Rev. 12/2016

Lawerence Denney Secretary of State

LOBBYIST REPORT FORN	LOBBYIST	REPORT	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

State of Idaho

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Tim C 152 S	-		ss address				ate pre /2/20		·	Period o	year endir	
Lagic	, 10 00010	,								(Mo.)	(Day)	(Yr.) 2017
Item 1	Totals	s of all reportal	ble expenditures made of	or incurred l	by Lobb	byist o	or by L	obbyist's Empl	oyer on behalf			
Ca		iving and Travel	*Total Amount for	Proportionate amounts Item 3, at bottom of				ted by each empl	oyer (Identify er	mployers,	under	
	S Pertaining to I Not Have to b	cobbying Activity e Reported	All Employers	Emplo	yer No.	1	Eı	mployer No. 2	Employer N	No. 3	Employer	No. 4
Entertai Food ar	nment nd Refreshme	ent	\$_\$0.00	\$_\$0.0	00		\$ <u>\$</u> C	0.00	\$_\$0.00		\$_\$0.00	
Living .	Accommodat	tions	\$0.00	\$0.0	00		_\$0	0.00	\$0.00		\$0.00	
Adverti	sing		\$0.00	\$0.0	00		_\$0	0.00	\$0.00		\$0.00	
Travel			\$0.00	\$0.0			_\$0	0.00	\$0.00		\$0.00	
Telepho	one		\$0.00	\$0.0				0.00	\$0.00		\$0.00	
Other E	xpenses or S	Services	\$0.00	\$0.0	00		_\$0	0.00	\$0.00		\$0.00	
		Total	\$ \$0.00	\$_\$0.0	00		\$_\$0	0.00	\$_\$0.00		\$_\$0.00	
*When t	The totals of	of each expend	re reporting for requires m									offi
Item-	ciais and m	ember(s) of the	eir nousenoid.					Names of	Legislators, Publ	lic and Ex	ecutive Offici	als
2	Date		Place		Aı	mount			and Household M	lembers in	Group	
	Continued on a	ttached page(s)										
		INST	RUCTIONS			Ite		Eı	mployer(s) Name	(s) and Ac	ldress(es)	
**/1.		41. * . C	. 1.1.1. (. 1 C i			Am	erica's Health I	nsurance Plans	[AHIP]		
VVII	o snouia ille		ny lobbyist registered u -6617 Idaho Code	nder Section	n	No. 1		Pennsylvania .	Ave NW Ste 500	0 South E	Building Was	hington D
Fili	ng deadline:		is due on January 31st.		214	N- C		A Health				
TO	BE FILED W		obyist semi-annual repo	it due July	31St.	No. 2		E.Parkcenter E	Blvd, ste. 300 Bo	oise ID 8	3706 USA	
			rence Denney etary of State			No. 3	₃ CV	S Health				
		PO	Box 83720			110. 3	3		W Washington	DC 2000	4 USA	
	Phon	elections	ID 83720-0080 s@sos.idaho.gov 852 Fax: (208) 334-2	282		No. 4	No	z Perce Tribe	<u> </u>			
ı	1 11011	(200) 33 1- 2	052 I an. (200) 554-2	202			_	_				

PO Box 305 Lapwai ID 83540 USA

Item					LEGISLATIVE SUB	JECT	IDENTIFICATION
Item 4 Subject (from 1, 4, 8, 9, 10, 11, 13, 16, 11, 18, 20, 24, 20, 27, 26, 27, 27, 26, 27, 27, 27, 27, 27, 27, 27, 27, 27, 27	or He the L	Bill, Resolution or other obbyist was supporting or op Bill, Resolution or Other Legislative Ident. Number H.B. 170, H.B. 222 H.B. 191, H.B. 128 H.B. 043, H.B. 102 H.B. 100, H.B. 262 H.B. 070		Code 01 02 03 04 05 06 07 08 09 10 11	LEGISLATIVE SUE Subject Agriculture, horticulture, farming, and livestock Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, federal Government, municipal Government, special districts Government, state		Subject Health service, medicine, drugs and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper,
Item 5	contra	y any rule, ratemaking decisi et bid or bid process, financia obbyist was supporting or op	l services agreement or		ERTIFICATION: I hereby certify the priest statement in accordance with Sta		power, CATV, gas Other (please specify) pove is a true, complete and
				Er	nployer No. 4 signature		Date

Lobbyist Report Form Attachment

Lobbyist's name and permanent business address
Tim Olson
152 S Silverwood Way
Eagle, ID 83616

Employer No.	Entertainment Food & Refreshment	Living Accommodations	Advertising	Travel	Telephone	Other Expenses or Services	Employer Total
No.5	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Employer No.	Employer Name(s) and Address(es)	Employer Signature(s)	Date Signed
No.5	PacificSource 408 E Parkcenter Blvd Ste 100 Boise ID 83706 USA		