Rev. 12/2012

## LOBBYIST MONTHLY REPORT FORM



5252

**State of Idaho** Lawerence Denney

Secretary of State

Phone: (208) 334-2852 Fax: (208) 334-2282

To Be Filed By:

L-3 LOBBYISTS (Sec. 67-6619)

 $\begin{array}{ccc} Page \underline{\hspace{0.5cm}} of \underline{\hspace{0.5cm}} Page(s) \\ \text{THIS SPACE FOR OFFICE USE ONLY} \end{array}$ 

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SECRETARY OF STATE STATE OF IDAHO

		pe or print clear e instructions at													
Lobbyist's name and permanent business address  Emily McClure  5538 S. Zonetailed Way							Date prepared 4/15/2015			Period covered month ending					
Boise, ID 83716											(Mo.)	(Day)	(Yr.)		
								;	3	31	2015				
Item 1	Totals	of all reportal	ole expenditures made of	or incurred b	y Lobb	oyist or	r by ]	Lobbyist's Empl	oyer on be	half of l	Lobby	ist's Employ	er.		
Ca Reimbu		penditure iving and Travel obbying Activity	*Total Amount for All Employers		roportionate amounts contributed by each employer (Ide tem 3, at bottom of page.)						dentify employers, under				
	Not Have to b		1 7	Employer No. 1		1	Employer No. 2		Emplo	Employer No. 3 Emplo		Employer	No. 4		
Entertai Food an	nment d Refreshme	ent	\$ \$292.36	\$_\$0.00			\$_\$104.24		\$ \$0.00	\$_\$0.00		\$_\$0.00			
Living A	Accommodat	tions	\$0.00	\$0.00			\$0.00		\$0.00			\$0.00			
Advertis	sing		\$0.00	\$0.00			\$0.00		\$0.00			\$0.00			
Travel			\$0.00	\$0.00			\$0.00		\$0.00			\$0.00			
Telepho	ne		\$0.00	\$0.00			\$0.00		\$0.00			\$0.00			
Other E	xpenses or S	ervices	\$0.00	\$0.00			\$0.00		\$0.00			\$0.00			
*Whon t	ha number of	Total	\$_\$292.36	\$ \$0.00				5104.24	\$_\$0.00			\$ \$0.00			
· when t	The totals	of each expend	re reporting for requires n liture of more than one										ve officia		
Item-	Date	nd member(s) of their household.  Date Place		Amo		mount				ors, Public and Executive Officials ehold Members in Group			ials		
	Continued on a	attached page(s)													
Continued on attached page(s)  INSTRUCTIONS						Iten 3		Employer(s) Name(s) and Address(es)							
Who should file this form: Any lobbyist registered unde 67-6617 Idaho Code  Filing deadline: Monthly reports due within fifteen (15) month for activities of the past month.						No. 1	One Amgen Center Dr Thousand Oaks CA 91320 USA Idaho Charter School Network								
TO BE FILED WITH:  Lawerence Denney Secretary of State PO Box 83720						No. 3  Idaho Medical Association  No. 3  305 W Jefferson St Boise ID 83702 USA  March of Dimes									
Boise, ID 83720-0080							No. 4								

800 W Main, Suite 1330 Boise ID 83702 USA

	Subi	ect matter of proposed legislat	ion the number of the Senate	LEGISLATIVE SUBJECT IDENTIFICATION			
Item		ouse Bill, Resolution or other			EEGISEATI VE SCI	JECI	DENTIFICATION
4		obbyist was supporting or opp		Code	Subject	Code	Subject
	l the L	obbyist was supporting or op	posing.	01	Agriculture, horticulture,	17	Health service, medicine, drugs
Subject	Code	Bill, Resolution or Other	Appropriation Bill Number	"	farming, and livestock	1,7	and controlled substances, health
(from		Legislative Ident. Number	and Section Number	02	Amusements, games, athletics		insurance, hospitals
8, 17		H.B. 177, H.B. 309		02	and sports	18	Higher education
0, 17				03	Banking, finance, credit and	19	Housing, construction, codes
				03	investments	20	Insurance (excluding health
				04	Children, minors, youth,	20	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)
							4 1 3/
					CERTIFICATION: I hereby certify	hat the a	bove is a true, complete and
	Idonti	fy any rule, ratemaking decision	on produrement contract	1 (	correct statement in accordance with	Section	67-6624 <b>Idaho Code.</b>
Item			s or bond lobbyist was support-				
5	1	opposing.	s of boild lobbyist was support-				
	ilig oi	opposing.			Electronically signed		4/15/2015
				1	Lobbyist signature		Date
				,	2000 just bigilatare		Date

## **Lobbyist Report Form Attachment**

Lobbyist's name and permanent business address

Emily McClure 5538 S. Zonetailed Way Boise, ID 83716

Entertainment Food & Refreshment	Living Accommodations	Advertising	Travel	Telephone	Other Expenses or Services	Employer Total
\$188.12	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$188.12
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
	Food & Refreshment \$188.12 \$0.00	Food & Refreshment         Accommodations           \$188.12         \$0.00           \$0.00         \$0.00	Food & Refreshment         Accommodations         Advertising           \$188.12         \$0.00         \$0.00           \$0.00         \$0.00         \$0.00	Food & Refreshment         Accommodations         Advertising         Travel           \$188.12         \$0.00         \$0.00         \$0.00           \$0.00         \$0.00         \$0.00	Food & Refreshment         Accommodations         Advertising         Travel         Telephone           \$188.12         \$0.00         \$0.00         \$0.00         \$0.00           \$0.00         \$0.00         \$0.00         \$0.00	Food & Refreshment         Accommodations         Advertising         Travel         Telephone         Expenses or Services           \$188.12         \$0.00         \$0.00         \$0.00         \$0.00           \$0.00         \$0.00         \$0.00         \$0.00

Employer No.	Employer Name(s)	Employer Address(es)
No.5	Novartis Pharmaceuticals Corporation	One Health Plaza, 701/433 East Hanover NJ 07936
No.6	Riley & Associates, L.L.C.	10392 Morris Road Hayden Lake ID 83835 USA
No.7	Upstart (Waterford Institute)	1590 East 9400 Sandy UT 84093 USA