Rev. 1	2/2012		LO	BBYIST RE	EPORT	FORM		Page		Page(s)	
BE	AT SEAL	State of Ida	aho 🖌	ANNUAL	SEN	MI-ANNUAI		THIS SPACE F	FOR OFFICE U	SE ONLY	
- Corres		Lawerence De	ennev								
HESI	107 107	Secretary of	-	To Be Filed By:			17	JAN 04	PM 02:	18	
- Al	E A OY	Secretary of	State	L-2 LC	OBBYISTS	5	SE			OF STA	
				(Se	ec. 67-661	9)		STAT	TE OF	IDAHO	
		(Type or print clear See instructions a									
Lobby	vist's name and	d permanent busine			Date p	repared		Period c	overed		
	a Zajac				1/4/2	2017			year end	ing	
	G Street N shington, I	DC 20002						(Mo.)	(Day)	(Yr.)	
	-							12	31	2016	
Item	I To	tals of all reporta	ble expenditures made	or incurred by Lol	obvist or by	Lobbyist's Emp	lover on behalf				
		Expenditure		-			-	-	-	oyer.	
Rein	nbursed Persona	al Living and Travel to Lobbying Activity	*Total Amount for All Employers		Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)						
		to be Reported		Employer No	. 1	Employer No. 2	Employer No. 3		Employer No. 4		
	tainment		¢ ¢11.05	¢ • • • • • • =	¢		¢		¢		
	and Refresh		\$ <u>\$11.95</u>	_ \$_\$11.95_	\$ \$		_ \$		\$		
	g Accommo rtising	dations	\$0.00 \$0.00	\$0.00							
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-	· Expenses o	r Services	\$0.00	\$0.00							
	Expenses e										
	Total		\$ \$11.95	5\$_\$11.95			\$		\$		
*Whe			re reporting for requires n iture of more than one h	-					-	officials	
Item	and men	ber(s) of their ho					Names of Legislators, Public and Executive Officials				
2	Date	Place						ators, Public and Executive Officials usehold Members in Group			
_											
┏┶╸	Continued on attached page(s)				Item	_					
	INSTRUCTIONS				Employer(s) Name(s) and Addre				dress(es)		
w	ho should f	file this form: A	nder Section	The Leukemia & Lymphoma Society No. 1							
	67-6617 Idaho Code				10 G Street NE Suite 501 Washington DC 20002 USA						
Fi	ling deadlii		t is due on January 31st bbyist semi-annual repo		No. 2						
т) BE FILEI) WITH:									
		Lawe	erence Denney		No. 3						
			etary of State Box 83720								
			ID 83720-0080	No. 4							
	51		2852 Fax: (208) 334-2	1202	No. 4						

Item			ion, the number of the Senate	LEGISLATIVE SUBJECT IDENTIFICATION					
4	or Ho the Lo		legislative activity in which	Code 01 02 03 04 05 06 07 08 09 10 11	LEGISLATIVE SUE 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	Code 17 18 19 20 21 22	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,		
					Government, county Government, federal Government, municipal Government, special districts Government, state ERTIFICATION: I hereby certify th rrect statement in accordance with S				
				- E	electronically signed		1/4/2017		
5	contrac	ntify any rule, ratemaking decision, procurement, tract bid or bid process, financial services agreement or d lobbyist was supporting or opposing.			bbyist signature		Date		
				En	nployer No. 1 signature		Date		
				En	nployer No. 2 signature		Date		
				En	nployer No. 3 signature		Date		
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	Rev. 12/2	2012		LO	BBYIST R	EPOR	T FORM		Page		Page(s)	
	REAT	SEAL	State of Ida	aho 🖌	ANNUAL		SEMI-ANNUAI	L	THIS SPACE	FOR OFFICE U	JSE ONLY	
	- Conserver		Lawerence De	ennev								
	HESK		Secretary of	-	To Be Filed By:			17	7 JAN 20) AM 11	:22	
	ATE	OF	Secretary of		L-2 ^L	OBBYI	STS	S	SECRETARY OF STA			
)						Sec. 67-6	6619)		STA	TE OF	IDAHO	
			(Type or print clea									
j	Lobbyist	's name and	See instructions a d permanent busine			Da	te prepared		Period o	covered		
	Thea Zajac 10 G Street NE Washington, DC 20002					1/	/4/2017			year end	ding	
	Wash	ington, i	50 20002						(Mo.)	1	(Yr.)	
-									12	31	2016	
	Item 1	To	tals of all reporta	ble expenditures made of	-	-		-	-	-	oyer.	
-	Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity			*Total Amount for All Employers		Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)						
_			o be Reported		Employer N	Jo. 1	Employer No. 2	Employer No. 3		Employer No. 4		
	Entertai Food an	nment 1d Refresh	ment	\$ \$11.95	\$\$11.95_		\$	\$		\$		
]	Living A	Accommo	dations	\$0.00	\$0.00							
1	Advertising			\$0.00	\$0.00							
-	Travel			\$0.00	\$0.00							
-	Telephone			\$0.00	\$0.00							
(Other E	xpenses o	r Services	\$0.00	\$0.00			_				
-	Total		\$ <u>\$11.95</u>	\$_\$11.95		\$	\$		\$			
		*When the number of employers you are reporting for requires multiple L-2 forms to be filed a total amount for all employers s										
;	*When tl	he number	of employers you a	re reporting for requires m	ultiple L-2 forms	to be filed	a total amount for all	employers shoul	d be entered	l on Page 1.		
	*When tl	The total	s of each expend	iture of more than one h								
-	Item-	The total		iture of more than one household.) for a legislator, oth Names o	er holder of pu	blic office, blic and Ex	executive ecutive Offi	officials	
-		The total	s of each expend	iture of more than one h) for a legislator, oth Names o	er holder of pu	blic office, blic and Ex	executive ecutive Offi	officials	
-	Item-	The total and mem	s of each expend	iture of more than one household.		ars (\$105)) for a legislator, oth Names o	er holder of pu	blic office, blic and Ex	executive ecutive Offi	officials	
-	Item-	The total and mem	s of each expend	iture of more than one household.		ars (\$105)) for a legislator, oth Names o	er holder of pu	blic office, blic and Ex	executive ecutive Offi	officials	
-	Item-	The total and mem	s of each expend	iture of more than one household.		ars (\$105)) for a legislator, oth Names o	er holder of pu	blic office, blic and Ex	executive ecutive Offi	officials	
-	Item-	The total and mem	s of each expend	iture of more than one household.		ars (\$105)) for a legislator, oth Names o	er holder of pu	blic office, blic and Ex	executive ecutive Offi	officials	
-	Item-	The total and mem	s of each expend	iture of more than one household.		ars (\$105)) for a legislator, oth Names o	er holder of pu	blic office, blic and Ex	executive ecutive Offi	officials	
-	Item- 2	The total and mem Date	s of each expenditure (s) of their ho	iture of more than one household.		ars (\$105)) for a legislator, oth Names o	er holder of pu	blic office, blic and Ex	executive ecutive Offi	officials	
	Item- 2	The total and mem Date	s of each expendition of their ho	iture of more than one household. Place		Ars (\$105) Amount) for a legislator, oth Names o	er holder of pu f Legislators, Pu and Household	blic office, blic and Ex Members in	executive ecutive Offi a Group	officials	
-	Item- 2	The total and mem Date	s of each expendition of their ho	iture of more than one household.		Amount) for a legislator, oth Names o	er holder of pu f Legislators, Pu and Household	blic office, blic and Ex Members in	executive ecutive Offi a Group	officials	
-	Item- 2	The total and mem Date	s of each expendition of their holds ber(s) of their holds ber(s) of their holds ber(s) of their holds berge(s) an attached page(s) INST berge b	iture of more than one household. Place	undred five dolla	Ars (\$105) Amount	m E The Leukemia & Ly	er holder of pu f Legislators, Pu and Household Employer(s) Nam	blic office, blic and Ex Members in he(s) and Ad	ecutive Offi Group	officials	
-	Item- 2	The total and mem Date	s of each expendition is of their hold is the second secon	TRUCTIONS	undred five dolla	Amount Iter No. 1	m E The Leukemia & Ly 10 G Street NE Sui	er holder of pu f Legislators, Pu and Household Employer(s) Nam	blic office, blic and Ex Members in he(s) and Ad	ecutive Offi Group	officials	
	Item- 2 C Who Filir	The total and mem Date	s of each expendition of their holds in the security of the se	TRUCTIONS Ny lobbyist registered ut -6617 Idaho Code is due on January 31st.	undred five dolla	Amount Iter No. 1	m E The Leukemia & Ly 10 G Street NE Sui	er holder of pu f Legislators, Pu and Household Employer(s) Nam	blic office, blic and Ex Members in he(s) and Ad	ecutive Offi Group	officials	
-	Item- 2 C Who Filir	The total and mem Date	s of each expendition of their holds in the security of the se	TRUCTIONS Ny lobbyist registered ut -6617 Idaho Code is due on January 31st.	undred five dolla	Amount Iter No. 1	m E The Leukemia & Ly 10 G Street NE Sui	er holder of pu f Legislators, Pu and Household Employer(s) Nam	blic office, blic and Ex Members in he(s) and Ad	ecutive Offi Group	officials	
-	Item- 2 C Who Filir	The total and mem Date	s of each expendition to ber(s) of their hore in attached page(s) INST ile this form: A: 67 ne: Annual report Executive Lol O WITH: Lawe Secr	TRUCTIONS The semi-annual report Transmission of the semi	undred five dolla	Amount Amount No. 1 No. 2	m E The Leukemia & Ly 10 G Street NE Sui	er holder of pu f Legislators, Pu and Household Employer(s) Nam	blic office, blic and Ex Members in he(s) and Ad	ecutive Offi Group	officials	
-	Item- 2 C Who Filir	The total and mem Date	s of each expendition to ber(s) of their hore in attached page(s) INST ile this form: A: 67 he: Annual report Executive Lol O WITH: Lawe Secr PO	TRUCTIONS The semi-annual repo	undred five dolla	Amount Amount No. 1 No. 2	m E The Leukemia & Ly 10 G Street NE Sui	er holder of pu f Legislators, Pu and Household Employer(s) Nam	blic office, blic and Ex Members in he(s) and Ad	ecutive Offi Group	officials	

T	Subje	ect matter of proposed legislat	ion, the number of the Senate	LEGISLATIVE SUBJECT IDENTIFICATION					
Item 4 Subject (from t 17	or Ho the Lo		ion, the number of the Senate legislative activity in which posing. Appropriation Bill Number and Section Number	01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	LEGISLATIVE SUF 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	Code 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 at the ab	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	Identif	y any rule, ratemaking decisi	on, procurement,		Electronically signed		1/4/2017 Date		
5	contrac	ct bid or bid process, financia obbyist was supporting or op	l services agreement or						
	oona n	booyist was supporting of op	pooling.		/L nployer No. 1 signature		<u>1/20/2017</u> Date		
					ipioyer no. i signature		Date		
				En	nployer No. 2 signature		Date		
				En	nployer No. 3 signature		Date		
				En En	nployer No. 4 signature		Date		