Rev. 12/2012

5198

State of Idaho

(Type or print clearly in black ink)

	LOBBYIST	REPORT	FORM
--	----------	--------	-------------

r
L

7	SEMI-	AN	NUA	ľ

Page	of	Page(s)
THIS SPACE	E FOR OFFI	CE USE ONLY

16 JAN 26 PM 02:26

SECRETARY OF STATE

STATE OF IDAHO

Lawerence Denney Secretary of State

To Be Filed	Ву:
L-2	LOBBYISTS (Sec. 67-6619)

See instructions at bottom of page Lobbyist's name and permanent business address Date prepared Period covered Casey Kelley 1/26/2016 year ending 1005 Congress Avenue Austin, TX 78701 (Mo.) (Day) (Yr.) 12 31 2015

Item 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 Do Not Have to be Reported Employer No. 1 Employer No. 2 Employer No. 3 Employer No. 4 Entertainment Food and Refreshment \$ \$0.00 \$_\$0.00 Living Accommodations \$0.00 \$0.00 Advertising \$0.00 \$0.00 Travel \$0.00 \$0.00 Telephone \$0.00 \$0.00 Other Expenses or Services \$0.00 \$0.00 **Total** \$ \$0.00 \$_\$0.00 *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 Legislators, Public and Executive Officials 2 Date Place Amount and Household Members in Group Continued on attached page(s) Item INSTRUCTIONS Employer(s) Name(s) and Address(es) Exelon Generation Company, LLC Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code 300 Exelon Way Kennett Square PA 19348 USA Filing deadline: Annual report is due on January 31st. Executive Lobbyist semi-annual report due July 31st. No. 2

TO BE FILED WITH:

Lawerence Denney Secretary of State PO Box 83720 Boise, ID 83720-0080

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

No. 3

No. 4

T.	Subje	ect matter of proposed legislat	ion, the number of the Senate		LEGISLATIVE SUB	BJECT	IDENTIFICATION
Item		ouse Bill, Resolution or other					
4		obbyist was supporting or op		Code	Subject	Code	Subject
				01	Agriculture, horticulture,	17	Health service, medicine, drugs
Subject		Bill, Resolution or Other	Appropriation Bill Number		farming, and livestock		and controlled substances, health
(from t	able)	Legislative Ident. Number	and Section Number	02	Amusements, games, athletics		insurance, hospitals
				1	and sports	18	Higher education
				03	Banking, finance, credit and	19	Housing, construction, codes
				05	investments	20	Insurance (excluding health
				04	Children, minors, youth,		insurance)
				"	senior citizens	21	Labor, salaries and wages,
				05	Church and religion		collective bargaining
				06	Consumer affairs	22	Law enforcement, courts,
				07	Ecology, environment, pollution,		judges, crimes, prisons
				"	conservation, zoning, land and	23	License, permits
					water use	24	Liquor
				08	Education	25	Manufacturing, distribution and
				09	Elections, campaigns, voting,	23	services
				0)	political parties	26	Natural resources, forest and
				10	Equal rights, civil rights,	20	forest products, fisheries, mining
				10	minority affairs		and mining products
				11	Government, financing,	27	Public lands, parks, recreation
				111	taxation, revenue, budget,	28	Social insurance, unemployment
					appropriations, bids, fees, funds	20	insurance, public assistance,
				12	Government, county		workmen's compensation
				13	Government, federal	29	Transportation, highways,
				14	Government, municipal	29	streets and roads
				15	Government, special districts	30	Utilities, communications,
				16	Government, state	30	televisions, radio, newspaper,
				10	Government, state		power, CATV, gas
						2.1	1 , , ,
						31	Other (please specify)
				_			
				C	ERTIFICATION: I hereby certify th	at the ab	ove is a true, complete and
				co	orrect statement in accordance with S	Section 6'	7-6624 Idaho Code.
				_			
					Electronically signed		1/26/2016
		y any rule, ratemaking decision		L	obbyist signature		Date
		et bid or bid process, financial obbyist was supporting or oppositions.					
	bona i	body ist was supporting or opp	Joshig.	-			
				Er	mployer No. 1 signature		Date
				Er	mployer No. 2 signature		Date
				_			
				Er	mployer No. 3 signature		Date
				Er	mployer No. 4 signature		Date