Rev. 12/2012

6574

State of Idaho

Lawerence Denney Secretary of State

LOBBYIST	REPORT	FORM
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LOBBYISTS

(Sec. 67-6619)

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To Be Filed By:

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SECRETARY OF STATE STATE OF IDAHO

(Type or print clearly in black ink)

	S	ee instructions at	t bottom of page								
-		ermanent busines	ss address			Date prepared Period covered			covered		
	Nicole Har					1,	13/2017			/ year endi	ng
	V Bannock , ID 83702								(M-)	(Day)	(V-)
20.00	,	-							(Mo.)	1	(Yr.)
									12	31	2016
Item 1	Totals	s of all reportal	ole expenditures made	or incurred b	y Lobb	oyist o	by Lobbyist's Emp	loyer on behalf	of Lobby	yist's Emplo	yer.
Reimbu		iving and Travel Lobbying Activity	*Total Amount for All Employers	Proportion Item 3, at			ntributed by each emple.)	loyer (Identify en	mployers,	, under	
	Not Have to b		. In Employers	Emplo	yer No.	1	Employer No. 2	Employer N	No. 3	Employe	No. 4
Entertai	nment id Refreshme	amt.	\$ \$312.28	\$ 004	0.00		¢ ¢ 0 00	\$ \$ 0.00		¢	
	Accommodat		\$ <u>\$312.28</u> \$0.00		2.28		\$ <u>\$0.00</u> \$0.00	\$_\$0.00		\$ <u>\$0.00</u> \$0.00	
Adverti		tions	\$0.00	_ \$0.0 _ \$0.0			\$0.00	\$0.00 \$0.00		\$0.00	
Travel	sing		\$0.00							\$0.00	
Telepho	ano.			\$0.0			\$0.00 \$0.00	\$0.00		\$0.00	
-			\$0.00	\$0.0				\$0.00		\$0.00	
Other E	xpenses or S	Beivices	\$0.00	\$0.0)()		\$0.00	\$0.00			
		Total	\$ \$312.28	\$_\$31	2.28		\$_\$0.00	\$_\$0.00		\$_\$0.00	
*When t	he number of	emplovers vou a	re reporting for requires n	 nultiple L-2 fo	orms to b	e filed	a total amount for all e	mplovers should	be entered	d on Page 1.	
	The totals of	of each expendi	ture of more than one h	-						_	fficials
Item-	and membe	er(s) of their ho	ousehold.				Namaga	FL agislators Dub	lie and Ev	vacutiva Offic	iala
2 Date Place Ame					Names of Legislators, Public and Executive Officials and Household Members in Group					iais	
V	Continued on a	ttached page(s)									
		INST	RUCTIONS			Ite		mployer(s) Name	(s) and Ac	ddress(es)	
Wha	o should file	this form: A	ny lobbyist registered u	ınder Section	1		American Council	of Life Insurers			
***	o siloulu ilic		-6617 Idaho Code	maci Section	1	No. 1	101 Constitution A	ve NW Ste 700	Washing	ton DC 2000	01 USA
Filir	ng deadline:		is due on January 31st				Enterprise Car Re	ntal			
		Executive Lob	obyist semi-annual repo	ort due July ?	31st.	No. 2	PO Box 648 Midva	ale UT 84047 US	SA		
ТО	BE FILED W						Grooms Craws				
			rence Denney etary of State			No. 3		unnologge Al Of	5400 LIO	^	
		PO	Box 83720				PO Box 020152 To	uscaloosa AL 35	04UZ USA	٦.	
	Phon	,	ID 83720-0080 852 Fax: (208) 334-	2282		No. 4	Idaho Association	of Naturopathic	Physicia	ns	
	Phone: (208) 334-2852 Fax: (208) 334-2282						PO Box 1365 Eagle ID 83616 USA				

Item					LEGISLATIVE SUB	BJECT	IDENTIFICATION
Item 4 Subject (from 2, 11 12, 1 20, 2 24, 2 30	or Ho the L t Code table)		ion, the number of the Senate legislative activity in which posing. Appropriation Bill Number and Section Number	01 02 03 04 05 06 07 08 09 10 11	LEGISLATIVE SUB Subject Agriculture, horticulture, farming, and livestock Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, 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	Code 17 18 19 20 21 22 23 24 25 26 27 28	Subject Health service, medicine, drugs and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries 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 lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation
Item 5	contra	y any rule, ratemaking decisict bid or bid process, financia	l services agreement or	13 14 15 16	appropriations, bids, fees, funds		insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)
	bond I	obbyist was supporting or op	posing.	Er	nployer No. 1 signature		Date
				Er	mployer No. 2 signature		Date
				Er	nployer No. 3 signature		Date
-				Er Er	nployer No. 4 signature		Date

Lobbyist Report Form Attachment

Lobbyist's name and permanent business address
Julie Nicole Hart 802 W Bannock Boise, ID 83702

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
No.6	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
No.7	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
No.8	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
No.9	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
No.10	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
No.11	\$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 F	Idaho Licensed Beverage Association		
No.5	5208 W. Irving Boise ID 83701 USA		
No.6	Idaho Naturopathic Medical Physicians		
	2524 N Stokesberry Meridian ID 83642 USA		
No.7	Middlefork Aviation		
	Challis Municipal Alrport Road #2 Challis ID 83226 USA		
No.8	Pawn 1		
110.0	5420 N Commercial Ruston WA 98407 USA		
No.9	Rocky Mountain Power		
	201 S. Main Suite 2300 Salt Lake City UT 84111 USA		
No.10	SkyWest Airlines		
	444 South River Road St. George UT 84790 USA		
No.11	Western Aircraft		
	4300 S. Kennedy St Boise ID 83701 USA		

Rev. 12/2012

State of Idaho

Lawerence Denney Secretary of State

LOBBYIST REPORT FORM	PORT FORM
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LOBBYISTS

(Sec. 67-6619)

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SECRETARY OF STATE STATE OF IDAHO

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L-2 (Type or print clearly in black ink)

See instructions at bottom of page Lobbyist's name and permanent business address Date prepared Period covered Julie Nicole Hart 1/13/2017 year ending 802 W Bannock Boise, ID 83702 (Mo.) (Day) (Yr.) 31 12 2016 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 \$ \$312.28 \$ \$0.00 \$ \$0.00 \$_\$312.28 \$_\$0.00 Living Accommodations \$0.00 \$0.00 \$0.00 \$0.00 _\$0.00 \$0.00 Advertising \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Travel \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Telephone \$0.00 \$0.00 \$0.00 \$0.00 Other Expenses or Services \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 Total \$ \$312.28 \$ \$312.28 \$ \$0.00 \$ \$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) American Council of Life Insurers Who should file this form: Any lobbyist registered under Section No. 1 67-6617 Idaho Code 101 Constitution Ave NW Ste 700 Washington DC 20001 USA Filing deadline: Annual report is due on January 31st. **Enterprise Car Rental** Executive Lobbyist semi-annual report due July 31st. No. 2 PO Box 648 Midvale UT 84047 USA TO BE FILED WITH: Greene Group No. 3 Lawerence Denney Secretary of State PO Box 020152 Tuscaloosa AL 35402 USA PO Box 83720 Boise, ID 83720-0080 Idaho Association of Naturopathic Physicians Phone: (208) 334-2852 Fax: (208) 334-2282

PO Box 1365 Eagle ID 83616 USA

Item			ion, the number of the Senate		LEGISLATIVE SUE	BJECT	IDENTIFICATION
4			legislative activity in which				
•	the L	obbyist was supporting or op	posing.		Subject		Subject
Subjec	t Code	Bill, Resolution or Other	Appropriation Bill Number	01	Agriculture, horticulture,	17	Health service, medicine, drugs
(from		Legislative Ident. Number	and Section Number	02	farming, and livestock		and controlled substances, health
		H.B. 498, H.B. 540	and Section I tuniber	02	Amusements, games, athletics and sports	1.0	insurance, hospitals
2, 11		H.B. 534, H.B. 359		0.2	Banking, finance, credit and	18	Higher education Housing, construction, codes
12, 1	U	H.B. 432, H.B. 361		03	investments	19 20	Insurance (excluding health
20, 2		H.B. 362, H.B. 354		04	Children, minors, youth,	20	insurance)
24, 2	6			04	senior citizens	21	Labor, salaries and wages,
30				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,
							power, CATV, gas
						31	Other (please specify)
					ERTIFICATION: I hereby certify the orrect statement in accordance with S		
				_			
	lv 1				Electronically signed		1/13/2017
Item 5	contra	y any rule, ratemaking decision to bid or bid process, financia	l services agreement or		obbyist signature		Date
	bona i	obbyist was supporting or opp	posing.	_	MRR		1/17/2017
				Er	mployer No. 1 signature		Date
				Er	mployer No. 2 signature		Date
				Er	mployer No. 3 signature		Date
				Er	mployer No. 4 signature		Date

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