Rev. 12/2012

State of Idaho

Lawerence Denney Secretary of State

LOBBYIST	REPORT	FORM
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Page	of	Page(s)
THIS SPAC	E FOR OFFI	CE LISE ONLY

To Be Filed By:

LOBBYISTS (Sec. 67-6619) 16 JAN 06 AM 09:55 SECRETARY OF STATE

STATE OF IDAHO

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		nt clearly in black ink) ons at bottom of page									
Mark	's name and permanent b Reed Duffin					e prepared 6/2016	'	Period c	eovered year endin	ng	
	S Saturn Way, Su , ID 83709	ite 100						(Mo.)	(Day)	(Yr.)	
	,							12	31	2015	
Item	Totals of all rep	portable expenditures made	or incurred b	oy Lobb	yist or	by Lobbyist's Empl	loyer on behalf			yer.	
Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported		avel *Total Amount for	Proportion	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)							
		tivity All Employers	Emplo	yer No. 1	1	Employer No. 2	Employer N	No. 3	Employer	No. 4	
Entertai Food an	nment d Refreshment	\$_\$0.00	_ \$\$0.0	00		\$	\$		\$		
Living A	Accommodations	\$0.00	\$0.0	00	.		-				
Adverti	sing	\$0.00	\$0.0	00	.						
Travel		\$0.00	\$0.0	00	.		-				
Telepho	ne	\$0.00	\$0.0	00	.		-				
Other E	xpenses or Services	\$0.00	\$0.0	00							
	Tot	al \$_\$0.00	\$_\$0.0	\$ \$0.00		\$	\$	\$			
*When t	he number of employers	you are reporting for requires n	 	orms to b	e filed :	n total amount for all e	mployers should	he entered	Lon Page 1		
1/11011	The totals of each exp	penditure of more than one h	-						_	fficials	
Item-	and member(s) of the	eir household.				Names of	f Legislators Pub	lic and Fx	ecutive Offic	ials	
2	Date	Place		An	nount	Names of Legislators, Public and Executive Officials and Household Members in Group					
	ontinued on attached pag	ra(a)									
	1 0	NSTRUCTIONS			Iten	n E	mployer(s) Name	(s) and Ad	ldress(es)		
			1 0			I Idaho Sugarbeet Gr	owers Associati	on			
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code				n	No. 1 1951 S Saturn Way, Suite 100 Boise ID 83709 USA						
Filing deadline: Annual report is due on January 31st. Executive Lobbyist semi-annual report due July 31st.				31st.	No. 2						
ТО І		Lawerence Denney Secretary of State			No. 3						
Secretary of State PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282					No. 4						

Item Subject matter of proposed legislation, the number of the Senate			LEGISLATIVE SUBJECT IDENTIFICATION				
Subject (from to 1, 6, 7, 15, 16, 18, 29, 30	or Ho the L		ion or Other legislative activity in which opporting or opposing. ion or Other lent. Number and Section Number and Section Number l.J.M. 006 Appr. S1150, Appr. S1161, Appr. S1162		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 Government, municipal Government, special districts Government, state		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 Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify)
				-	ERTIFICATION: I hereby certify the prrect statement in accordance with S		
Item 5	contra	I fy any rule, ratemaking decisi ct bid or bid process, financia obbyist was supporting or op	l services agreement or		obbyist signature		Date
				Eı	mployer No. 1 signature		Date
				Eı	mployer No. 2 signature		Date
				Eı	mployer No. 3 signature		Date
				I Ei	mployer No. 4 signature		Date