Rev. 12/2012

6871

## State of Idaho

ey

<b>LOBBYIST</b>	<b>REPORT FORM</b>
-----------------	--------------------

LOBBYISTS

$\neg$	ANNUAL
	AMMUAL

To Be Filed By:

~	SEMI-ANNUA

Page	of	Page(s)
THIS SPACE	E FOR OFFIC	E USE ONLY

16 JUL 15 AM 10:20

## SECRETARY OF STATE STATE OF IDAHO

OH OH OT	Lawerence Denne
	Secretary of State

L-2 (Sec. 67-6619) (Type or print clearly in black ink)

See instructions a	at bottom of page								
Lobbyist's name and permanent business address				Date prepared			Period covered		
Elaine Ryan 601 E Street NW				7/1	5/2016			year endir	ng
Washington, DC 20049							(Mo.)	(Day)	(Yr.)
<b>3</b> , 1 11 1								1	ı
-							6	30	2016
Totals of all reporta	ble expenditures made	or incurred by	y Lobb	yist or l	y Lobbyist's Empl	loyer on behalf	of Lobby	ist's Employ	yer.
Category of Expenditure	*Total Amount for	Proportiona	Proportionate amounts contributed by each employer ( <b>Identify employers, under Item 3, at bottom of page.</b> )						
Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity	*Total Amount for All Employers								
Do Not Have to be Reported		Employ	yer No. 1	1	Employer No. 2	Employer N	No. 3	Employer	No. 4
Entertainment Food and Refreshment	\$ \$0.00	\$ \$0.00	.0	\$		\$		\$	
		\$_\$0.0		<sup>‡</sup>		.   •		Φ	
Living Accommodations	\$0.00	\$0.0		-					
Advertising	\$0.00	\$0.0		-		-			
Travel	\$0.00	\$0.0		-		-			
Telephone	\$0.00	\$0.0		-					
Other Expenses or Services	\$0.00	\$0.0	0	-		-			
	± 0000		_			_			
Total \$_\$0.00		\$_\$0.00		\$	<u>'</u>	. \$		\$	
*When the number of employers you	 are reporting for requires m	ultiple L-2 for	rms to b	e filed a	total amount for all e	mployers should	be entered	on Page 1.	
The totals of each expend and member(s) of their house		undred five d	dollars	(\$105) f	or a legislator, othe	er holder of publ	ic office,	executive o	fficials
item-	ousenoid.				Names of	Legislators, Pub	lic and Exe	ecutive Offici	als
2 Date	Place		Ar	nount and Household Members in Group					
Continued on attached page(s)									
INSTRUCTIONS					Eı	Employer(s) Name(s) and Address(es)			
Who should file this form: A	ny lobbyist registered u	nder Section			ARP Government	Affairs			
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code				No. 1 601 E Street NW Washington DC 20049 USA					
Filing deadline: Annual repor									
Executive Lobbyist semi-annual report due July 31st.				No. 2					
TO BE FILED WITH:									
Lawerence Denney Secretary of State				No. 3					
PO Box 83720									
Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282									
Phone: (208) 334-2832 Fax: (208) 334-2282									

T.	Subje	ect matter of proposed legislat	ion, the number of the Senate	E LEGISLATIVE SUBJECT IDENTIFICATION				
	or House Bill Resolution or other legislative activity in which							
4		obbyist was supporting or op		Code	Subject	Code	Subject	
				01	Agriculture, horticulture,	17	Health service, medicine, drugs	
Subject		Bill, Resolution or Other	Appropriation Bill Number		farming, and livestock		and controlled substances, health	
(from t	able)	Legislative Ident. Number	and Section Number	02	Amusements, games, athletics		insurance, hospitals	
					and sports	18	Higher education	
				03	Banking, finance, credit and	19	Housing, construction, codes	
					investments	20	Insurance (excluding health	
				04	Children, minors, youth,		insurance)	
					senior citizens	21	Labor, salaries and wages,	
				05	Church and religion		collective bargaining	
				06	Consumer affairs	22	Law enforcement, courts,	
				07	Ecology, environment, pollution,		judges, crimes, prisons	
					conservation, zoning, land and	23	License, permits	
					water use	24	Liquor	
				08	Education	25	Manufacturing, distribution and	
				09	Elections, campaigns, voting,		services	
					political parties	26	Natural resources, forest and	
				10	Equal rights, civil rights,		forest products, fisheries, mining	
					minority affairs		and mining products	
				11	Government, financing,	27	Public lands, parks, recreation	
					taxation, revenue, budget,	28	Social insurance, unemployment	
					appropriations, bids, fees, funds		insurance, public assistance,	
				12	Government, county		workmen's compensation	
				13	Government, federal	29	Transportation, highways,	
				14	Government, municipal		streets and roads	
				15	Government, special districts	30	Utilities, communications,	
				16	Government, state		televisions, radio, newspaper,	
							power, CATV, gas	
						31	Other (please specify)	
				_				
					ERTIFICATION: I hereby certify th			
				co	orrect statement in accordance with S	Section 6	7-6624 <b>Idaho Code.</b>	
					Electronically signed		7/15/2016	
5	contrac	y any rule, ratemaking decision of bid or bid process, financial obbyist was supporting or opp	l services agreement or	L	obbyist signature		Date	
				Er	nployer No. 1 signature		Date	
				Er	mployer No. 2 signature		Date	
				Er	mployer No. 3 signature		Date	
				Er	mployer No. 4 signature		Date	