

**LOBBYIST MONTHLY REPORT FORM**



**State of Idaho**  
Lawrence Denney  
Secretary of State

To Be Filed By:  
**L-3** LOBBYISTS  
(Sec. 67-6619)

16 APR 08 AM 11:16  
SECRETARY OF STATE  
STATE OF IDAHO

6716

(Type or print clearly in black ink)  
See instructions at bottom of page

Lobbyist's name and permanent business address <b>John B Duvall</b> PO Box 202 Weiser, ID 83672	Date prepared 4/8/2016	Period covered <input checked="" type="checkbox"/> month ending (Mo.) (Day) (Yr.) <b>3</b>   <b>31</b>   <b>2016</b>
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Item 1	Totals of all reportable expenditures made or incurred by Lobbyist or by Lobbyist's Employer on behalf of Lobbyist's Employer.				
Category of Expenditure <small>Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported</small>	*Total Amount for All Employers	Proportionate amounts contributed by each employer (Identify employers, under Item 3, at bottom of page.)			
		Employer No. 1	Employer No. 2	Employer No. 3	Employer No. 4
Entertainment	\$ \$0.00	\$ \$0.00	\$ \$0.00	\$ \$0.00	\$ \$0.00
Food and Refreshment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Living Accommodations	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Advertising	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Travel	\$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	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
<b>Total</b>	<b>\$ \$0.00</b>	<b>\$ \$0.00</b>	<b>\$ \$0.00</b>	<b>\$ \$0.00</b>	<b>\$ \$0.00</b>

\*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.

Item- 2	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.			
Date	Place	Amount	Names of Legislators, Public and Executive Officials and Household Members in Group	

Continued on attached page(s)

<p><b>INSTRUCTIONS</b></p> <p><b>Who should file this form:</b> Any lobbyist registered under Section 67-6617 Idaho Code</p> <p><b>Filing deadline:</b> Monthly reports due within fifteen (15) days of the month for activities of the past month.</p> <p>TO BE FILED WITH:</p> <p style="text-align: center;">Lawrence Denney Secretary of State PO Box 83720 Boise, ID 83720-0080 Phone: (208) 334-2852 Fax: (208) 334-2282</p>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 10%; text-align: center;">Item 3</th> <th style="text-align: center;">Employer(s) Name(s) and Address(es)</th> </tr> </thead> <tbody> <tr> <td style="text-align: center;">No. 1</td> <td>Action Truck Brokerage PO Box 202 Weiser ID 83672 USA</td> </tr> <tr> <td style="text-align: center;">No. 2</td> <td>Angel Wings Network Inc PO Box 54 Weiser ID 83672 USA</td> </tr> <tr> <td style="text-align: center;">No. 3</td> <td>Duvall Surety Inc PO Box 202 Weiser ID 83672 USA</td> </tr> <tr> <td style="text-align: center;">No. 4</td> <td>JBD Enterprises Inc PO Box 202 Weiser ID 83672 USA</td> </tr> </tbody> </table>	Item 3	Employer(s) Name(s) and Address(es)	No. 1	Action Truck Brokerage PO Box 202 Weiser ID 83672 USA	No. 2	Angel Wings Network Inc PO Box 54 Weiser ID 83672 USA	No. 3	Duvall Surety Inc PO Box 202 Weiser ID 83672 USA	No. 4	JBD Enterprises Inc PO Box 202 Weiser ID 83672 USA
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Item 4	Subject matter of proposed legislation, the number of the Senate or House Bill, Resolution or other legislative activity in which the Lobbyist was supporting or opposing.		LEGISLATIVE SUBJECT IDENTIFICATION																																																																					
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Item 5	Identify any rule, ratemaking decision, procurement, contract, bid or bid process, financial services or bond lobbyist was supporting or opposing.		<p>CERTIFICATION: I hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 <b>Idaho Code</b>.</p> <p><u>Electronically signed</u> <span style="float: right;"><u>4/8/2016</u></span></p> <p>Lobbyist signature <span style="float: right;">Date</span></p>																																																																					



Employer No.	Employer Name(s)	Employer Address(es)
No.5	Professional Bail Agents of Idaho	PO Box 1003 Mountain Home ID 83647 USA

Date	Place	Amount	Names of Legislators, Public and Executive Officials and Household Members in Group