

Inland Northwest Partners Presents

Fall Economic Forecast Meeting

<p>Headline Sponsor</p> <p>Spokane International Airport</p>		<p>Inland Northwest Partners 2024 Fall Meeting</p> <p>October 29, 2024</p> <p>CenterPlace 2426 N Discovery Place Spokane Valley, WA 99216</p>	
<p>Agenda</p>		<p>INP FOUNDING INVESTOR Avista Corporation</p>	
8:30 – 9:00 a.m.	Registration and light breakfast	<p>MAJOR INVESTORS</p> <p>Alaska Airlines City of Post Falls Cowles Company Idaho Central Credit Union Idaho Dept. of Commerce Spokane International Airport WA Dept. of Commerce</p>	
9:00 – 9:30 a.m.	Opening Remarks & Introductions Paul Kimmell, Chairman, INP Board of Directors		
9:30 – 10:30 a.m.	Carbon-Free Electricity Policies – Impacts & Perspectives Rick Dunn, General Manager, Benton PUD		
10:30 – 10:45 a.m.	Break	<p>CONTRIBUTING INVESTORS</p> <p>Bank of America Community & Economic Development-WSU Extension Garco Construction Mountain West Bank TD&H Engineering The Spokesman Review Washington Trust Bank</p>	
10:45 – 11:30 a.m.	North Idaho: Time to Be Normal Sam Wolkenhauer, Labor Economist Idaho Department of Labor		
11:30 – 12:15 p.m.	Spokane Metro: Eastern Washington’s Largest Labor Market Hits the Doldrums Dr. Grant Forsyth, Senior Economist Avista Corporation		
12:15 – 1:00 p.m.	Lunch & Networking		
1:00 – 2:00 p.m.	A New Crew, Falling Rates, Old Questions and New Challenges John W. Mitchell, Principal M&H Economic Consultants		
2:00 – 2:30 p.m.	Demographic Drought: The Rising Storm Phil Blakenship, Lightcast		
2:30 – 3:00 p.m.	Community Reports & Concluding Remarks Paul Kimmell, Chairman, INP Board of Directors		

Cost: \$50 for INP members; \$70 for non-members (cancellations with refunds will be accepted through October 21, 2024).

To Register: Just fill out the form below and mail it, along with your pre-payment to INP, PO Box 95, Fairfield, WA 99012 or register online at www.inwp.org.

For more information: Call (509) 495-4064 or visit our website www.inwp.org.



Name _____ Email Address _____

Organization _____ Phone Number _____

Street Address _____ City _____ State _____ Zip _____

Number of People Attending _____ Amount Enclosed _____

Names/Email Addresses of People Attending _____

We will do our best to accommodate special dietary requests _____