Rev. 12/2012

State of Idaho

Lawerence Denney Secretary of State

LOBBYIST	REPORT	FORM
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To Be Filed By:

L-2

LOBBYISTS (Sec. 67-6619) 15 MAY 14 PM 01:19

SECRETARY OF STATE STATE OF IDAHO

(Type or print clearly in black ink) See instructions at bottom of page Lobbyist's name and permanent business address Date prepared Period covered Trevor Chandler 5/14/2015 year ending 1640 Rhode Island Ave NW Washington, DC 20036 (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 Reimbursed Personal Living and Travel *Total Amount for Item 3, at bottom of page.) 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) Human Rights Campaign Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code 1640 Rhode Island Ave NW Washington DC 20036 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 No. 3 Secretary of State PO Box 83720 Boise, ID 83720-0080 No. 4 Phone: (208) 334-2852 Fax: (208) 334-2282

Item			ion, the number of the Senate	LEGISLATIVE SUBJECT IDENTIFICATION			
4			legislative activity in which				
•	the L	obbyist was supporting or op	posing.		Subject		Subject
Subject	Code	Bill, Resolution or Other	Appropriation Bill Number	01	Agriculture, horticulture,	17	Health service, medicine, drugs
(from		Legislative Ident. Number	and Section Number		farming, and livestock		and controlled substances, health
	table)	Legislative ident. Number	and Section Number	02	Amusements, games, athletics		insurance, hospitals
10					and sports	18	Higher education
		H.B. 2 Add the Words		03	Banking, finance, credit and	19	Housing, construction, codes
		bill, relating to adding			investments	20	Insurance (excluding health
		sexual orientation and		04	Children, minors, youth,		insurance)
		gender identity to the			senior citizens	21	Labor, salaries and wages,
		state's nondiscrimination		05	Church and religion		collective bargaining
		law.		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,	26	services
					political parties	26	Natural resources, forest and
				10	Equal rights, civil rights,		forest products, fisheries, mining
				l	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	20	workmen's compensation
				13	Government, federal	29	Transportation, highways,
				14	Government, municipal	2.0	streets and roads
				15	Government, special districts	30	Utilities, communications,
				16	Government, state		televisions, radio, newspaper,
						2.1	power, CATV, gas
						31	Other (please specify)
					ERTIFICATION: I hereby certify the orrect statement in accordance with S		
	Identif	y any rule, ratemaking decisi	on procurement		Electronically signed		5/14/2015
Item 5	contra	ct bid or bid process, financia obbyist was supporting or opp	l services agreement or	_			Date
				Er	nployer No. 1 signature		Date
				Er	mployer No. 2 signature		Date
				Er	nployer No. 3 signature		Date
] Er	nployer No. 4 signature		Date