Rev. 12/2016

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ey Secretary of State

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

LOBBYIST	REPORT	FORM
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To Be Filed By: **LOBBYISTS** L-2 (Sec. 67-6619)

(Type or print clearly in black ink) See instructions at bottom of page Lobbyist's name and permanent business address Date prepared Period covered Jeffrey Francis Morrell 2/6/2018 year ending 303 N. Allumbaugh Street Boise, ID 83704 (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 \$ \$0.00 \$_\$0.00 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** \$ \$0.00 \$_\$0.00 *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 offi ce, 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) Intermountain Hospital Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code 303 N. Allumbaugh Street Boise ID 83704 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

Item		ect matter of proposed legislat					
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 Amusements, games, athletics		and controlled substances, health insurance, hospitals
				1 02	and sports	18	Higher education
11, 1	6	H.B. 128		03	Banking, finance, credit and	19	Housing, construction, codes
17				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,	22	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 the orrect statement in accordance with S		
				E	Electronically signed		2/6/2018
Item		fy any rule, ratemaking decisi			obbyist signature		Date
5		ct bid or bid process, financia			, e		
	bond l	obbyist was supporting or opp	posing.				
				Er	nployer No. 1 signature		Date
					r system a g man		
				Er	mployer No. 2 signature		Date
				Er	nployer No. 3 signature		Date
				$\frac{1}{E_{\rm I}}$	nployer No. 4 signature		Date