Rev. 12/2016

State of Idaho

Lawerence Denney Secretary of State

LOBBYIST	REPORT FORM
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To Be Filed By:

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LOBBYISTS (Sec. 67-6619) 19 FEB 01 PM 05:03

SECRETARY OF STATE STATE OF IDAHO

		Type or print clea See instructions a										
Lobbyist's name and permanent business address						Date prepared			Period	Period covered		
Kristen Rossow 2729 N Mule Deer Way Meridian, ID 83646			2/1/2019				year ending (Mo.) (Day) (Yr.)					
										12	31	2018
Item 1	Total	s of all reportal	ole expenditures made o	or incurred	by Lobb	yist or	by Lobb	yist's Empl	oyer on beh	nalf of Lobb	yist's Empl	oyer.
Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity		*Total Amount for All Employers	Proportionate amounts Item 3, at bottom of			ints contributed by each employer (Identify employers, under of page.)						
D	o Not Have to b	oe Reported	1 3	Emplo	yer No.	1	Emplo	yer No. 2	Employ	yer No. 3	Employe	er No. 4
Enterta: Food ar	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		\$		\$		\$	
*When t	the number of	employers you a	 re reporting for requires m	 ultiple L-2 fe	orms to b	oe filed :	a total amo	unt for all er	 nployers sho	ould be entere	d on Page 1.	
Item-	The totals		iture of more than one h	-							_	e offi
2	Date	Place			Amour		Names of Legislators, Public and Executive and Household Members in Group					cials
	Continued on a	attached page(s)										
		INST	RUCTIONS			Iter 3		Employer(s) Name(s) and Address(es)				
Who should fle this forms. And leth its suite and a fine of				n	Happy Hippo LLC							
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code						No. 1 9945 W Emerald Street Boise ID 83704 USA						
Fili	ng deadline:		is due on January 31st.		31st.	No. 2						
ТО	BE FILED V		-									
		Secr	etary of State Box 83720			No. 3						
	Boise, ID 83720-0080 elections@sos.idaho.gov Phone: (208) 334-2852 Fax: (208) 334-2282					No. 4						

Item			ion, the number of the Senate						
4			legislative activity in which			~ .			
	the L	obbyist was supporting or op	posing.	1	Subject		Subject		
Subjec	t Code	Bill, Resolution or Other	Appropriation Bill Number	01	Agriculture, horticulture,	17	Health service, medicine, drugs		
(from		Legislative Ident. Number	and Section Number	02	farming, and livestock Amusements, games, athletics		and controlled substances, health insurance, hospitals		
				1 02	and sports	18	Higher education		
1, 6	_			03	Banking, finance, credit and	19	Housing, construction, codes		
17, 2	25			03	investments	20	Insurance (excluding health		
				04	Children, minors, youth,	20	insurance)		
				04	senior citizens	21	Labor, salaries and wages,		
				05	Church and religion	21	collective bargaining		
				06	Consumer affairs	22	Law enforcement, courts,		
				07	Ecology, environment, pollution,		judges, crimes, prisons		
					conservation, zoning, land and	23	License, permits		
					water use	24	Liquor		
				08	Education	25	Manufacturing, distribution and		
				09	Elections, campaigns, voting,		services		
					political parties	26	Natural resources, forest and		
				10	Equal rights, civil rights,		forest products, fisheries, mining		
					minority affairs		and mining products		
				11	Government, financing,	27	Public lands, parks, recreation		
					taxation, revenue, budget,	28	Social insurance, unemployment		
					appropriations, bids, fees, funds		insurance, public assistance,		
				12	Government, county	• •	workmen's compensation		
				13	Government, federal	29	Transportation, highways,		
				14	Government, municipal	2.0	streets and roads		
				15	Government, special districts	30	Utilities, communications,		
				16	Government, state		televisions, radio, newspaper,		
						31	power, CATV, gas		
						31	Other (please specify)		
					ERTIFICATION: I hereby certify the orrect statement in accordance with S				
	Idontif	y any rule, ratemaking decisi	on progurament		Electronically signed		2/1/2019		
Item 5	contra	y any rule, ratemaking decision of bid or bid process, financial obbyist was supporting or opposition	l services agreement or	_ L	obbyist signature		Date		
				Eı	mployer No. 1 signature		Date		
				Eı	mployer No. 2 signature		Date		
				Eı	mployer No. 3 signature		Date		
				Eı	mployer No. 4 signature		Date		