DISCLOSURE OF LOBBYING ACTIVITIES

Approved by OMB

Complete this form to disclose lobbying activities pursuant to 31 U.S.C.1352

4040-0013

1. * Type of Federal Action:	2. * Status of Federal Action:	3. * Report Type:
a. contract	a. bid/offer/application	a. initial filing
b. grant	b. initial award	b. material change
c. cooperative agreement	c. post-award	
d. loan		
e. loan guarantee f. loan insurance		
	F::414	
4. Name and Address of Reporting	Entity:	
Prime SubAwardee Tier if known:		
* Name		
* Street 1	Street 2	
* City	State	Zip
Congressional District, if known:		
5. If Reporting Entity in No.4 is Subawardee, Enter Name and Address of Prime:		
*Name Idaho Office of Energy and Mineral Resources		
* Street 1	Street 2	
304 N. 8th Street, Suite 250	PO Box 83720	
* City Boise	State ID: Idaho	Zip ₈₃₇₀₂
Congressional District, if known: 2nd		
6. * Federal Department/Agency:	7. * Federal Prog	gram Name/Description:
DOE/NETL Preventing Outages and Enhancing the Resilience of the Electric Grid		
CFDA Number, if applicable:		
8. Federal Action Number, if known: 9. Award Amount, if known:		
,	\$	
10. a. Name and Address of Lobbying Registrant:		
Prefix		
* Last Name Suffix		
* Street 2		
* City	State	Zip
City	State	2.10
b. Individual Performing Services (including address if different from No. 10a)		
Prefix		
* Last Name Suffix		
* Street 2		
* City	State	Zip
11. Information requested through this form is authorized by title 31 U.S.C. section 1352. This disclosure of lobbying activities is a material representation of fact upon which reliance was placed by the tier above when the transaction was made or entered into. This disclosure is required pursuant to 31 U.S.C. 1352. This information will be reported to		
the Congress semi-annually and will be available for public inspection. Any person who fails to file the required disclosure shall be subject to a civil penalty of not less than \$10,000 and not more than \$100,000 for each such failure.		
* Signature:		
*Name: Prefix *First Nam	e Middle N	ame
* Last Name	Sui	ffix
Last Parite	Sui	····
Title:	Telephone No.:	Date:
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