Rev. 12/2012 365

State of Idaho

Ben Ysursa Secretary of State

LOBBYIST MONTHLY REPORT FORM

To Bc Filed By:

L-3

LOBBYISTS (Sec. 67-6619)

Page	e	_of		agı	:(s)
THIS	SPACE	FOR OF	FICE L	SF (Y.INC

FEB 18 PM 1: 33

STATE OF IDAHO

(Type or print clearly in black ink)
See instructions at bottom of page

Lobbyist's name and permanent business address

Altria Client Services Inc and its Affiliates

Period covered

more

Altria Client Services Inc and its Affiliates 1415 L Street, Suite 1150 Sacramento, CA 95814

2/13/14

month ending

(Mo.) (Duy) (Yr.) 01 31 14

Ttem 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 (Identity 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. 4 Employer No. 1 Employer No. 2 Employer No. 3 Do Not Have to be Reported Entertainment 1,350.00 1,350.00 Food and Refreshment Living Accommodations Advertising Trave] Telephone 5.750.00 5.750.00 Other Expenses or Services 0.00 7,100.00 0.00 7,100.00 0.00Total

*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. Item-Names of Legialators, Public and Executive Officials Date Place Agricunt and Household Members in Group 1/4/2014 Governor's Gala 500,00 Representative Kelly Packer Stueckle Sky Center 500,00 Mr. Duane Packer Boise State University Continued on attached page(s) Item Employer(s) Name(s) and Address(es) INSTRUCTIONS Altria Client Services, Inc and Its Affiliates No. I Who should file this form: Any lobbyist registered under Section 1415 L Street, Suite 1150, Sacramento, Ca 95814 67-6617 Idaho Code Filing deadline: Monthly reports due within fifteen (15) days of the No. 2 month for activities of the past month. TO BE FILED WITH: Ben Ysursa No. 3 Secretary of State PO Box 83720 Boise, ID 83720-0080 No. 4 Phone: (208) 334-2852 Fax: (208) 334-2282

Subject matter of proposed legislation, the number of the Senate				LEGISLATIVE SUBJECT IDENTIFICATION				
It em 4	tem or House Bill, Resolution or other legislative activity in which		Code	Subject		Subject		
Subject (from t	Code	Bill, Resolution or Other Legislative Ident, Number	Appropriation Bill Number and Section Number	0).	Agriculture, horticulture, farming, and livestock Amusements, games, staletics	17	Health service, medicine, drugs and controlled substances, health insurance, hospitals	
3	1	НВ 370	N/A	03 04 05 06 07 08 09 10 11 12 13 14 15 16	and sports Banking, finance, credit and investments Children, reinors, 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, county Government, ederal Government, municipal Government, special districts Government, state	18 19 20 21 22 23 24 25 26 27 28 29 30	Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, sularias 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 leads, 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) Tobacco	
Item 5	I hid at hid thocose financial economic brand labbaget was embourt-				CERTIFICATION: I hereby certify correct statement in accordance with Lewbyist signature			