| Rev. 12/<br>81      | 2016                              | State of Idal                               |  | BBYIST<br>Annua          |            |                  | t form<br>Emi-annua <u>l</u>                               | р<br>т<br>П7 РМ     | 54 355555554655-5555 | uf 2 Pa<br>TOR OFFICE USE<br>3           | 1            |
|---------------------|-----------------------------------|---|--|--------------------------|------------|------------------|--|---------------------|----------------------|--|--------------|
|                     |                                   | Lawerence Der<br>Secretary of S             |  | To Be Filed<br>L-2       | By<br>LOI  | BBY15<br>2. 67-6 |  | IARY UT<br>TE OF ID |                      |  |              |
|                     |                                   | (Type or print clear<br>See instructions al |  |                          |            |                  |  |                     |                      |  |              |
|                     | 's name and                       | permanent busines                           |  |                          |            | Dai              | e prepated   |                     | Period c             | overed                                   |              |
| 325 J               | ikmirovic<br>ohn H. M<br>nbus, OH | IcConnell Blvd                              | d., Suite 200  |                          |            |                  | 7/10/201   | 7                   | (Mo.)                | year endir<br>(Day)                      | yr.)         |
|                     | ******                            |   |  |                          |            |                  |  |                     | 7                    | 31                                       | 2017         |
| ltem<br>1           |                                   | -   | ole expenditures made or   |                          | -          |                  |  | -                   | -                    |  | ycr.         |
| Reimbu              | rsed Personal                     | Expenditure<br>Living and Travel            | *Total Amount for  | Proportion<br>Item 3, at |            |                  | ntributed by each emplo                                    | yer (Identify en    | nplayers,            | under                                    |              |
|                     |                                   | be Reported                                 | All Employers  | Employ                   | yer No.    | 1                | Employer No. 2   | Employer N          | lo. 3                | Employer                                 | No 4         |
| Entertai<br>Food an | nment<br>id Refreshi              | nent  | s 0.00   | s                        |            |                  | \$   | s                   |                      | s  |              |
|                     | Accommod                          |   | 0.00   |                          |            |                  | P  |                     |                      |  |              |
| Adverti             |                                   |   | 0.00   | -                        |            |                  |  |                     |                      | Westerland and a constant and a constant |              |
| Travel              | 2                                 |   | 0.00   |                          |            |                  |  |                     |                      |  |              |
| Telepho             | ne                                |   | 0.00   |                          |            |                  |  |                     |                      |  |              |
| Other E             | xpenses or                        | Services                                    | 0.00   |                          |            |                  |  |                     |                      |  |              |
|                     |                                   |   |  |                          |            |                  |  |                     |                      |  |              |
|                     |                                   | Total                                       | s0.00  | (                        | 0.00       |                  | s0.00  | s0.00               | )                    | s0.0                                     | 00           |
| *When t             | he number o                       | of employers you s                          | ere reporting for requires m   | ultiple L-2 fo           | ornes to b | hc filed         | a total amount for all e                                   | nployers should b   | be entered           | lon Page 1.                              |              |
|                     |                                   |   | liture of more than one  | hundred ter              | n dollar   | rs (\$11         | 0) for a legislator, ot                                    | her holder of p     | ublic off            | ice, executiv                            | ve officials |
| Item-               | and mem                           | ber(s) of their he                          |  |                          | [          |                  | Names of   | Legislators, Publ   | ic and Ex            | ecutive Offici                           | ials         |
| 2                   | Date                              |   | Place  |                          | A          | mount            |  | ind Household M     | embers ir            | 1 Group                                  |              |
|                     | Continued or                      | n attached page(s)                          |  |                          |            | 0                |  |                     |                      |  |              |
|                     |                                   | INST  | RUCTIONS   |                          |            | lte<br>3         |  | nployer(s) Name     | (s) and A            | ddress(es)                               |              |
| Wh                  | o should fi                       |   | ny lobbyist registered ur<br>-6617 Idaho Code                          | nder Section             | n          | No. I            | Diamond Hill Capit<br>325 John H McCor<br>Columbus, OH 432 | nnell Blvd., Suite  |                      |  |              |
| Fili                | ng deadlin                        |   | t is due on January 31st.<br>bbyist semi-annual repo                   |                          | 31st.      | No, 2            |  | A                   |                      |  |              |
| то                  | BE FILED                          |   |  |                          |            |                  |  |                     |                      |  | *****        |
|                     |                                   |   | erence Denney<br>etary of State  |                          |            | No. 3            | 1  |                     |                      |  |              |
|                     | DI-                               | Boise,                                      | Box 83720<br>1D 83720-0080<br>s@sos.idaho.gov<br>2852 Fax: (208) 334-2 | 2942                     |            | No. 4            |  |                     |                      |  |              |
|                     | Pf                                | UNC. (200) 334-2                            | san. (200) 334-2   | 202                      |            | <b>_</b>         |  |                     |                      |  |              |

|   |  |  | LEGISLATIVE SUBJECT IDENTIFICATION   |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|
| A Or Ho   |  |  | 01<br>02<br>03<br>04<br>05<br>06<br>07<br>08<br>09<br>10<br>11<br>12<br>13<br>14<br>15<br>16 | conservation, zoning, land and<br>water use<br>Education<br>Elections, campaigns, voting,<br>political parties<br>Equal rights, civil rights,<br>minority affaits<br>Government, financing,<br>taxation, revenue, budget,<br>appropriations, hids, fees, funds<br>Government, county<br>Government, federal<br>Government, municipal | 17<br>18<br>19<br>20<br>21<br>22<br>23<br>24<br>25<br>26<br>27<br>28<br>29<br>30<br>31 | Subject<br>Health service, medicine, drugs<br>and controlled substances, health<br>insurance, hospitals<br>Higher education<br>Housing, construction, codes<br>Insurance (excluding health<br>insurance)<br>Labor, salaries and wages,<br>collective bargaining<br>Law enforcement, courts,<br>judges, crimes, prisons<br>License, permits<br>Liquor<br>Manufacturing, distribution and<br>services<br>Natural resources, forest and<br>forest products, fisheries, mining<br>and mining products<br>Public lands, parks, recreation<br>Social insurance, unemployment<br>insurance, public assistance,<br>workmen's compensation<br>Transportation, highways,<br>streets and roads<br>Utilities, coramunications,<br>televisions, radio, newspaper,<br>power, CATV, gas<br>Other (please specify) |  |  |
| tem Identify any rule, ratemaking decision, procurement,<br>5 contract bid or bid process, financial services agreement or<br>bond lobbyist was supporting or opposing. |  |  |  | orroct statement in accordance with S<br>obbyist signature   |  |  |  |  |
|   |  |  | Ē  | mployer No. 2 signature  |  | Date   |  |  |
|   |  |  | 1  |  |  |  |  |  |
|   |  |  | Ē  | mployer No. 3 signature  |  | Date   |  |  |