Rev. 12/2016

State of Idaho

Lawerence Denney

(Type or print clearly in black ink)

	LOBBYIST	REPORT	FORM
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Page	of	Page(s)
THIS SPAC	E FOR OFFI	CE LISE ONLY

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Secretary of State

To Be Filed By:

L-2

LOBBYISTS (Sec. 67-6619) 18 JAN 16 AM 10:59

SECRETARY OF STATE STATE OF IDAHO

			t bottom of page									
Lobbyist's name and permanent business address						Date prepared Period covered						
James Gaustad 1007 West Nautilus Drive					1/16/2018 year end				/ year endi	ing		
	vvest Nau rt, AZ 8523											
Olibe	it, AZ 002	33							(Mo.)	1	(Yr.)	
									12	31	2017	
Item 1	Totals	s of all reportal	ble expenditures made of	or incurred by	y Lobb	yist or	by Lobbyist's Emp	loyer on behalf	of Lobby	vist's Emplo	yer.	
Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity		*Total Amount for		Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)								
	Not Have to b		All Employers	Employer No. 1		1 Employer No. 2 Employer N		No. 3 Employer No. 4		r No. 4		
Enterta	inment											
Food ar	nd Refreshmo	ent	\$_\$0.00	\$_\$0.00)		\$	\$		\$		
Living.	Accommoda	tions	\$0.00	\$0.00)							
Adverti	sing		\$0.00	\$0.00	C							
Travel			\$0.00	\$0.00	C			_				
Telepho	one		\$0.00	\$0.00	C							
Other E	Expenses or S	Services	\$0.00	\$0.00	0			-				
		Total	¢ ¢0.00	¢ ¢0 00	<u> </u>		ф	4		d.		
Total \$_\$0.00			_ \$_\$0.00	J		\$. \$		\$			
*When t	he number of	employers you a	re reporting for requires m	ultiple L-2 for	ms to b	e filed	a total amount for all	mployers should	be entered	l on Page 1.		
			iture of more than one h	nundred ten d	lollars	(\$110)	for a legislator, oth	er holder of pu	blic offi c	e, executiv	e offi	
Item-	cials and m	ember(s) of th	eir household.				Names o	f Legislators, Pub	lic and Ex	ecutive Offic	eials	
2	Date		Place		An	nount	Names of Legislators, Public and Executive Officials and Household Members in Group					
	Continued on a	ttached page(s)										
INSTRUCTIONS						Iten 3	n E	Employer(s) Name(s) and Address(es)				
Who should file this form: Any lobbyist registered under Section					Purdue Pharma LP No. 1 One Stamford Forum 201 Tresser Blvd Stamford CT 06901 USA							
Filing deadline: Annual report is due on January 31st. Executive Lobbyist semi-annual report due July 31st.												
			1st.	No. 2								
TO BE FILED WITH:												
Lawerence Denney Secretary of State				No. 3								
PO Box 83720					100. 5							
Boise, ID 83720-0080												
elections@sos.idaho.gov Phone: (208) 334-2852 Fax: (208) 334-2282						No. 4						

T.	Subje	ect matter of proposed legislat	ion, the number of the Senate	LEGISLATIVE SUBJECT IDENTIFICATION				
Item		ouse Bill, Resolution or other						
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	
				1	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 the orrect statement in accordance with S			
	Identif	y any rule, ratemaking decisi	Dn procurement		Electronically signed		1/16/2018	
5	contrac	et bid or bid process, financial obbyist was supporting or oppositions.	l services agreement or		obbyist signature		Date	
				Er	nployer No. 1 signature		Date	
				Er	mployer No. 2 signature		Date	
				Er	nployer No. 3 signature		Date	
				Er	mployer No. 4 signature		Date	