Rev. 12/2016

## State of Idaho

Lawerence Denney Secretary of State

	LOBBYIST	REPORT	<b>FORM</b>
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To Be Filed By: L-2

LOBBYISTS (Sec. 67-6619) 18 JAN 25 AM 09:36

SECRETARY OF STATE STATE OF IDAHO

	(°	Type or print clea	arly in black ink) t bottom of page								
		ermanent busine					e prepared 25/2018		Period	covered	
1115		Dr NW STE	205			17	25/2016			year end	
Olylli	pia, WA o	0002							12	(Day)	(Yr.) 2017
Item 1	Total	s of all reportal	ble expenditures made	or incurred b	oy Lobb	byist or	by Lobbyist's Emp	loyer on b	ehalf of Lobb	yist's Empl	oyer.
Reimb		spenditure Living and Travel Lobbying Activity	*Total Amount for All Employers	Proportion Item 3, at			ntributed by each emp	loyer (Iden	tify employers	s, under	
	o Not Have to b			Emplo	yer No.	1	Employer No. 2	Empl	loyer No. 3	Employe	er No. 4
Enterta Food a	inment nd Refreshm	ent	\$_\$0.00	\$_\$0.0	00	:	\$	_   \$		\$	
Living	Accommoda	tions	\$0.00	\$0.0	00	.		_			
Adverti	ising		\$0.00	\$0.0	00	-					
Travel			\$0.00	\$0.0	00	-					
Telepho	one		\$0.00	\$0.0	00	.					
Other E	Expenses or S	Services	\$0.00	\$0.0	00			_			
		Total	\$_\$0.00	\$_\$0.0	00	!	\$	\$		\$	
*Whon t	the number of	amplayars you a	re reporting for requires m	ultiple L 2 fe	erma to k	ba filad s	a total amount for all	amployara a	hould be entere	d on Page 1	
- VV IICII I			iture of more than one l	-						_	
Item-	cials and m	nember(s) of the	eir household.		<u> </u>		N	£1:-1-4	- D-LU 4 E	ti Off	:-:-1-
2 Date Place			Amount Names of Legislators, Public and Executive Canad Household Members in Group					iciais			
	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			n		Pharmaceutical Re	search and	l Manufacture	rs of Americ	ca (PhRMA)		
67-6617 Idaho Code				.1	No. 1 950 F Street NW Ste 300 Washington DC 20004 USA						
Fili	ng deadline:		is due on January 31st. Obyist semi-annual repo		31st.	No. 2					
ТО	BE FILED V	VITH:		-							
Lawerence Denney Secretary of State PO Box 83720				No. 3							
		Boise,	ID 83720-0080								
	Pho		s@sos.idaho.gov 2852 Fax: (208) 334-2	2282		No. 4					

Itom	Subje	ect matter of proposed legislat	ion, the number of the Senate					
Item 4		ouse Bill, Resolution or other						
7	the L	obbyist was supporting or op	posing.	1	Subject		Subject	
Subject	Codo	Bill, Resolution or Other	Appropriation Bill Number	01	Agriculture, horticulture,	17	Health service, medicine, drugs	
(from t		Legislative Ident. Number	and Section Number		farming, and livestock		and controlled substances, health	
(110111)	auic)	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,	2.1	insurance)	
				0.5	senior citizens	21	Labor, salaries and wages,	
				05	Church and religion	22	collective bargaining	
				06	Consumer affairs	22	Law enforcement, courts,	
				07	Ecology, environment, pollution,	22	judges, crimes, prisons	
					conservation, zoning, land and	23	License, permits	
				00	water use	24	Liquor	
				08	Education	25	Manufacturing, distribution and services	
				09	Elections, campaigns, voting, political parties	26	Natural resources, forest and	
				10	Equal rights, civil rights,	20	forest products, fisheries, mining	
				10	minority affairs		and mining products	
				11	Government, financing,	27	Public lands, parks, recreation	
				11	taxation, revenue, budget,	28	Social insurance, unemployment	
					appropriations, bids, fees, funds	20	insurance, public assistance,	
				12	Government, county		workmen's compensation	
				13	Government, federal	29	Transportation, highways,	
				14	Government, municipal	2)	streets and roads	
				15	Government, special districts	30	Utilities, communications,	
				16	Government, state	30	televisions, radio, newspaper,	
				10	Government, state		power, CATV, gas	
						31	Other (please specify)	
						31	Other (pieuse speerry)	
				C	ERTIFICATION: I hereby certify th	at the ab	ove is a true, complete and	
					orrect statement in accordance with S			
				_				
				_ <u>_</u>	Electronically signed		1/25/2018	
5	contrac	y any rule, ratemaking decision of bid or bid process, financial obbyist was supporting or opp	services agreement or	L	obbyist signature		Date	
Idaho Dual Waiver Proposal 1115 and 1332		Er	nployer No. 1 signature		Date			
				Er	mployer No. 2 signature		Date	
				Er	nployer No. 3 signature		Date	
				Er	nployer No. 4 signature		Date	