

**LOBBYIST MONTHLY REPORT FORM**



State of Idaho

Ben Yursa  
Secretary of State

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

19 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<br><br>William C. Roden, P.O. Box 2110<br>599 W. Bannock St., Ste. B<br>Boise, ID 83701-2110 | Date prepared<br><br>02/08/13 | Period covered<br><input checked="" type="checkbox"/> month ending<br>(Mo.) (Day) (Yr.)<br>01   31   13 |
|---|-------------------------------|---|

|   |  |  |                |                |                |
|---|--|--|----------------|----------------|----------------|
| <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. |  |                |                |                |
| <b>Category of Expenditure</b>  | <b>*Total Amount for All Employers</b>   | <b>Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)</b> |                |                |                |
|   |  | Employer No. 1   | Employer No. 2 | Employer No. 3 | Employer No. 4 |
| Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity<br><b>Do Not Have to be Reported</b> |  |  |                |                |                |
| Entertainment   | \$ _____   | \$ _____   | \$ _____       | \$ _____       | \$ _____       |
| Food and Refreshment  | _____  | _____  | _____          | _____          | _____          |
| Living Accommodations   | _____  | _____  | _____          | _____          | _____          |
| Advertising   | _____  | _____  | _____          | _____          | _____          |
| Travel  | _____  | _____  | _____          | _____          | _____          |
| Telephone   | _____  | _____  | _____          | _____          | _____          |
| Other Expenses or Services  | _____  | _____  | _____          | _____          | _____          |
| <b>Total</b>  | \$ 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.

|                |   |       |        |   |
|----------------|---|-------|--------|---|
| <b>Item- 2</b> | The totals of each expenditure of more than one hundred five dollars (\$105) 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>Item 3</b> | 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><b>TO BE FILED WITH:</b></p> <p style="text-align: center;">Ben Yursa<br/>Secretary of State<br/>PO Box 83720<br/>Boise, ID 83720-0080<br/>Phone: (208) 334-2852 Fax: (208) 334-2282</p> | No. 1         | PhRMA<br>1100 15th St., NW, Washington, D.C. 20005 |
|  | No. 2         |  |
|  | No. 3         |  |
|  | No. 4         |  |



**LOBBYIST MONTHLY REPORT FORM**



**State of Idaho**

Ben Yursa  
Secretary of State

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

13 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<br><br>William C. Roden, P.O. Box 2110<br>599 W. Bannock St., Ste. B<br>Boise, ID 83701-2110 | Date prepared<br><br>02/08/13 | Period covered<br><input checked="" type="checkbox"/> month ending<br>(Mo.) (Day) (Yr.)<br>01   31   13 |
|---|-------------------------------|---|

|   |  |  |                |                |                |
|---|--|--|----------------|----------------|----------------|
| <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<br><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 ( <b>Identify employers, under Item 3, at bottom of page.</b> ) |                |                |                |
|   |  | Employer No. 1   | Employer No. 2 | Employer No. 3 | Employer No. 4 |
| Entertainment   | \$ _____   | \$ _____   | \$ _____       | \$ _____       | \$ _____       |
| Food and Refreshment  | \$ _____   | \$ _____   | \$ _____       | \$ _____       | \$ _____       |
| Living Accommodations   | _____  | _____  | _____          | _____          | _____          |
| Advertising   | _____  | _____  | _____          | _____          | _____          |
| Travel  | _____  | _____  | _____          | _____          | _____          |
| Telephone   | _____  | _____  | _____          | _____          | _____          |
| Other Expenses or Services  | _____  | _____  | _____          | _____          | _____          |
| <b>Total</b>  | \$ <b>0.00</b>   | \$ <b>0.00</b>   | \$ <b>0.00</b> | \$ <b>0.00</b> | \$ <b>0.00</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.

|               |   |       |        |   |
|---------------|---|-------|--------|---|
| <b>Item-2</b> | The totals of each expenditure of more than one hundred five dollars (\$105) 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><br><br><b>Who should file this form:</b> Any lobbyist registered under Section 67-6617 Idaho Code<br><br><b>Filing deadline:</b> Monthly reports due within fifteen (15) days of the month for activities of the past month.<br><br>TO BE FILED WITH:<br>Ben Yursa<br>Secretary of State<br>PO Box 83720<br>Boise, ID 83720-0080<br>Phone: (208) 334-2852 Fax: (208) 334-2282 | <b>Item 3</b> | Employer(s) Name(s) and Address(es)<br><br>No. 1 CenturyLink<br>999 Main St., 11th Floor, Boise, ID 83702<br><br>No. 2 Coeur d'Alene Tribe<br>P.O. Box 408, Plummer, ID 83851<br><br>No. 3 Delta Dental Plan of Idaho<br>555 E. Parkcenter Blvd., Boise, ID 83706<br><br>No. 4 SelectHealth<br>P.O. Box 30192, Salt Lake City, UT 84130-0192 |
|---|---------------|--|

**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.

| Subject Code (from table) | Bill, Resolution or Other Legislative Ident. Number | Appropriation Bill Number and Section Number |
|---------------------------|---|--|
|                           | HB 55<br><br>SB 1042                                |  |

**LEGISLATIVE SUBJECT IDENTIFICATION**

| 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   |      |  |

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

*Walter Dole* 2/8/2013  
 Lobbyist signature Date

**Item 5** Identify any rule, ratemaking decision, procurement, contract, bid or bid process, financial services or bond lobbyist was supporting or opposing.