Rev. 12/2012

6164

Lawerence Denney Secretary of State

LOBBYIST REPORT FORN	LOBBYIST	REPORT	FORM
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LOBBYISTS

(Sec. 67-6619)

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	V	A	TAT.	NU	A	L

To Be Filed By:

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SECRETARY OF STATE STATE OF IDAHO

State of Idaho

		Type or print clease instructions a	arly in black ink)									
Mark 802 V		ermanent busine ess ock					ite prepared /3/2016			Period co (Mo.)	year end (Day)	ing (Yr.) 2015
Item 1	Total	s of all reportal	ole expenditures made o	or incurred b	y Lobb	yist o	r by Lobbyist's Emp	loyer on b	ehalf o	f Lobby	ist's Emplo	oyer.
Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity *Total Amount for All Employers			Proportionate amount Item 3, at bottom of			ntributed by each emp e.)	loyer (Ider	ntify em	ployers,	under		
	Not Have to b		r . J	Emplo	yer No. 1	1	Employer No. 2	Emp	loyer No	o. 3	Employe	er No. 4
Entertai Food ar	nment id Refreshm	ent	\$_\$0.00	\$_\$0.0	00		\$ \$0.00	\$_\$0.0	00		\$_\$0.00	
Living 1	Accommoda	tions	\$0.00	\$0.0	00		\$0.00	_\$0.0	00		\$0.00	
Adverti	sing		\$0.00	\$0.0	00		\$0.00	\$0.0	00		\$0.00	
Travel			\$0.00	\$0.0	00		\$0.00	\$0.0	00		\$0.00	
Telepho	one		\$0.00	\$0.0	00		\$0.00	\$0.0	00		\$0.00	
Other E	xpenses or S	Services	\$0.00	\$0.0	00		\$0.00	\$0.00			\$0.00	
		Total	\$_\$0.00	\$_\$0.0			\$ \$0.00	\$_\$0.0			\$_\$0.00	
*When t	The totals of	of each expendi	ture of more than one hu	-							_	officials
Item-	and member	er(s) of their ho	ousehold.				Names o	f Legislator	s, Public	c and Exe	ecutive Offic	cials
2	Date		Place		An	nount		and Housel				
	Continued on a	ttached page(s)				T .						
		INST	RUCTIONS			Ite 3		Employer(s) Name(s) and Address(es)				
Who	o should file		ny lobbyist registered ur -6617 Idaho Code	nder Section	1	No. 1	Advantage Dental 442 SW Umatilla	Avenue Re	edmond	OR 977	'56 USA	
Filin	ng deadline:		is due on January 31st.		31st.	No. 2	American Health \ 671East River Par		ise ID 8	33707 U	SA	
ТО	BE FILED V	Lawe	rence Denney etary of State			No. 3	AMR 660 East Franklin	Meridian II	D 8364	2 USA		
	Phor	PO Boise,	Box 83720 ID 83720-0080 852 Fax: (208) 334-2	282		No. 4	Figures Ellis	. Daisa ID	00700			

802 West Bannock Boise ID 83702 USA

	C1-:		: 4hh	1	LEGISLATIVE SUF	IECT	IDENTIFICATION
Item			ion, the number of the Senate legislative activity in which		LEGISLATIVE SUF	SJECI	IDENTIFICATION
4		obbyist was supporting or op		1	Subject		Subject
Subject	Code	Bill, Resolution or Other	Appropriation Bill Number	01	Agriculture, horticulture,	17	Health service, medicine, drugs
(from t	I .	Legislative Ident. Number	and Section Number	02	farming, and livestock		and controlled substances, health
(Hom t	uoie)	Eegistative facilit. I valificei	and Section Frances	02	Amusements, games, athletics	1.0	insurance, hospitals
				02	and sports Banking, finance, credit and	18	Higher education Housing, construction, codes
				03	investments	19 20	
				04	Children, minors, youth,	20	Insurance (excluding health insurance)
				04	senior citizens	21	Labor, salaries and wages,
				05	Church and religion	21	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,		services
					political parties	26	Natural resources, forest and
				10	Equal rights, civil rights,		forest products, fisheries, mining
					minority affairs		and mining products
				11	Government, financing,	27	Public lands, parks, recreation
					taxation, revenue, budget,	28	Social insurance, unemployment
					appropriations, bids, fees, funds		insurance, public assistance,
				12	Government, county		workmen's compensation
				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,
						21	power, CATV, gas
						31	Other (please specify)
					ERTIFICATION: I hereby certify the breed statement in accordance with S		
	x1 .::6				Electronically signed		2/3/2016
5	contract	any rule, ratemaking decisit t bid or bid process, financia bbyist was supporting or opp	l services agreement or	L	obbyist signature		Date
				Er	nployer No. 1 signature		Date
				Er	nployer No. 2 signature		Date
				Er	nployer No. 3 signature		Date
				_	nployer No. 4 signature		Date

Lobbyist Report Form Attachment

Employer No.	Entertainment Food & Refreshment	Living Accommodations	Advertising	Travel	Telephone	Other Expenses or Services	Employer Total
No.5	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Employer No.	Employer Name(s) and Address(es)	Employer Signature(s)	Date Signed
No.5	VIMO, Inc. 1305 Terra Bella Avenue Mountain View CA 94043 USA		