Rev. 12/2012

3934

State of Idaho

Lawerence Denney Secretary of State

	LOBBYIST	REPORT	FORM
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To Be Filed By:

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SECRETARY OF STATE STATE OF IDAHO

LOBBYISTS L-2 (Sec. 67-6619) (Type or print clearly in black ink)

	at bottom of page									
Lobbyist's name and permanent business address Kenneth Howell					repared 2015		Period	covered year ending	ng	
877 Main St								year enan	115	
Boise, ID 83702							(Mo.)) (Day)	(Yr.)	
							12	31	2014	
Totals of all report	able expenditures made	or incurred by	y Lobby	yist or by	Lobbyist's Empl	oyer on behal	f of Lobb	yist's Emplo	yer.	
Category of Expenditure Reimbursed Personal Living and Travel	*Total Amount for	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)								
Expenses Pertaining to Lobbying Activity Do Not Have to be Reported	All Employers	Employer No. 1		1 Employer No. 2		Employer	Employer No. 3		Employer No. 4	
Entertainment										
Food and Refreshment	\$_\$0.00	\$_\$0.0	0	\ \$_		. \$		\$		
Living Accommodations	\$0.00	\$0.0	0	_						
Advertising	\$0.00	\$0.0	0	_ _						
Travel	\$0.00	\$0.0	0	_ _						
Telephone	\$0.00	\$0.0	00	_						
Other Expenses or Services	\$0.00	\$0.0	0							
Total	\$ \$0.00	\$ \$0.0	n	\$_	\$ 5		\$			
10441	φ	_ Ψ <u>ΨΟ.Ο</u>	0	^Ψ _		Ψ		Ψ		
*When the number of employers you		-						_	CC .: .1	
Item-	diture of more than one household.	unarea iive d	ionars (\$105)10	r a legislator, othe	er notder of put	one onice	e, executive o	iliciais	
2 Date	Place		Am	Names of Legislators, Public and Executive Officials and Household Members in Group						
- Date Place						and Household	iviemoers n	П Стоир		
Continued on attached page(s))									
INSTRUCTIONS					Employer(s) Name(s) and Address(es)					
Who should file this form: Any lobbyist registered under Section				Idaho Bankers Association						
67-6617 Idaho Code				No. 1 816 W Bannock Ste 5A Boise ID 83702 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				No. 3						
PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282				No. 4						

- .	Subje	ect matter of proposed legislat	ion, the number of the Senate	LEGISLATIVE SUBJECT IDENTIFICATION			
Item		ouse Bill, Resolution or other					
4		obbyist was supporting or op		Code	Subject	Code	Subject
		, II 6 II		01	Agriculture, horticulture,	17	Health service, medicine, drugs
Subject	Code	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
]	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,		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)
				1	ERTIFICATION: I hereby certify the orrect statement in accordance with S		, 1
				_ 	Electronically signed		2/5/2015
T4	Identif	y any rule, ratemaking decision	on procurement	_	obbyist signature		
5	contrac	et bid or bid process, financial obbyist was supporting or opp	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
				Er	nployer No. 4 signature		Date