Rev. 12/2016

## LOBBYIST MONTHLY REPORT FORM



9231

State of Idaho Lawerence Denney Secretary of State

To Be Filed By:

LOBBYISTS (Sec. 67-6619)

Page\_\_\_\_of\_\_\_Page(s) THIS SPACE FOR OFFICE USE ONLY

18 APR 16 PM 01:03

**SECRETARY OF STATE** STATE OF IDAHO

(Type or print clearly in black ink)

	See instruction	s at bo	ottom of page									
Sarah	s name and permanent bu  Bettwieser	siness	address			- 1	ite prej /16/2			Period o	month en	ding
	x 2110 ID 83701									(Ma)	(Day)	(V.,
,										(Mo.)	31	(Yr.) 2018
Item												
1		ortabl	e expenditures made o		_							yer.
Reimbu Expenses	tegory of Expenditure rsed Personal Living and Tra- s Pertaining to Lobbying Acti		*Total Amount for All Employers	Item 3, at 1	bottom	of pag	ge.)	ted by each emplo	T		Employer	No. 4
	Not Have to be Reported	+		Employ	er No.	1	E	mployer No. 2	Employer	NO. 3	Employer	NO. 4
Entertaiı Food an	nment d Refreshment		\$_\$0.00	\$_\$0.00	)		\$_\$(	0.00	\$_\$0.00		\$ \$0.00	
Living A	Accommodations		\$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	0.00	\$0.00		\$0.00	
Other Ex	xpenses or Services		\$0.00	\$0.00	)		\$0	0.00	\$0.00		\$0.00	
	Tota	1	\$_\$0.00	\$ \$0.00	)		\$_\$(	0.00	\$ \$0.00		\$_\$0.00	
*When the	The totals of each exp and member(s) of the	endit	ture of more than one					a legislator, oth		ıblic offi	ce, executiv	
2	Date		Place		A	mount			and Household N			
	Continued on attached pag	e(s)										
	II	NSTR	RUCTIONS			Iten 3		Er	mployer(s) Name	e(s) and Ac	ldress(es)	
Who	should file this form		/ lobbyist registered un	nder Section	l	No. 1		AC 2 Wynnton Rd (	Columbus GA 3	1999 US	A	
	ng deadline: Monthly month for E FILED WITH:	_	ts due within fifteen (1) vities of the past month		he	No. 2		no Bankers Asso Box 683 Boise				
	S	Secret PO E	ence Denney ary of State Box 83720			No. 3		no Financial Ser Box 2110 Boise				
Boise, ID 83720-0080 elections@sos.idaho.gov Phone: (208) 334-2852 Fax: (208) 334-2282						No. 4	Magellan Healthcare, Inc Vo. 4  1 W Broad St Ste 100 Bethlehem PA 18018 USA					

Item	Subject matter of proposed legislation, the number of the Senate			LEGISLATIVE SUBJECT IDENTIFICATION						
4	of House Bill, Resolution of other regislative activity in which					<i>a</i> 1				
7	the I	obbyist was supporting or opposition	posing.	1	Subject		Subject			
Subjec	t Codo	Bill, Resolution or Other	Appropriation Bill Number	- 01	Agriculture, horticulture,	17	Health service, medicine, drugs			
(from		Legislative Ident. Number	and Section Number	0.2	farming, and livestock		and controlled substances, health			
(110111	table)		and Section Number	- 02	Amusements, games, athletics	10	insurance, hospitals			
		H.B. 464, H.B. 495		0.2	and sports	18	Higher education			
		H.B. 338, H.B. 488 H.B. 506, H.B. 554		03	Banking, finance, credit and	19	Housing, construction, codes			
		H.B. 536, H.B. 621		0.4	investments	20	Insurance (excluding health			
		H.B. 624, H.B. 658		04	Children, minors, youth,	21	insurance)			
		H.B. 659, H.B. 615		0.5	senior citizens	21	Labor, salaries and wages,			
				05	Church and religion Consumer affairs	22	collective bargaining			
						22	Law enforcement, courts,			
				07	Ecology, environment, pollution, conservation, zoning, land and	23	judges, crimes, prisons License, permits			
					water use	23 24	Liquor			
				08	Education	25	Manufacturing, distribution and			
				09	Elections, campaigns, voting,	23	services			
				09	political parties	26	Natural resources, forest and			
				10	Equal rights, civil rights,	20	forest products, fisheries, mining			
				10	minority affairs		and mining products			
				11	Government, financing,	27	Public lands, parks, recreation			
				''	taxation, revenue, budget,	28	Social insurance, unemployment			
					appropriations, bids, fees, funds	20	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,			
					<b>,</b>		power, CATV, gas			
						31	Other (please specify)			
							1 3/			
					CERTIFICATION: I hereby certify the					
	Identi	fy any rule, ratemaking decision	on procurement contract	٦ ،	correct statement in accordance with	Section	67-6624 <b>Idaho Code.</b>			
Item			s or bond lobbyist was support-							
5		opposing.	or conditional support							
	mg or	opposing.		+	Electronically signed		4/16/2018			
					Lobbyist signature		Date			

## **Lobbyist Report Form Attachment**

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Sarah Bettwieser PO Box 2110 Boise, ID 83701

Employer No.	Entertainment Food & Refreshment	Living Accommodations	Advertising	Travel	Telephone	Other Expenses or Services	Employer Total
No.5	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
No.6	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
No.7	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Employer No.	Employer Name(s)	Employer Address(es)
No.5	St Luke's Health System	420 W Idaho St Boise ID 83702 USA
No.6	State Farm Insurance	One State Farm Plaza A-3 Chino CA 91710 USA
No.7	Union Pacific Railroad	1400 Douglas St Omaha NE 68179 USA