder of	f public off	tered on Page 1	e officials
Item	The tota and men	of employers you a ls of each expendi	re reporting for requires m iture of more than one household.	ultiple L-2 for	rms to be fil dollars (\$10	ed a total am ()5) for a leg	gislator, othe Names of	mployers sl er holder of	f public off	tered on Page 1 fice, executive	e officials
Item	The tota and men	of employers you a ls of each expendi	re reporting for requires m iture of more than one household.	ultiple L-2 for	rms to be fil dollars (\$10	ed a total am ()5) for a leg	gislator, othe Names of	mployers sl er holder of	f public off	tered on Page 1 fice, executive	e officials
Item	The tota and men	of employers you a ls of each expendi	re reporting for requires m iture of more than one household.	ultiple L-2 for	rms to be fil dollars (\$10	ed a total am ()5) for a leg	gislator, othe Names of	mployers sl er holder of	f public off	tered on Page 1 fice, executive	e officials
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Item	Date	of employers you a ls of each expendi	re reporting for requires m iture of more than one household.	ultiple L-2 for	rms to be fil dollars (\$10	ed a total am ()5) for a leg	gislator, othe Names of	mployers sl er holder of	f public off	tered on Page 1 fice, executive	e officials
Item	Date	of employers you a ls of each expendi nber(s) of their ho	re reporting for requires m iture of more than one household.	ultiple L-2 for	rms to be fil dollars (\$10 Amou	ed a total am ()5) for a leg	vislator, othe	mployers sl er holder of f Legislators and Househ	f public off 3, Public and old Membe	tered on Page 1 fice, executive	e officials
Item-2	Continued c	of employers you a ls of each expendin ber(s) of their ho on attached page(s) INST file this form: A	re reporting for requires m iture of more than one ho pusehold. Place	ultiple L-2 for undred five c	rms to be fil dollars (\$10 Amou	Item Idaho C	vislator, othe	mployers sl er holder of f Legislators and Househ mployer(s)	f public off s, Public and old Membe	d Executive of the original sector of the ori	e officials
Item-2	Continued of the should a transmission of the	of employers you a ls of each expendi- nber(s) of their ho on attached page(s) INST file this form: A 67 ne: Annual report	re reporting for requires m iture of more than one household. Place	nultiple L-2 for undred five c	rms to be fil lollars (\$10 Amou	Item Idaho C	islator, othe Names of En Ethe Associa	mployers sl er holder of f Legislators and Househ mployer(s)	f public off s, Public and old Membe	d Executive of the original sector of the ori	e officials
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	Subi	ect matter of proposed legislat	ion the number of the Consta	LEGISLATIVE SUBJECT IDENTIFICATION						
Item		buse Bill, Resolution or other		LEGISLATIVE SUBJECT IDENTIFICATION						
4		obbyist was supporting or op		Code	Subject	Code	Subject			
				01	Agriculture, horticulture,	17	Health service, medicine, drugs			
Subjec		Bill, Resolution or Other	Appropriation Bill Number		farming, and livestock		and controlled substances, health			
(from	table)	Legislative Ident. Number	and Section Number	02	Amusements, games, athletics		insurance, hospitals			
1, 7					and sports	18	Higher education			
26, 2	7			03	Banking, finance, credit and	19	Housing, construction, codes			
20, Z	.7				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		and mining products			
				11	Government, financing,	27	Public lands, parks, recreation			
					taxation, revenue, budget,	28	Social insurance, unemployment			
					appropriations, bids, fees, funds		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		televisions, radio, newspaper,			
							power, CATV, gas			
						31	Other (please specify)			
				-						
					ERTIFICATION: I hereby certify the prrect statement in accordance with S					
				F	Electronically signed		2/3/2014			
Iton	Identif	y any rule, ratemaking decisi	on. procurement.		obbyist signature					
Item		ct bid or bid process, financia			obbyist signature		Date			
5		lobbyist was supporting or opposing.			NP		2/3/2014			
				E	mployer No. 1 signature		Date			
				E	mployer No. 2 signature		Date			
				E	mployer No. 3 signature		Date			
					mployer No. 4 signature		Date			