Rev. 11/2011

State of Idaho

Ben Yaursa Secretary of State

LOBBYIST REPORT FORM

☐ SEMI-ANNUAL X ANNUAL

Page___of___Page(s)

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To Be Filed By:

LOBBYISTS

(Sec.: 67-6619)

12 FEB 17 AHII: 37

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٠.		Type or print clea			·-					SIA	TE OF IDAHO	
Lobbyis	t's name and			. Date p	Date prepared			Period	covered			
Larry W. Cope P O Box 712 Buhl, ID 83316-0712			(X) (4 +) (2/17		7/12		(Mo.) (Day) (Yr.) 12 31 11			
Item 1	Tota	ls of all reportal	ble expenditures made o	or incurred by	y Lobb	yist or by	Lobby	ist's Empl	oy er on b	ehalf of Lobb	yist's Employer	
Ca Reimb Expense	Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported *Total Amount fo		*Total Amount for All Employers	Proportionate am Item 3, at botton		of page.)	uted by each emplo		oyer (Identify employ Employer No. 3			
Entertainment Food and Refreshment			\$	\$		\$_			\$		\$	
Living Accommodations				- ·-		_ _			· · ·			
Adverti Travel Telepho						_ _ _ _	÷					
Other E	xpenses or l	Services	<u> </u>	200,000	·:	<u></u>				4		
W/hon /	ha number of	Total	s 0	s 0	man barba	\$\$	tal amou		\$	0	s	
When the number of employers you are reporting for requires multiple L>2 forms to be filed a total amount for all employers should be entered on The totals of each expenditure of more than one hundred (\$100) for a legislator, other holder of public office, executive office of their household. Names of Legislators, Public and Executive of the content of the conte							officials and member(s)					
	Date ·		Place		Amount .		and Household Members in Group					
								v 1917				
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	ontinued on a	attached page(s)	DIICTIONS			Item		· · · · · · · · · · · · · · · · · · ·		N	11	
		INSI	RUCTIONS	<u> </u>	: · .	3				Name(s) and A		
		67-	y lobbyist registered un 6617 Idaho Code			No. 1	· :	P -0 Bc	x 712 ID 8	gs Foods 3316-071	:	
- Filir	eg deadline:		is due on January 31st. byist semi-annual repor		lst.	No. 2 · · ·			1.2.112	111 (1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	in a sa a an marina. Tagan	
TO BE FILED WITH: Ben Ysursa Secretary of State PO Box 83720						No. 3						
Boise, ID 83720-0080 Phone: (208) 334-2852						No. 4						

Item			ion, the number of the Senate	LEGISLATIVE SUBJECT IDENTIFICATION					
4		-	legislative activity in which	l					
	the L	obbyist was supporting or op	posing.		Subject		Subject		
Subject	Code	Bill Resolution or Other	Appropriation Bill Number	01	Agriculture, horticulture,	17	Health service, medicine, drugs		
(from t		Legislative Ident. Number	and Section Number		farming, and livestock		and controlled substances, health		
(Itan) i	able)	Degistative Idont. Number	and Section Namber	02	Amusements, games, athletics		insurance, hospitals		
		1	}	1 :	and sports	18	Higher education		
		l	}	03	Banking, finance, credit and	19	Housing, construction, codes		
			ļ	l	investments	20	Insurance (excluding health		
		l	J	04	Children, minors, youth,		insurance)		
		[l	senior citizens	21	Labor, salaries and wages,		
			· ·	05	Church and religion		collective bargaining		
		}] .	06	Consumer affairs	22	Law enforcement, courts,		
		1 .]	07	Ecology, environment, pollution,		judges, crimes, prisons		
			l	l	conservation, zoning, land and	23	License, permits		
				l	water use	24	Liquor		
				08	Education	25	Manufacturing, distribution and		
				09	Blections, campaigns, voting,		services		
					political parties	26	Natural resources, forest and		
				10	Equal rights, civil rights,		forest products, fisheries, mining		
				1	minority affairs		and mining products		
				11	Government, financing,	27	Public lands, parks, recreation		
					taxation, revenue, budget,	28	Social insurance, unemployment		
	٠.		ſ	l	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	30	televisions, radio, newspaper,		
				['0	Goyomion, aut.		power, CATV, gas		
	- 1					31	Other (please specify)		
	. 1		• • •	· · .	• * •	31	Other (thease specify)		
			* * * * * * * * * * * * * * * * * * * *	1			•		
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	- 1			~	MINISTER ATTACKS TO A STATE OF THE ASSESSMENT OF	441 -1			
	- }				ERTIFICATION: I hereby certify the				
)			cq	orrect statement in accordance with S	ection 6	/-6624 Idaho Code.		
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	- 1			_	()				
	i			[James /	~ ~	- 0/17/17		
	اسنسا			_	<u>= 000000000000000000000000000000000000</u>	_	<u> </u>		
Item	Identify	any rule, ratemaking decision	on, procurement,	l ī	obbyist signature		Date		
5 10		t bid or bid process, financial							
_ h	bond la	bbyist was supporting or opp	osing.	!	\smile		•		
				1 =	anders a No. 1 of statut		Date		
				₽r	nployer No. I signature		Date		
		•		ĺ					
				=					
				l Br	nployer No. 2 signature		Date		
				[
				_					
				l Br	nployer No. 3 signature		Date		
			· .	Er	nployer No. 4 signature		Date		