

LOBBYIST MONTHLY REPORT FORM



State of Idaho
Lawrence Denney
Secretary of State

To Be Filed By:
L-3 LOBBYISTS
(Sec. 67-6619)

17 FEB 06 AM 07:54
SECRETARY OF STATE
STATE OF IDAHO

7700

(Type or print clearly in black ink)
See instructions at bottom of page

Lobbyist's name and permanent business address Tim Olson 152 S Silverwood Way Eagle, ID 83616	Date prepared 2/4/2017	Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr.) 1 31 2017
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Item 1	Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer.				
Category of Expenditure <small>Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported</small>	*Total Amount for All Employers	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)			
		Employer No. 1	Employer No. 2	Employer No. 3	Employer No. 4
Entertainment	\$ \$0.00	\$ \$0.00	\$ \$0.00	\$ \$0.00	\$ \$0.00
Food and Refreshment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Living Accommodations	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Advertising	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Telephone	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other Expenses or Services	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Total	\$ \$0.00	\$ \$0.00	\$ \$0.00	\$ \$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.

Item-2	The totals of each expenditure of more than one hundred ten dollars (\$110) for a legislator, other holder of public office, executive officials and member(s) of their household.			
	Date	Place	Amount	Names of Legislators, Public and Executive Officials and Household Members in Group
<input checked="" type="checkbox"/> Continued on attached page(s)				

<p align="center">INSTRUCTIONS</p> <p>Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code</p> <p>Filing deadline: Monthly reports due within fifteen (15) days of the month for activities of the past month.</p> <p>TO BE FILED WITH:</p> <p align="center">Lawrence Denney Secretary of State PO Box 83720 Boise, ID 83720-0080 elections@sos.idaho.gov Phone: (208) 334-2852 Fax: (208) 334-2282</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%;">Item 3</th> <th>Employer(s) Name(s) and Address(es)</th> </tr> </thead> <tbody> <tr> <td>No. 1</td> <td>America's Health Insurance Plans [AHIP] 601 Pennsylvania Ave NW Ste 500 South Building Washington DC</td> </tr> <tr> <td>No. 2</td> <td>BPA Health 380 E.Parkcenter Blvd, ste. 300 Boise ID 83706 USA</td> </tr> <tr> <td>No. 3</td> <td>CVS Health 1275 Penn. Ave.NW Washington DC 20004 USA</td> </tr> <tr> <td>No. 4</td> <td>Nez Perce Tribe PO Box 305 Lapwai ID 83540 USA</td> </tr> </tbody> </table>	Item 3	Employer(s) Name(s) and Address(es)	No. 1	America's Health Insurance Plans [AHIP] 601 Pennsylvania Ave NW Ste 500 South Building Washington DC	No. 2	BPA Health 380 E.Parkcenter Blvd, ste. 300 Boise ID 83706 USA	No. 3	CVS Health 1275 Penn. Ave.NW Washington DC 20004 USA	No. 4	Nez Perce Tribe PO Box 305 Lapwai ID 83540 USA
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Item	Subject matter of proposed legislation, the number of the Senate or House Bill, Resolution or other legislative activity in which the Lobbyist was supporting or opposing.	LEGISLATIVE SUBJECT IDENTIFICATION																																																																																															
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Item 5	Identify any rule, ratemaking decision, procurement, contract, bid or bid process, financial services or bond lobbyist was supporting or opposing.	<p>CERTIFICATION: I hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 Idaho Code.</p> <p style="text-align: center;">Electronically signed <u>2/4/2017</u></p> <p>Lobbyist signature Date</p>																																																																																															

Employer No.	Employer Name(s)	Employer Address(es)
No.5	PacificSource	408 E Parkcenter Blvd Ste 100 Boise ID 83706 US,