## **State Elected Official Financial Disclosure Form**

Name of Official:	Bob Ide
Office Held:	Sanator
	Senate District (if applicable): 29
	House District (if applicable):

Business Address:	159 N. Wolcott St., Suite 304
Business City, State and Zip:	Casper, WY 82601
Business Phone:	(307) 235-2500

Home Address:

Home City, State and Zip:

3838 Garden Creek Road Cosper, WY 82601 (307) 472-0233

Home Phone:

**RECEIVED** By Wyoming Secretary of State at 9:31 am, Jan 17, 2025

## I. Offices, Directorships and Employment

(Please use additional sheets as necessary.)

a) List the *offices* held in business enterprises. This includes partnerships.
 Office Held Name and Address of Enterprise

Managing Member of all Seven (7) LL&'s

Ide-Ohio, LLC KC Properties, LLC Ide - Superior, LLC Downtown SelfStorage, LLC Ide-Petroleum, LIC Ide-Mobil, LLC Cowboy Holdings, LLC

b) List any *directorship positions* held in business enterprises. Name of Enterprise Address of Enterprise

c) Salaried Employment Job Title

Name and Address of Enterprise

II. Sources of Income (Please use additional sheets as necessary.)						
Employment Name of Employer	Address of Employer					
Solf	P.O. Box 1595, CASPER, WY 826					
business interest (W.S. 9-13-108 (c) states	resses of all business entities in which you have "Name and address of all business entities" (6) of the entity is owned, or sole proprietorship fr					
Name of Business Entity	Address of Business Entity					
See attached	see attached					
InvestmentsA.Any security or interest earnings	Income Earned					
B. Real estate, leases, royalties	$\bigvee$ Yes No					
Other (describe generally):						

## **III.** Contracts

(Please use additional sheets as necessary.)

a) List all state entities you, or your business enterprise in which you own ten percent (10%) or more interest, has a contract with for services and supplies in an amount greater than five thousand dollars (\$5,000.00).

e of State Entity	Address of State Entity
:	
ctive Date:	
6 <sup>th</sup> day of <u>Januar</u> is accurate.	$\frac{4}{2025}$ , I affirm that the preceding Signature
	se provide the following information  ription: ctive Date: n of Contract:

II Sources of INCOME

b) Business Interests

Name of Business Entity:

I de Land & Leasing Company	P.O. Box 1595, C	asper, wh	182602
Ide Land & Loasing Company Ide-Ohio, LLC	20	10	te te
KC Properties, LLC	U	Ċ?	Ci .
Ide-Superior, LLC	(f	U	C e
Downtown Self Storage, LLC		(c	Li
Ide-Petroleum, LLC	J¢	Lé	<u> </u>
Ide - Mobil, Lic	14	Ċ ſ	28
Couboy Holdings, LLC	il .	(j	ч
J J			