Rev. 12/2016		LO	BBYIST	REP	ORT F	ORM		Page		age(s)	
SEE AT SEAT	State of Ida	iho 🗌	ANNUA	L	SEM	I-ANNUAL		THIS SPACE	FOR OFFICE US	E ONLY	
	Lawerence De Secretary of	To Be Filed By: L-2 LOBBYISTS (Sec. 67-6619)				17 JUL 06 PM 02:38 SECRETARY OF STAT STATE OF IDAHO					
	(Type or print clear See instructions a	t bottom of page									
Anthony Euge 2 N. LaSalle #	obbyist's name and permanent business address Anthony Eugene Wilkins 2 N. LaSalle #700 Chicago, IL 60602				Date prep 7/5/20			Period (Mo.	covered year endir) (Day) 30	(Yr.)	
Item Tot	als of all reporta	ole expenditures made o	or incurred h	v Lobby	vist or by L	obbvist's Empl	over on beh:				
Category of Reimbursed Persona	Expenditure I Living and Travel	*Total Amount for		ate amour	nts contribut	ed by each emplo	-				
Expenses Pertaining t Do Not Have to		All Employers	Employer No		En	nployer No. 2	2 Employer No. 3		B Employer No. 4		
Entertainment Food and Refreshment Living Accommodations		\$\$0.00	\$_\$0.00 \$0.00 \$0.00 \$0.00 \$0.00		\$		\$		\$		
		\$0.00									
Advertising	Advertising\$0.00										
Travel\$0.00Telephone\$0.00											
Other Expenses of	r Services	\$0.00	\$0.0	0							
Total \$_\$0.00			\$\$0.00		\$		\$		\$		
*When the number	of employers you a	 re reporting for requires m	 ultiple L-2 fo	rms to be	filed a total	amount for all en	 mployers shou	ald be entere	d on Page 1.		
cials and	s of each expend member(s) of th	iture of more than one h eir household.	undred ten	dollars (\$110) for a	a legislator, oth	er holder of	public offi	ce, executive	e offi	
2 Date		Place	А					ors, Public and Executive Officials ehold Members in Group			
								il Gloup			
Continued o	attached page(s)										
INSTRUCTIONS Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code					Item 3 Employer(s) Name(s)			me(s) and A	e(s) and Address(es)		
				1	BNY Mellon No. 1 BNY Mellon Center 500 Grant St. Pittsburgh PA 15258 USA						
Filing deadlir		is due on January 31st.		F	Divi						
r ning ucaum		obyist semi-annual repo	rt due July 3	31st.	No. 2						
TO BE FILED	Executive Lol WITH:	byist semi-annual repo	rt due July 3	31st.	No. 2						
-	Executive Lol WITH: Lawe Secr		rt due July 3	ŀ	No. 2 No. 3						

	Subie	ect matter of proposed legislat	ion, the number of the Senate	LEGISLATIVE SUBJECT IDENTIFICATION					
or H		ect matter of proposed legislation, the number of the Senate ouse Bill, Resolution or other legislative activity in which obbyist was supporting or opposing. Bill, Resolution or Other Legislative Ident. Number Appropriation Bill Number and Section Number		Code 01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	LEGISLATIVE SUB 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, taxation, revenue, budget, appropriations, bids, fees, funds Government, federal Government, special districts Government, state		IDENTIFICATION 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 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)		
Item 5	and the set had an had an a set of the set o			E E Er	ERTIFICATION: I hereby certify the prrect statement in accordance with S Electronically signed obbyist signature CMB nployer No. 1 signature nployer No. 2 signature				
					nployer No. 4 signature		Date		