

LOBBYIST MONTHLY REPORT FORM



State of Idaho
Ben Yursa
Secretary of State

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

2012 APR 16 PM 2:20

(Type or print clearly in black ink)
See instructions at bottom of page

Lobbyist's name and permanent business address JASON B. KREIZENBECK LOBBY IDAHO, LLC 134 SOUTH 5TH STREET BOISE, ID 83702	Date prepared 4/9/2012	Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr) 03 31 2012
---	---------------------------	--

Item 1 Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported	*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					
Food and Refreshment	\$ 425.73	\$ 0	\$ 0	\$ 0	\$ 13.25
Living Accommodations					
Advertising					
Travel					
Telephone					
Other Expenses or Services					
Total	\$ 425.73	\$ 0	\$ 0	\$ 0	\$ 13.25

*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)
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code Filing deadline: Monthly reports due within fifteen (15) days of the month for activities of the past month. TO BE FILED WITH: Ben Yursa Secretary of State PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282		No. 1	Altria Client Services Inc. & ITS Affiliates 1415 L Street, Ste 1150, Sacramento, CA 95814
		No. 2	Apangea Learning, Inc. 925 Liberty Ave., 3rd Flr, Pittsburgh, PA 15222
		No. 3	AT&T Services, Inc. 4393 Riverboat Rd., Taylorsville, UT 84123
		No. 4	Corrections Corporation of America 10 Burton Hills Blvd., Nashville, TN 37215

LOBBYIST MONTHLY REPORT FORM



State of Idaho
Ben Yursa
Secretary of State

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

(Type or print clearly in black ink)
See instructions at bottom of page

Lobbyist's name and permanent business address JASON B. KREIZENBECK LOBBY IDAHO, LLC 134 SOUTH 5TH STREET BOISE, ID 83702	Date prepared 4/9/2012	Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr.) 03 31 2012
---	----------------------------------	--

Item 1 Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported	*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	\$ 425.73	\$ 0	\$ 0	\$ 192.99	\$ 0
Food and Refreshment					
Living Accommodations					
Advertising					
Travel					
Telephone					
Other Expenses or Services					
Total	\$ 425.73	\$ 0	\$ 0	\$ 192.99	\$ 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	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.				

Continued on attached page(s)

<p>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 fifteen (15) days of the month for activities of the past month.</p> <p>TO BE FILED WITH: 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. 1	Cottonwood Financial 1901 Gateway Dr., Ste 200, Irving, TX 75038
	No. 2	Idaho Association of Home Care Agencies P.O. Box 159, Lewiston, ID 83501
	No. 3	Idaho Power Company P.O. Box 70, Boise, ID 83707
	No. 4	Idaho Ski Areas Association P.O. Box 1062, McCall, ID 83638

LOBBYIST MONTHLY REPORT FORM



State of Idaho
Ben Yursa
Secretary of State

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

(Type or print clearly in black ink)
See instructions at bottom of page

Lobbyist's name and permanent business address JASON B. KREIZENBECK LOBBY IDAHO, LLC 134 SOUTH 5TH STREET BOISE, ID 83702	Date prepared 4/9/2012	Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr.) 03 31 2012
---	----------------------------------	--

Item 1 Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported	*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					
Food and Refreshment	\$ 425.73	\$ 0	\$ 9.54	\$ 0	\$ 0
Living Accommodations					
Advertising					
Travel					
Telephone					
Other Expenses or Services					
Total	\$ 425.73	\$ 0	\$ 9.54	\$ 0	\$ 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	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.				

Continued on attached page(s)

INSTRUCTIONS	Item 3 Employer(s) Name(s) and Address(es)
<p>Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code</p> <p>Filing deadline: Monthly reports due within fifteen (15) days of the month for activities of the past month.</p> <p>TO BE FILED WITH: Ben Yursa Secretary of State PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282</p>	No. 1 Idaho Trucking Association 3405 E. Overland Rd., Ste 175, Meridian, ID 83642
	No. 2 Intel Corporation 3355 Upper Drive, Lake Oswego, OR 97035
	No. 3 Intoximeters, Inc. 2081 Craig Rd, St. Louis, MO 63146
	No. 4 ISR Capitol, LLC 1112 W. Main Street, Ste 101, Boise, ID 83702

LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Yursa
Secretary of State

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

(Type or print clearly in black ink)
See instructions at bottom of page

Lobbyist's name and permanent business address JASON B. KREIZENBECK LOBBY IDAHO, LLC 134 SOUTH 5TH STREET BOISE, ID 83702	Date prepared 4/9/2012	Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr.) 03 31 2012
---	-------------------------------	---

Item 1 Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported	*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	\$ 425.73	\$ 0	\$ 0	\$ 0	\$ 0
Food and Refreshment					
Living Accommodations					
Advertising					
Travel					
Telephone					
Other Expenses or Services					
Total	\$ 425.73	\$ 0	\$ 0	\$ 0	\$ 0

*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.

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 Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code Filing deadline: Monthly reports due within fifteen (15) days of the month for activities of the past month. TO BE FILED WITH: Ben Yursa Secretary of State PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282	Item 3	Employer(s) Name(s) and Address(es)
	No. 1	Lobby Idaho, LLC 134 South 5th Street, Boise, ID 83702
	No. 2	Merck
	No. 3	Micron Technology, Inc. 8000 S. Federal Way, MS 407, Boise, ID 83707
	No. 4	Microsoft Corporation One Microsoft Way, Redmond, WA 98052

LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Yursa
Secretary of State

To Be Filed By:

L-3 LOBBYISTS
(Sec. 67-6619)

(Type or print clearly in black ink)
See instructions at bottom of page

Lobbyist's name and permanent business address JASON B. KREIZENBECK LOBBY IDAHO, LLC 134 SOUTH 5TH STREET BOISE, ID 83702	Date prepared <div style="font-size: 24px; text-align: center;">4/9/2012</div>	Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr.) <div style="font-size: 24px; text-align: center;">03 31 2012</div>
--	---	---

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	\$ 425.73	\$ 209.95	\$ 0	\$ _____	\$ _____
Food and Refreshment					
Living Accommodations					
Advertising					
Travel					
Telephone					
Other Expenses or Services					
Total	\$ 425.73	\$ 209.95	\$ 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)

<p>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 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 Yursa Secretary of State PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;">Item 3</th> <th>Employer(s) Name(s) and Address(es)</th> </tr> </thead> <tbody> <tr> <td>No. 1</td> <td>Mountain View Hospital 2325 Cornado, Idaho Falls, ID 83404</td> </tr> <tr> <td>No. 2</td> <td>Priest River State Lessees Association 201 W. Seventh Ave., Post Falls, ID 83854</td> </tr> <tr> <td>No. 3</td> <td></td> </tr> <tr> <td>No. 4</td> <td></td> </tr> </tbody> </table>	Item 3	Employer(s) Name(s) and Address(es)	No. 1	Mountain View Hospital 2325 Cornado, Idaho Falls, ID 83404	No. 2	Priest River State Lessees Association 201 W. Seventh Ave., Post Falls, ID 83854	No. 3		No. 4	
Item 3	Employer(s) Name(s) and Address(es)										
No. 1	Mountain View Hospital 2325 Cornado, Idaho Falls, ID 83404										
No. 2	Priest River State Lessees Association 201 W. Seventh Ave., Post Falls, ID 83854										
No. 3											
No. 4											

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
SEE ATTACHED SHEET		

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 | | |

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

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

 _____

Lobbyist signature

4/10/12

Date

H.B. 354	H.B. 503	H.B. 604	S.B. 1277	SJR 102
H.B. 368a	H.B. 515	H.B. 612	S.B. 1280	SJR 124
H.B. 393a	H.B. 518	H.B. 619	S.B. 1294	
H.B. 403	H.B. 452	H.B. 691	S.B. 1306	
H.B. 405	H.B. 453	HCR 30	S.B. 1307	
H.B. 410	H.B. 515	HCR 45	S.B. 1309	
H.B. 423	H.B. 529	S.B. 1215	S.B. 1310	
H.B. 426	H.B. 541	S.B. 1219	S.B. 1311	
H.B. 433	H.B. 554	S.B. 1229	S.B. 1312	
H.B. 435	H.B. 555	S.B. 1231	S.B. 1313	
H.B. 435	H.B. 559	S.B. 1232	S.B. 1316	
H.B. 439	H.B. 561	S.B. 1241	S.B. 1317a	
H.B. 440	H.B. 563	S.B. 1243	S.B. 1319	
H.B. 441	H.B. 564a	S.B. 1248	S.B. 1334	
H.B. 442	H.B. 563	S.B. 1250	S.B. 1335	
H.B. 470	H.B. 566	S.B. 1251	S.B. 1339	
H.B. 471	H.B. 569	S.B. 1252	S.B. 1342	
H.B. 474	H.B. 571	S.B. 1255	S.B. 1347	
H.B. 477	H.B. 572	S.B. 1257	S.B. 1348	
H.B. 485	H.B. 573	S.B. 1260	S.B. 1352	
H.B. 488	H.B. 575	S.B. 1261	S.B. 1356	
H.B. 488	H.B. 576	S.B. 1262	S.B. 1358	
H.B. 492	H.B. 581	S.B. 1268	S.B. 1361	
H.B. 493	H.B. 582	S.B. 1273	HJM 12	
H.B. 500	H.B. 586	S.B. 1274	SCR 124	
H.B. 501	H.B. 587	S.B. 1275		
H.B. 502	H.B. 596			
	H.B. 599			