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State of Idaho
Lawrence DeWary
Secretary of State

LOBBYIST MONTHLY REPORT FORM

For the month of:
L-3 LOBBYISTS
(Sec. 67-6619)



Page _____ of _____ Pages
THIS SPACE FOR OFFICIAL USE ONLY

15 FEB 12 PM 3:41
DEPARTMENT OF STATE
STATE OF IDAHO

Libby/Ingram and other persons and organizations
Altria Client Services, Inc and its Affiliates
1415 L Street, Suite 1150
Sacramento, CA 95814

Delivered on: 2/10/15
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Item	Category of Expenditure Reimbursed Travel, Living and Travel Expenses Relating to Lobbying Activity The Net Amount to be Reported	Total Amount for All Employers	Employer No.			
			1	2	3	4
Employment:		\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Food and Lodging:		\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Travel:		\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Advertising:		\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Telephone:		\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00
Other Expenses or Services:		\$ 5,750.00	\$ 5,750.00	\$ 0.00	\$ 0.00	\$ 0.00
Total		\$ 5,750.00	\$ 5,750.00	\$ 0.00	\$ 0.00	\$ 0.00

When the number of employees you are reporting for expenditure type L-2 is zero, the field is left blank for a monthly/occasional. As indicated on Page 1.

The number of total expenditures of more than one thousand five hundred five dollars (\$1,005) for a lobbyist or other holder of public office, executive officials and most tier(1) of their households.

Item	Date	Employer	Name of Employer, Public and Nonpublic, and Members in Group
2		NONE	

Continued on reverse page(s)

INSTRUCTIONS

Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code.

Filing deadline: Monthly reports due within fifteen (15) days of the month for activities of the past month.

TO BE FILLED WITH

Lobbyist: Lawrence DeWary
Secretary of State
PO Box 83720
Boise, ID 83720-0080
Phone: (208) 334-2833 Fax: (208) 334-2263

Item 1: Altria Client Services, Inc and its Affiliates
1415 L Street, Suite 1150, Sacramento, CA 95814

Item 2

Item 3

Item 4

Item 4	Subject matter of proposed legislation, the number of the Senate or House Bill, Resolution or other legislative proposal in which the legislation appears, or proposed.	Appropriation Bill Number and Section Number
5	Identify any rule, statutory decision, governmental, executive, or judicial process, financial transfer or bond liability was reported to or opposed.	

EXPLANATIVE SUBJECT IDENTIFICATION

- | | | | |
|----|--|----|--|
| 01 | Child Support | 01 | Adult and juvenile, family, and juvenile |
| 02 | Adult and juvenile, family, and juvenile | 02 | Armed forces, general, education |
| 03 | Armed forces, general, education | 03 | Child, care, general and |
| 04 | Child, care, general and | 04 | Child, care, youth, social services |
| 05 | Child, care, youth, social services | 05 | Child, care, youth, social services |
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CERTIFICATION: I hereby certify that the above is a true, complete and correct statement in accordance with Sections 67-6204 (b)(1) & (c)(1).

[Signature]
Date: 2/11/15

01 Child Support
02 Adult and juvenile, family, and juvenile
03 Armed forces, general, education
04 Child, care, general and
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