Rev. 12/2016

LOBBYIST MONTHLY REPORT FORM



9260

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 12 PM 02:49

SECRETARY OF STATE STATE OF IDAHO

(Type or print clearly in black ink)

| Amanda J Klump 1415 L S1 Sacramento, CA 95814 Variable Variab | | See | e instructions at | | | | | | | | | | | |
|---|---|----------------|-------------------|-----------------------------|-----------------|---------------|--------------------|-------------------------------------|------------------|--------------------|----------------|---------------|--|--|
| Totals of all reportable expenditures made or incurred by Lobbyist's Employer on behalf of Lobbyist's Employer. Category of Expenditure Reinhursed Present Living and Travel Expenses Pertained to Joshying Activity Bo Not Have to be Reported Enternationed. | Lobbyist's name and permanent business address | | | | | | Date prepared | | | | Period covered | | | |
| Totals of all reportable expenditures made or incurred by Lobbyist's Employer on behalf of Lobbyist's Employer. Category of Expenditure Rembined Personal Lyring and Tired Expenses Portaining to Lobbyigh Activity Frogortionate amounts contributed by each employer (Identify employers, under Expenses Portaining to Lobbying Activity Frogortionate amounts contributed by each employer (Identify employers, under Expenses Portaining to Lobbying Activity Frogortionate amounts contributed by each employer (Identify employers, under Expenses Portaining to Lobbying Activity Frogortionate amounts contributed by each employer (Identify employers, under Expenses Portaining to Lobbying Activity Frogortionate amounts contributed by each employer (Identify employers, under Expenses Portaining to Lobbying Activity Frogortionate amounts contributed by each employer (Identify employers, under Expenses Portaining to Lobbying Activity Frogortionate amounts contributed by each employer (Identify employers, under Expenses Portaining to Lobbying Activity Frogortionate amounts contributed by each employer (Identify employers, under Expenses International Program of Page) Frogortionate amounts contributed by each employer (Identify employers, under Expenses International Program of Page) Frogortionate amounts contributed by each employer (Identify employers, under Expenses International Program of Page) Frogortionate amounts contributed by each employer (Identify employers, under Expenses International Program of Page) Frogortionate amounts contributed by each employer (Identify employers, under Expenses International Page) Frogortionate amounts contributed by each employer (Identify employers, under Expenses International Page) Frogortionate amounts contributed by each employer (Identify employers, under Expenses International Page) Frogortionate amounts contributed by each employer (Identify employers, under Expenses International Page) Frogortionate amounts contributed by each employer (Identify emp | | | | | | | 4/11/2018 | | | month ending | | | | |
| Totals of all reportable expenditures made or incurred by Lobbyist's Employer on behalf of Lobbyist's Employer on the Lobby Employer | | | | | | | | | | (Ma |) (Day) | (Vr.) | | |
| Totals of all reportable expenditures made or incurred by Lobbyist's Employer on behalf of Lobbyist's Employer. Category of Expenditure Reimbursed Personal Living and Travel Expenses Personal Living and Travel Electratisment | | , | | | | | | | | ` | | 1 | | |
| Category of Expenditure Reinhouse Personal Living and Tasvel Entertainment Food and Refreshment Living Accommodations Advertising Fravel Total Total Total S.\$0.00 S.\$0.0 | Tr | | | | | | | | | | 31 | 2016 | | |
| Total Amount for September Total Amount for T | | Totals | of all reportal | ble expenditures made of | _ | - | - | - | - | | | yer. | | |
| All Employers Employer No. 1 Employer No. 2 Employer No. 3 Employer No. 4 | Category of Expenditure Proportionate ar | | | | | | | uted by each empl | oyer (Identify 6 | employers | s, under | | | |
| Entertainment Food and Refreshment Food and Refreshment Food and Refreshment S \$0.00 S | Expenses Pertaining to Lobbying Activity | | | | | | | | | | N. 4 | | | |
| Food and Refreshment Living Accommodations Advertising S0.00 \$0.00 | | | Reported | | Employer No. 1 | | Employer No. 2 Emp | | Employer | loyer No. 3 Employ | | r No. 4 | | |
| Living Accommodations \$0.00 \$0.00 \$0.00 \$0.00 Travel \$0.00 \$0.00 Solution Soluti | | | nf | \$ \$0.00 | \$ \$0.00 |) | \$ | | S | | S | | | |
| Advertising So.00 \$0.00 \$0.00 Travel \$0.00 \$0.00 So.00 | | | | · | | | - [_] | | · | | Ψ | | | |
| Travel So.00 \$0.00 | _ | | 10115 | | | | - | | | | | | | |
| Total \$.\$5,750.00 \$.5,750.00 \$.\$5,750.00 \$.\$ \$. \$. \$. \$. \$. \$. \$. \$. \$. \$. \$. \$. | | sing | | | | | - | | | | | | | |
| Other Expenses or Services Total \$\$5,750.00 \$\$5,750.00 \$\$ *\$5,750.00 \$\$ Total \$\$\$5,750.00 \$\$ *\$5,750.00 \$\$ | | | | | | | - | | | | | | | |
| *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 ten dollars (\$110) 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 INSTRUCTIONS Item 3 Employer(s) Name(s) and Address(es) 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 FILED WITH: | | | | | | | - | | | | | | | |
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| *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 ten dollars (\$110) for a legislator, other holder of public office, executive officials and member(s) of their household. Date | | | | | | | | | | | | | | |
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| The totals of each expenditure of more than one hundred ten dollars (\$110) 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 INSTRUCTIONS Item 3 Employer(s) Name(s) and Address(es) 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 FILED WITH: | *When t | he number of | emplovers you a | re reporting for requires m | ultiple L-2 for | rms to be fil | ed a tot | al amount for all e | mployers should | d be entere | ed on Page 1. | | | |
| Continued on attached page(s) Item 3 Employer(s) Name(s) and Address(es) | | The totals of | of each expend | liture of more than one | | | | | | | | ve offi cials | | |
| Amount and Household Members in Group Continued on attached page(s) INSTRUCTIONS Item 3 Employer(s) Name(s) and Address(es) Altria Client Services LLC & Its Affiliates No. 1 Altria Client Services LLC & Its Affiliates No. 1 1415 L St Ste 1150 Sacramento CA 95814 USA No. 2 TO BE FILED WITH: | Item- | and member | er(s) of their ho | ousehold. | | | | N | CI :14 D | 11: 15 | O.c. | . 1 | | |
| INSTRUCTIONS Item 3 Employer(s) Name(s) and Address(es) Altria Client Services LLC & Its Affiliates No. 1 Altria Client Services LLC & Its Affiliates No. 1 1415 L St Ste 1150 Sacramento CA 95814 USA TO BE FILED WITH: | 2 | 2 Date Place | | | | Amo | | | | | | | | |
| INSTRUCTIONS Item 3 Employer(s) Name(s) and Address(es) Altria Client Services LLC & Its Affiliates No. 1 Altria Client Services LLC & Its Affiliates No. 1 1415 L St Ste 1150 Sacramento CA 95814 USA TO BE FILED WITH: | | | | | | | | | | | | | | |
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| | TO BE FILED WITH: | | | | | | | | | | | | | |
| | Lawerence Denney | | | | | | . 3 | | | | | | | |
| Secretary of State PO Box 83720 | | | | | | | | | | | | | | |
| Boise, ID 83720-0080 | | | | | | | 1 | | | | | | | |
| Phone: (208) 334-2852 Fax: (208) 334-2282 | elections@sos.idaho.gov Phone: (208) 334-2852 Fax: (208) 334-2282 | | | | | | . т | | | | | | | |

| Subject matter of proposed legislation, the number of the Senate | | | | | LEGISLATIVE SUBJECT IDENTIFICATION | | | | | | |
|--|--|---|--|--|--|-------------------------------------|---|--|--|--|--|
| Subject (from 25, 3' | the L t Code table) | Bill, Resolution or other obbyist was supporting or op. Bill, Resolution or Other Legislative Ident. Number S.C.R. 144, S.C.R. 143 S.B. 1337, S.B. 1307 S.B. 1294, S.B. 1255 H.B. 684, H.B. 694 H.B. 636, H.B. 573 H.B. 561, H.B. 558 H.B. 557, H.B. 578 H.B. 355, H.B. 397 H.B. 383, H.B. 380 H.B. 383, H.B. 381 H.B. 335 | | Code 01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16 | Subject Agriculture, horticulture, farming, and livestock Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, municipal Government, special districts Government, state | 20 21 22 23 24 25 26 27 28 29 30 31 | Health service, medicine, drugs and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads Utilities, communications, televisions, radio, newspaper, power, CATV, gas Other (please specify) Rusiness Issues | | | | |
| Item 5 | Lhid or hid process tinguical carriess or bond lobbyist was support. | | | | CERTIFICATION: I hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 Idaho Code. Electronically signed 4/11/2018 | | | | | | |
| n/a | | | | | Lobbyist signature Date | | | | | | |