

**LOBBYIST MONTHLY REPORT FORM**



State of Idaho

Ben Ysursa  
Secretary of State

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

12 FEB 15 AM 10:50

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  C.A. "SKIP" SMYSER LOBBY IDAHO, LLC 134 SOUTH 5TH STREET BOISE, ID 83702	Date prepared  02/10/2012	Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr) 01   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	\$ 333.59	\$ 0	\$ 0	\$ 5.51	\$ 0
Food and Refreshment					
Living Accommodations					
Advertising					
Travel					
Telephone					
Other Expenses or Services					
<b>Total</b>	\$ 333.59	\$ 0	\$ 0	\$ 5.51	\$ 0

\*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)

INSTRUCTIONS	Item 3	Employer(s) Name(s) and Address(es)
<p><b>Who should file this form:</b> Any lobbyist registered under Section 67-6617 Idaho Code</p> <p><b>Filing deadline:</b> Monthly reports due within fifteen (15) days of the month for activities of the past month.</p> <p>TO BE FILED WITH:</p> <p style="text-align: center;">Ben Ysursa Secretary of State PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282</p>	No. 1	Advantage Professional Mgt. LLC 442 SW Umatilla, Ste 200, Redmond, OR 97756
	No. 2	Altria Client Services Inc. & ITS Affiliates 1415 L Street, Ste 1150, Sacramento, CA 95814
	No. 3	Apangea Learning, Inc. 925 Liberty Ave., 3rd Flr, Pittsburgh, PA 15222
	No. 4	AT&T Services, Inc. 4393 Riverboat Rd., Taylorsville, UT 84123

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Item 1 Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity <b>Do Not Have to be Reported</b>	*Total Amount for All Employers	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)			
		Employer No. 5	Employer No. 6	Employer No. 7	Employer No. 8
Entertainment	\$ <b>333.59</b>	\$ <b>10.01</b>	\$ <b>0</b>	\$ <b>62.00</b>	\$ <b>0</b>
Food and Refreshment					
Living Accommodations					
Advertising					
Travel					
Telephone					
Other Expenses or Services					
<b>Total</b>	\$ <b>333.59</b>	\$ <b>10.01</b>	\$ <b>0</b>	\$ <b>62.00</b>	\$ <b>0</b>

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

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<p align="center"><b>INSTRUCTIONS</b></p> <p><b>Who should file this form:</b> Any lobbyist registered under Section 67-6617 Idaho Code</p> <p><b>Filing deadline:</b> Monthly reports due within fifteen (15) days of the month for activities of the past month.</p> <p><b>TO BE FILED WITH:</b> Ben Yursa 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. 5	Corrections Corporation of America 10 Burton Hills Blvd, Nashville, TN 37215
	No. 6	Cottonwood Financial 1901 Gateway Dr., Ste 200, Irving, TX 75038
	No. 7	Education Networks of America 1101 McGavock St., Nashville, TN 37203
	No. 8	Gem Plan 1575 Baldy Ave., Pocatello, ID 83201

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<b>Item 1</b>	Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer.				
Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity <b>Do Not Have to be Reported</b>	*Total Amount for All Employers	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)			
		Employer No. <b>9</b>	Employer No. <b>10</b>	Employer No. <b>11</b>	Employer No. <b>12</b>
Entertainment	\$ <u>333.59</u>	\$ <u>0</u>	\$ <u>16.09</u>	\$ <u>25.50</u>	\$ <u>46.41</u>
Food and Refreshment					
Living Accommodations					
Advertising					
Travel					
Telephone					
Other Expenses or Services					
<b>Total</b>	\$ <u>333.59</u>	\$ <u>0</u>	\$ <u>16.09</u>	\$ <u>25.50</u>	\$ <u>46.41</u>

\*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.

<b>Item-2</b>	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)

<b>INSTRUCTIONS</b>  <b>Who should file this form:</b> Any lobbyist registered under Section 67-6617 Idaho Code  <b>Filing deadline:</b> Monthly reports due within fifteen (15) days of the month for activities of the past month.  TO BE FILED WITH: Ben Ysursa Secretary of State PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282	<b>Item 3</b>	Employer(s) Name(s) and Address(es)  No <b>9</b> Idaho Association of Home Care Agencies P.O. Box 159, Lewiston, ID 83501  No <b>10</b> Idaho Orthopedic Society 8854 W Emerald, Ste 410, Boise, ID 83704  No <b>11</b> Idaho Ski Areas Association P.O. Box 1062, McCall, ID 83638  No <b>12</b> Idaho Trucking Association 3405 E. Overland Rd., Ste 175, Meridian, ID 83642
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		Employer No. <u>13</u>	Employer No. <u>14</u>	Employer No. <u>15</u>	Employer No. <u>16</u>
Entertainment	\$ <u>333.59</u>	\$ <u>0</u>	\$ <u>116.66</u>	\$ <u>0</u>	\$ <u>0</u>
Food and Refreshment					
Living Accommodations					
Advertising					
Travel					
Telephone					
Other Expenses or Services					
<b>Total</b>	\$ <u>333.59</u>	\$ <u>0</u>	\$ <u>116.66</u>	\$ <u>0</u>	\$ <u>0</u>

\*When the number of employers you are reporting for requires multiple 1-2 forms to be filed a total amount for all employers should be entered on Page 1.

<b>Item 2</b>	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

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	No. <u>13</u>	Intoximeters, Inc. 2081 Craig Road, St. Louis, MO 63146
	No. <u>14</u>	Lobby Idaho, LLC 134 South 5th Street, Boise, ID 83702
	No. <u>15</u>	Merck Sharp & Dohme Corp. including its affiliates - Schering Corporation and Merck Schering-Plough Pharmaceuticals LLC 6930 Boardwalk Dr. Granite Bay, CA 95746
	No. <u>16</u>	Molina Healthcare, Inc. 300 University Ave., Ste 100, Sacramento, CA 95825

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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. 17	Employer No	Employer No	Employer No.
Entertainment	\$ 333.59	\$ 51.41	\$	\$	\$
Food and Refreshment					
Living Accommodations					
Advertising					
Travel					
Telephone					
Other Expenses or Services					
<b>Total</b>	\$ 333.59	\$ 51.41	\$	\$	\$

\*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.

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No 17	Priest River State Lessees Association 201 W. Seventh Ave, Post Falls, ID 83854										
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