Food and Refreshment       \$	Rev. 12/2012 LOBBYIST MONTHL						Y RE	PORT FOR	M	Page	ofPage(s)		
L-3 LOBBYISTS     Lobe visual constraints     L-3 LOBBYISTS     Lobe visual constraints     Lobe visual     Lobe visual constraints     L	DI C	SEA	State of Idal	10 T	y:				THIS SPACE	FOR OFFICE USE ONLY			
SECURE LARY OF STATE       Conjugation of page       Conjugation and and permanent business address     Date prepared       KeN     Null CR       You A a River R     Mulcowee       PO     36X 17.31       Tool A So all reportable expenditures made or incurred by Lobbyists or by Lobbyists or by Lobbyists Employer on behalf of Lobbyists Employer.       Category of Expenditure     "Tool Amount for All Employer River       Rememeed Pressed Luologi ad Trivel Person States or be Reported     "Tool Amount for All Employer River       Entrainment     \$       S     \$       Travel     Imployer No. 1       Total S     \$       Continued on attacked page(s)       The tools of each expenditure of more than one hundred 've dollars (\$105) for a legislator, other holder of public of ce, executive of clabs       and member(s) of their household.       Continued on attacked page(s)       Item       Item demeter(s) of their household.       Continued on attacked page(s)       Item demeter(s) of their household.       No allowed in the carbing of their household.       No allowed in the form: Any lobby'st registered under Section 67-6617 Idabo Code    <			Lawerence Der	nney	L-3								
SECURE LARY OF STATE       Conjugation of page       Conjugation and and permanent business address     Date prepared       KeN     Null CR       You A a River R     Mulcowee       PO     36X 17.31       Tool A So all reportable expenditures made or incurred by Lobbyists or by Lobbyists or by Lobbyists Employer on behalf of Lobbyists Employer.       Category of Expenditure     "Tool Amount for All Employer River       Rememeed Pressed Luologi ad Trivel Person States or be Reported     "Tool Amount for All Employer River       Entrainment     \$       S     \$       Travel     Imployer No. 1       Total S     \$       Continued on attacked page(s)       The tools of each expenditure of more than one hundred 've dollars (\$105) for a legislator, other holder of public of ce, executive of clabs       and member(s) of their household.       Continued on attacked page(s)       Item       Item demeter(s) of their household.       Continued on attacked page(s)       Item demeter(s) of their household.       No allowed in the carbing of their household.       No allowed in the form: Any lobby'st registered under Section 67-6617 Idabo Code    <				_					16 MAI	R16 /	MII: 12		
Ke N Mille Ω       Image: Section 2       Im			See instructions at l	bottom of page			SECKETARY OF STATE						
P.O. 36x 1731       P3701       P 16         Totals of all reportable expenditures made or incurred by Lobbyist's Employer on behalf of Lobbyist's Employer.       Proportionate anomatic contributed by each employer. Udentify employers. under ten 3, at bottom of page)         Entertainment       Total a mount for MI Employers       Proportionate anomatic contributed by each employer No. 3       Employer No. 4         Entertainment       S       S       S       S       S         Food and Refreshment       S       S       S       S       S         Living Accommodutions       S       S       S       S       S         Other Expenses of Services       S       S       S       S       S         *When the number of employers you are reporting for requires multiple L-2 forms to be led a total amount for all employers should be entered on Page I.       Item here to employers you are reporting for requires multiple L-2 forms to be led a total amount for all employers should be entered on Page I.         The totals of each expenditure of more than one hundred ve dollars (SIOS) for a tegislators, Public and Executive Of citals and Household.         2       Date       Place       Amount       Names of Legislators, Public and Executive Of citals and Household Members in Group         2       Date       Place       No. 1       Employer(s) Name(s) and Address(cs)         Mount       Namount			-				Date	e prepared		Petiod			
P.O. 36x 1731       P3701       P 16         Totals of all reportable expenditures made or incurred by Lobbyist's Employer on behalf of Lobbyist's Employer.       Proportionate anomatic contributed by each employer. Udentify employers. under ten 3, at bottom of page)         Entertainment       Total a mount for MI Employers       Proportionate anomatic contributed by each employer No. 3       Employer No. 4         Entertainment       S       S       S       S       S         Food and Refreshment       S       S       S       S       S         Living Accommodutions       S       S       S       S       S         Other Expenses of Services       S       S       S       S       S         *When the number of employers you are reporting for requires multiple L-2 forms to be led a total amount for all employers should be entered on Page I.       Item here to employers you are reporting for requires multiple L-2 forms to be led a total amount for all employers should be entered on Page I.         The totals of each expenditure of more than one hundred ve dollars (SIOS) for a tegislators, Public and Executive Of citals and Household.         2       Date       Place       Amount       Names of Legislators, Public and Executive Of citals and Household Members in Group         2       Date       Place       No. 1       Employer(s) Name(s) and Address(cs)         Mount       Namount	KEN MULLEL												
Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer.       L <thl< th="">       L       <thl< th="">       L       L       L<td>PO</td><td colspan="3">3/16</td><td>3/16/16</td><td></td><td>(Mo</td><td>1 1.</td></thl<></thl<>	PO	3/16			3/16/16		(Mo	1 1.					
1       Total of an reportable expenditures made of inclured by contribute of production of Loopyist of the Loopyist converting Loopyist Loopyist of the Loopyist of the Loopyist of t	-		20 8	3701						2	- 29 16		
Benchmark Personal Lying and Trivet       Pitel A Mount for All Employer No. 1       Employer No. 2       Employer No. 3       Employer No. 4         Entertainment Food and Refreshment       \$		To	otals of all reportat	ole expenditures made o	r incurred b	y Lobb	yist or	by Lobbyist's Emp	oloyer on behal	f of Lobb	yist's Employer.		
Down Have to be Repaired       Employer No. 1       Employer No. 2       Employer No. 3       Employer No. 4         Entertainment Food and Refreshment       \$	Category of Expenditure Reimbursed Personal Living and Travel *Total Amount for the set of the set										s, under		
Food and Refreshment       \$					Employ	loyer No. 1		Employer No. 2	Employer No. 3		Employer No. 4		
Advertising	Entertainment Food and Refreshment			\$	\$		\$	5	\$		\$		
Travel Telephone Other Expenses or Services Total \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	Living A	Accommo	odations				_		_				
Telephone	Adverti	sing							-				
Other Expenses or Services	Travel						-						
Total       S	-								-				
*When the number of employers you are reporting for requires multiple L-2 forms to be led a total amount for all employers should be entered on Page I.         *When the number of employers you are reporting for requires multiple L-2 forms to be led a total amount for all employers should be entered on Page I.         Item-       The totals of each expenditure of more than one hundred ve dollars (\$105) for a legislator, other holder of public of e.e. executive of cials and member(s) of their household.         2       Date       Place       Amount       Names of Legislators, Public and Executive Of cials and Household Members in Group         Continued on attached page(s)       Item       Secondary (Secondary (Second	Other E	xpenses	or Services						-				
Item       The totals of each expenditure of more than one hundred we dollars (\$105) for a legislator, other holder of public of ce, executive of cials and member(s) of their household.         2       Date       Place       Amount       Names of Legislators, Public and Executive Of cials and Household Members in Group         2       Date       Place       Amount       Names of Legislators, Public and Executive Of cials and Household Members in Group         Continued on attached page(s)       Item       Employer(s) Name(s) and Address(es)         Who should le this form: Any lobby ist registered under Section 67-6617 Idaho Code       No. 1       Employer(s) Total & Composition (Composition of the past month.         TO BE FILED WITH:       Lawerence Denney Secretary of State PO Box 83720 Boise, ID 83720-0080       No. 4			Total	s_Ø	\$			<u> </u>	\$		\$		
Item         2       Names of Legislators, Public and Executive Of cials and Household Members in Group         2       Date       Place       Amount       Names of Legislators, Public and Executive Of cials and Household Members in Group         2       Date       Place       Amount       Names of Legislators, Public and Executive Of cials and Household Members in Group         2       Date       Place       Amount       Names of Legislators, Public and Executive Of cials and Household Members in Group         2       Continued on attached page(s)         Image: Continued on attached page(s)       Item         Image: Continued on attached page(s)       Image: Continued on attached page(s)         Image: Continued on attached pa	*When t	he numbe	r of employers you a	re reporting for requires m	ultiple L-2 fo	orms to l	be leda	a total amount for all	employers shou	ld be enter	ed on Page 1.		
Item       Names of Legislators, Public and Executive Of cials and Household Members in Group         2       Date       Place       Amount       Names of Legislators, Public and Executive Of cials and Household Members in Group         2       Continued on attached page(s)       Image: State stat					hundred v	e dolla	rs (\$105	5) for a legislator,	other holder of	f public o	f ce, executive of cials		
Interm     Interm       Continued on attached page(s)     Item       INSTRUCTIONS     Item       Who should le this form: Any lobbyist registered under Section 67-6617 Idaho Code     Mo. 1       Filing deadline: Monthly reports due within fleen (15) days of the month for activities of the past month.     No. 2       TO BE FILED WITH:     Lawerence Denney       Secretary of State     PO Box 83720       Boise, ID 83720-0080     No. 4			2mber(s) of their nousenoid.					Names					
INSTRUCTIONS       Item 3       Employer(s) Name(s) and Address(es)         Who should le this form: Any lobbyist registered under Section 67-6617 Idaho Code       Mo. 1       BOX 1731         Filing deadline: Monthly reports due within fteen (15) days of the month for activities of the past month.       No. 2       No. 2         TO BE FILED WITH:       Lawerence Denney Secretary of State PO Box 83720 Boise, ID 83720-0080       No. 4       No. 4		Date		Place		A	mount		and Household	Members	in Group		
INSTRUCTIONS       Item 3       Employer(s) Name(s) and Address(es)         Who should le this form: Any lobbyist registered under Section 67-6617 Idaho Code       Mo. 1       BOX 1731         Filing deadline: Monthly reports due within fteen (15) days of the month for activities of the past month.       No. 2       No. 2         TO BE FILED WITH:       Lawerence Denney Secretary of State PO Box 83720 Boise, ID 83720-0080       No. 4       No. 4													
INSTRUCTIONS       Item 3       Employer(s) Name(s) and Address(es)         Who should le this form: Any lobbyist registered under Section 67-6617 Idaho Code       Mo. 1       BOX 1731         Filing deadline: Monthly reports due within fteen (15) days of the month for activities of the past month.       No. 2       No. 2         TO BE FILED WITH:       Lawerence Denney Secretary of State PO Box 83720 Boise, ID 83720-0080       No. 4       No. 4					+								
INSTRUCTIONS       Item 3       Employer(s) Name(s) and Address(es)         Who should le this form: Any lobbyist registered under Section 67-6617 Idaho Code       Mo. 1       BOX 1731         Filing deadline: Monthly reports due within fteen (15) days of the month for activities of the past month.       No. 2       No. 2         TO BE FILED WITH:       Lawerence Denney Secretary of State PO Box 83720 Boise, ID 83720-0080       No. 4       No. 4					$ \mathcal{P} $								
INSTRUCTIONS       Item 3       Employer(s) Name(s) and Address(es)         Who should le this form: Any lobbyist registered under Section 67-6617 Idaho Code       Mo. 1       BOX 1731         Filing deadline: Monthly reports due within fteen (15) days of the month for activities of the past month.       No. 2       No. 2         TO BE FILED WITH:       Lawerence Denney Secretary of State PO Box 83720 Boise, ID 83720-0080       No. 4       No. 4													
INSTRUCTIONS       Item 3       Employer(s) Name(s) and Address(es)         Who should le this form: Any lobbyist registered under Section 67-6617 Idaho Code       Mo. 1       BOX 1731         Filing deadline: Monthly reports due within fteen (15) days of the month for activities of the past month.       No. 2       No. 2         TO BE FILED WITH:       Lawerence Denney Secretary of State PO Box 83720 Boise, ID 83720-0080       No. 4       No. 4		Continued	on attached page(s)										
Who should le this form: Any lobbyist registered under Section 67-6617 Idaho Code       No. 1       BOX 1731         Filing deadline: Monthly reports due within fteen (15) days of the month for activities of the past month.       No. 2         TO BE FILED WITH:       Lawerence Denney Secretary of State PO Box 83720 Boise, ID 83720-0080       No. 3													
Filing deadline: Monthly reports due within fteen (15) days of the month for activities of the past month.       No. 2         TO BE FILED WITH:       No. 3         Secretary of State       PO Box 83720         Boise, ID 83720-0080       No. 4								Male Rive Nel ian le					
month for activities of the past month. TO BE FILED WITH: Lawerence Denney Secretary of State PO Box 83720 Boise, ID 83720-0080 No. 4							BOKE 70 83701						
Lawerence DenneyNo. 3Secretary of StatePO Box 83720Boise, ID 83720-0080No. 4							No. 2						
Secretary of State PO Box 83720 Boise, ID 83720-0080 No. 4													
Boise, ID 83720-0080 No. 4	Secretary of State						No. 3						
		Boise, ID 83720-0080											

¥.	ct matter of proposed legislat	LEGISLATIVE SUBJECT IDENTIFICATION						
Item or Hou	use Bill, Resolution or other							
4 the Lo	4 the Lobbyist was supporting or opposing.			Subject		Subject		
			01	Agriculture, horticulture,	17	Health service, medicine, drugs		
Subject Code	Bill, Resolution or Other	Appropriation Bill Number	l	farming, and livestock		and controlled substances, health		
(from table)	Legislative Ident. Number	and Section Number	02	Amusements, games, athletics		insurance, hospitals		
16, 12, 07, 11 30 16, 11, 07, 30 16, 12, 67, 26, 11	I TO A			and sports	18	Higher education		
16,12,07,11	4534		03	Banking, nance, credit and	19	Housing, construction, codes		
10,10,01,10	. [ = 0			investments	20	Insurance (excluding health		
			04	Children, minors, youth,		insurance)		
67	UADAA7			senior citizens	21	Labor, salaries and wages,		
50	104093		05	Church and religion		collective bargaining		
			06	Consumer affairs	22	Law enforcement, courts,		
	- 2.1		07	Ecology, environment, pollution,		judges, crimes, prisons		
16.11,07,30	5131			conservation, zoning, land and	23	License, permits		
			1	water use	24	Liquor		
,			08	Education	25	Manufacturing, distribution and		
11 12.07	51354		09	Elections, campaigns, voting,		services		
	0 0			political parties	26	Natural resources, forest and		
20,11			10	Equal rights, civil rights,		forest products, sheries, mining		
				minority affairs		and mining products		
			11	Government, nancing,	27	Public lands, parks, recreation		
13,16,07,10	STHIN			taxation, revenue, budget,	28	Social insurance, unemployment		
13,16,07,10	SMUG			appropriations, bids, fees, funds		insurance, public assistance,		
			12	Government, county		workmen's compensation		
		1	13	Government, federal	29	Transportation, highways,		
			14	Government, municipal		streets and roads		
			15	Government, special districts	30	Utilities, communications,		
			16	Government, state		televisions, radio, newspaper,		
						power, CATV, gas		
			1		31	Other (please specify)		
			1					
1			<b>├</b> ──					
			1					
				CERTIFICATION: I hereby certify	hat the a	have is a true complete and		
		l		correct statement in accordance with		· 1		
	y any rule, ratemaking decisi			concer statement in accordance with	Section	07-0024 Idany Cout.		
5 bid or t	bid process, nancial services		, )					
ing or c	opposing.		1-20-10		2/11/11			
			1	Kama	<u> </u>	916/16		
				Lobbyist signature		Date		
			J					