Rev. 12/2016

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State of Idaho

Lawerence Denney Secretary of State

LOBBYIST REPORT FORM	FORM
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LOBBYISTS

(Sec. 67-6619)

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To Be Filed By:

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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 Date prepared Period covered Melanie Smith 1/31/2018 year ending 8700 W Bryn Mawr Ave Chicago, IL 60631 (Mo.) (Day) (Yr.) 12 31 2017 Item Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer. Proportionate amounts contributed by each employer (Identify employers, under Category of Expenditure Reimbursed Personal Living and Travel *Total Amount for Item 3, at bottom of page.) Expenses Pertaining to Lobbying Activity All Employers Do Not Have to be Reported Employer No. 1 Employer No. 2 Employer No. 3 Employer No. 4 Entertainment Food and Refreshment \$ \$54.30 \$_\$54.30 Living Accommodations \$0.00 \$0.00 Advertising \$0.00 \$0.00 Travel \$0.00 \$0.00 Telephone \$0.00 \$0.00 Other Expenses or Services \$0.00 \$0.00 **Total** \$ \$54.30 \$_\$54.30 *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. The totals of each expenditure of more than one hundred ten dollars (\$110) for a legislator, other holder of public office, executive offi cials and member(s) of their household. Item-Names of Legislators, Public and Executive Officials 2 Date Place Amount and Household Members in Group Continued on attached page(s) Item INSTRUCTIONS Employer(s) Name(s) and Address(es) Property Casualty Insurers Association of America Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code 8700 W Bryn Mawr Ave Ste 1200S Chicago IL 60631 USA Filing deadline: Annual report is due on January 31st. 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 elections@sos.idaho.gov No. 4 Phone: (208) 334-2852 Fax: (208) 334-2282

Item	Item Subject matter of proposed legislation, the number of the Senate			LEGISLATIVE SUBJECT IDENTIFICATION			
4		ouse Bill, Resolution or other					
-	the L	obbyist was supporting or op	posing.		Subject		Subject
Subject	t Code	Bill, Resolution or Other	Appropriation Bill Number	01	Agriculture, horticulture,	17	Health service, medicine, drugs
(from		Legislative Ident. Number	and Section Number	02	farming, and livestock		and controlled substances, health
		Degisian ve raena r vameer		02	Amusements, games, athletics	1.0	insurance, hospitals
20				03	and sports Banking, finance, credit and	18 19	Higher education Housing, construction, codes
				03	investments	20	Insurance (excluding health
				04	Children, minors, youth,	20	insurance)
				04	senior citizens	21	Labor, salaries and wages,
				05	Church and religion	21	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
				1	appropriations, bids, fees, funds		insurance, public assistance,
				12	Government, county	20	workmen's compensation
				13	Government, federal	29	Transportation, highways,
				14	Government, municipal	20	streets and roads
				15 16	Government, special districts Government, state	30	Utilities, communications,
				10	Government, state		televisions, radio, newspaper, power, CATV, gas
						31	Other (please specify)
						31	Other (piease speeny)
					ERTIFICATION: I hereby certify the orrect statement in accordance with S		
	Idontif	Supervision metamolino docini	an areasysment		Electronically signed		1/31/2018
Item 5	contra	by any rule, ratemaking decision or bid process, financia	l services agreement or		obbyist signature		Date
	bond l	obbyist was supporting or opp	posing.	_	РВ		1/31/2018
				Er	nployer No. 1 signature		Date
				Er	mployer No. 2 signature		Date
				Er	nployer No. 3 signature		Date
] Er	mployer No. 4 signature		Date