

State of Idaho

Lawerence Denney Secretary of State

LOBBYIST REPORT FORM

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Lobbyí		ermanent busine			Da	ite prepared	<u></u>		Period c	overed		
Jeri DeLange 8464 N Cloverleaf Dr									year endin	Ė		
	len ID 8383					01/30/17				-		
•									(Mo.)	1 1	(Yr.)	
	···								12	31	16	
Item 1	Totals	s of all reportal	ble expenditures made o	r incurred by Lo	bbyist o	r by Lobb	yist's Emp	loyer on behalf o	f Lobby	ist's Employ	er,	
Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity		*Total Amount for	Proportionate arr Item 3, at botton			y each empl	loyer (Jdentify en	ployers,	under			
DADEIIS D	o Not Have to b	e Reported	All Employers	Employer No. 1		Employer No. 2 Emp		Employer N	ver No. 3 Employer No.		No. 4	
	inment nd Refreshme	ent	s0.00	s 0.00		s		S		S		
Living	Accommoda	cions	0.00									
Advert			0.00	0.00				-				
Travel	_		0.00	0.00						•		
Teleph	one	:	0.00	0.00								
	Expenses or S	ervices	0.00	0.00			~					
	<u> </u>						-					
		Total	s	s0.00		s0	0.00 s 0.0			s0.0	<u> </u>	
'When i	the number of e	mplovers vou ar	e reporting for requires mu	 tinle [.=2 forms to	he filed :	s total amos	unt for all e	mnlovers should be	entered	on Page 1		
	The totals o	feach expendi	ture of more than one h								officials	
Item-	and member	r(s) of their ho	usehold.	 			27					
2	Date		Place		Amount Names of Legislators, Public and Executive Or Amount and Household Members in Group						lś	
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X ^c	Continued on at	ached page(s)			_							
INSTRUCTIONS				Iten 3	1	En	Employer(s) Name(s) and Address(es)					
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code			Locker Room, Inc. No. 1 2942 N Government Way, Coeur d'Alene, ID 83814									
T(H)	o deedlines		s due on January 31st.		ļ				····-	-		
- 1,14A			s due on January 3 1st. Sylist semi-annual report	due July 3 lst.	No. 2							
TOI	BE FILED W	ІТН:			-		<u> </u>					
Lawerence Denney			No. 3									
Secretary of State PO Box 83720					·				 ,			
Boise, ID 83720-0080				No 4								

No. 4

Phone: (208) 334-2852 Fax: (208) 334-2282

Subject matter of proposed legislation, the number of the Senate LEGISLATIVE SUBJECT IDENTIFICATION Item or House Bill, Resolution or other legislative activity in which the Lobbyist was supporting or opposing. Code Subject Code Subject 17 Health service, medicine, drugs 01 Agriculture, horticulture. Bill, Resolution or Other Subject Code Appropriation Bill Number farming, and livestock and controlled substances, health (from table) Legislative Ident, Number and Section Number Amusements, games, athletics insurance, hospitals Higher education 23 and sports 18 Banking, finance, credit and 03 19 Housing, construction, codes investments 20 Insurance (excluding health 04 Children, minors, youth, insurance) senior citizens 21 Labor, salaries and wages, Church and religion 05 collective bargaining 06 Consumer affairs Law enforcement, courts. 07 Boology, environment, pollution, judges, crimes, prisons conservation, zoning, land and 23 License, permits Water use Liquor Education 08 Manufacturing, distribution and 25 Elections, campaigns, voting, services political parties 26 Natural resources, forest and Equal rights, civil rights, forest products, fisheries, mining minority affairs and mining products Government, financing, Public lands, parks, recreation taxation, revenue, budget, Social insurance, unemployment appropriations, bids, fees, funds insurance, public assistance, 12 Government, county workmen's compensation 13 Government, federal Transportation, highways, 14 Government, municipal streets and roads 15 Government, special districts Utilities, communications. Government, state televisions, radio, newspaper, power, CATV, gas 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. 01/30/17 Identify any rule, raternaking decision, procurement, <u>Įtem</u> contract bid or bid process, financial services agreement or 5 bond lobbyist was supporting or opposing. 01/30/17 Date Employer No. 2 signature Date Employer No. 3 signature Date Employer No. 4 signature Date