## Rev. 12/2016



## State of Idaho

Lawerence Denney Secretary of State

## LOBBYIST MONTHLY REPORT FORM

To Be Filed By:

L-3 LOBBYISTS (Sec. 67-6619)

Page 1 of 2 Page(s)
THIS SPACE FOR OFFICE USE ONLY

17 JN 31 AM 10: 28

STATE OF IDAHO

See instructions a	t bottom of page				SIAIE	UF IDA	1H0	
Lobbyist's name and permanent busin	ness address		1	Date prepared		7 <del>5 : .</del>		
Matthew Conde AAA Oregon/Idaho 7155 W. Denton St. Boise, ID 83704			January 31, 2017		Period covered  month ending  (Mo.) (Day) (Yr.)			
Item Totals of all reports	hle evnanditures					Jan	31	2017
Category of Expenditure	ble expenditures made	or incurred by	Lobbyist	or by Lobbyist's Emp	ployer on behalf	of Lobbyis	's Employ	yer.
Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported	*Total Amount for	Proportionate amounts  Item 3, at bottom of p		s contributed by each employer (Idce				
Entertainment		Employe	r No. 1	Employer No. 2	Employer N	lo. 3	Employer	No. 4
Food and Refreshment	s0.00	s 0.0	00	s				
Living Accommodations	0.00	0.0	00		_   \$		- S	
Advertising	0.00	0.0	0		-			
Travel	0.00	0.0	0		ļ <del></del>	_		
Telephone	0.00	0.0	0					
Other Expenses or Services	10.00	10.00						
*When the number of employers you as	s10.00	s_ 10.0		s0.00	s0.00	s	0.00	)
The totals of each expendi and member(s) of their hou	ture of more than one husehold.	Itiple L-2 forms nundred ten de	s to be filed ollars (\$11	a total amount for all er 0) for a legislator, ot	mployers should be her holder of pu	e entered on l blic office,	Page 1. executive	officials
2 Date Place		Amoun		Names of Legislators, Public and Executive Officials and Household Members in Group				
					na Household Mei	nbers in Gro	ир	
Continued on attached page(s)								
INSTRI		Item 3	Emp	Employer(s) Name(s) and Address(es)				
Who should file this form: Any 1 67-66	lobbyist registered unde	r Section	No. 1	AAA Oregon/Idaho 7155 W. Denton St., E	Boise, ID 83704			
Filing deadline: Monthly reports month for activit	due within fifteen (15) dies of the past month.	days of the	No. 2					<del></del>
TO BE FILED WITH:	Dono							
Secretar PO Bo: Boise, ID 8	ce Denney y of State x 83720 33720-0080		No 3	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Phone: (208) 334-2852	os.idaho.gov Fax: (208) 334-2282		No 4					

					LEGISLATIVE SUBJECT IDENTIFICATION					
	Subje	ct matter of proposed legislat	on, the number of the Senate		LEGISLATIVE SUB	JECI	IDENTIFICATION			
Subject (from 22, 29	or Ho the Lo Code table)	ct matter of proposed legislatuse Bill, Resolution or other obbyist was supporting or op Bill, Resolution or Other Legislative Ident. Number	ion, the number of the Senate legislative activity in which posing  Appropriation Bill Number and Section Number	Code 01 02 03 04 05 06 07 08 09	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,	Code 17 18 19 20 21 22 23 24 25 26	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			
Item	bid o	Identify any rule, ratemaking decision, procubid or bid process, financial services or bond	sion, procurement, contract, es or bond lobbyist was suppor	12 13 14 15 16	Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, federal Government, municipal Government, special districts Government, state  CERTIFICATION: I hereby certify correct statement in accordance with	28 29 30 31 that the	Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper. power, CATV, gas Other (please specify)			
ing or opposing.			Lobbyist signature	Com	Date					