Rev. 12/2012

4121

## State of Idaho

Ben Ysursa Secretary of State

Phone: (208) 334-2852 Fax: (208) 334-2282

ANNUAL SEMI-ANNUAL

To	Вe	Filed	Bγ

LOBBYISTS (Sec. 67-6619)

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STATE OF IDAHO

(Type or print clearly in black ink) See instructions at bottom of page Lobbyist's name and permanent business address Date prepared Period covered Matthew Dranquez year ending 2/5/15 profesiones down (Mo.) (Day) (Yr.) Gathersburg, MD 20852 [tem Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer. Proportionate amounts contributed by each employer (Identify employers, under Category of Expenditure \*Total Amount for Item 3, at bottom of page.) Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity All Employers Employer No. 1 Employer No. 4 Do Not Have to be Reported Employer No. 2 Employer No. 3 Entertainment Food and Refreshment Living Accommodations Advertising Travel Telephone Other Expenses or Services Total \*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 Page 1. The totals of each expenditure of more than one hundred five dollars (\$105) for a legislator, other holder of public office, executive officials and member(s) of their household. ltem-Names of Legislators, Public and Executive Officials 2 Date Place Amount and Household Members in Group Continued on attached page(s) Item 3 INSTRUCTIONS Employer(s) Name(s) and Address(es) Who should file this form: Any lobbyist registered under Section No. 1 67-6617 Idaho Code Filing deadline: Annual report is due on January 31st. Executive Lobbyist semi-annual report due July 31st. No. 2 TO BE FILED WITH: No. 3 Ben Ysursa Secretary of State PO Box 83720 · Boise, ID 83720-0080 No. 4

Subject matter of proposed legislation, the number of the Senate			LEGISLATIVE SUBJECT IDENTIFICATION			
or House Bill, Resolution or other legislative activity in which		Colo Caltara				
the L	obbyist was supporting or op	posing.		Subject		Subject
Cubicat C- 4-	Bill, Resolution or Other	Appropriation Bill Number	01	Agriculture, horticulture,	17	Health service, medicine, drugs
Subject Code (from table)	Legislative Ident. Number	and Section Number	02	farming, and livestock		and controlled substances, health insurance, hospitals
(BOM table)	Designative Idelit Lenthoes	and obtain I talled	102	Amusements, games, athletics and sports	18	Higher education
			03	Banking, finance, credit and	19	Housing, construction, codes
01	SB 1337		03	investments	20	Insurance (excluding health
<i>\( \)</i>	つめいノ、	•	04	Children, minors, youth,	20	insurance)
			🕶	senior citizens	21	Labor, salaries and wages,
			05		21	collective bargaining
			06	Consumer affairs	22	Law enforcement, courts,
		ĺ	07	Beology, environment, pollution,		judges, crimes, prisons
			"	conservation, zoning, land and	23	License, permits
			1	water use	24	Liquor
		i	08	Education	25	Manufacturing, distribution and
			09	Elections, campaigns, voting,		services
	1		, ,,	political parties	26	Natural resources, forest and
			10	Equal rights, civil rights,		forest products, fisheries, mining
				minority affairs		and mining products
		ĺ	11	Government, financing,	27	Public lands, parks, recreation
				taxation, revenue, budget,	26	Social insurance, unemployment
	1			appropriations, bids, fees, funds		insurance, public assistance,
	İ		12	Government, county		workmen's compensation
			13	Government, federal	29	Transportation, highways,
	i		14	Government, municipal		streets and roads
	i	}	15	Government, special districts	30	Utilities, communications,
		•	16	Government, state		televisions, radio, newspaper,
			1			power, CATV, gas
	1 .		1		31	Other (please specify)
			-	ERTIFICATION: I hereby certify it	hat the si	have is a true complete and
				orrect statement in accordance with		
			-	$\sim$		21-15
		L	1 _			45/12
5 contra	fy any rule, ratemaking decision of the bid or bid process, financia	d services agreement or	1 4	obbyist signature .		Date
bond	obbyist was supporting or op	posing.	վ։			
		•	E	mployer No. 1 signature		Date
			E	mployer No. 2 signature		Date
			E	mployer No. 3 signature		Date
			E	mployer No. 4 signature		Date
			~			