

LOBBYIST MONTHLY REPORT FORM



State of Idaho
Ben Ysursa
Secretary of State

To Be Filed By:
L-3 LOBBYISTS
(Sec. 67-6619)

Page _____ of _____ Page(s)
THIS SPACE FOR OFFICE USE ONLY

05 MAR 10 AM 11:45
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 Corey Surber Saint Alphonsus Mission Services 1055 N. Curtis Road Boise, ID 83706	Date prepared 3/10/05	Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr.) 2 28 2005
--	---------------------------------	---

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	Proportional 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	\$ 1,130.32	\$ 1,130.32	\$	\$	\$
Food and Refreshment					
Living Accommodations					
Advertising					
Travel					
Telephone					
Other Expenses or Services					
Total	\$ 1,130.32	\$ 1,130.32	\$ 0.00	\$ 0.00	\$ 0.00

*When the number of employers you are reporting for requires multiple L-3 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 fifty dollars (\$50) for a legislator or other holder of public office.			
	Date	Place	Amount	Names of Legislators & Public Officials in Group
		none		

Continued on attached page(s)

<p 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 ten (10) days of the month for activities of the past month.</p> <p>TO BE FILED WITH: Ben Ysursa Secretary of State PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282</p>	Item 3	Employer(s) Name(s) and Address(es)
	No.1	Saint Alphonsus Regional Medical Center 1055 N. Curtis Road, Boise, ID 83706
	No.2	
	No.3	
	No.4	

Item 4	Expenditures made by the lobbyist or by the lobbyist's employer in the nature of contributions of money or other tangible or intangible personal property to any Legislator, or for or on behalf of any legislator.		
	Date	Amount	Name of Legislator Receiving or Benefited
			none

Item 5	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	
	17	S1105		01 Agriculture, horticulture, farming, and livestock
	17	SCR104		02 Amusements, games, athletics and sports
				03 Banking, finance, credit and investments
				04 Children, minors, youth, senior citizens
				05 Church and religion
				06 Consumer affairs
				07 Ecology, environment, pollution, conservation, zoning, land and water use
				08 Education
				09 Elections, campaigns, voting, political parties
				10 Equal rights, civil rights, minority affairs
				11 Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds
				12 Government, county
				13 Government, federal
				14 Government, municipal
				15 Government, special districts
				16 Government, state
				17 Health services, medicine, drugs and controlled substances, health insurance, hospitals
				18 Higher education
				19 Housing, construction, codes
				20 Insurance (excluding health insurance)
				21 Labor, salaries and wages, collective bargaining
				22 Law enforcement, courts, judges, crimes, prisons
				23 License, permits
				24 Liquor
				25 Manufacturing, distribution and services
				26 Natural resources, forest and forest products, fisheries, mining and mining products
				27 Public lands, parks, recreation
				28 Social insurance, unemployment insurance, public assistance, workmen's compensation
				29 Transportation, highways, streets and roads
				30 Utilities, communications, television, radio, newspaper, power, CATV, gas
				31 Other (please specify) _____

CERTIFICATION: I hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 Idaho Code.

Carolynn
 Lobbyist signature _____ Date _____