## Rev. 12/2016

## AGENCY MONTHLY REPORT FORM



State of Idaho

Lawerence Denney Secretary of State To Be Filed By:

**A-3** 

AGENCIES (Sec. 67-6619A)

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SECRETARY OF STATE STATE OF IDAHO

(Type or print clearly in black ink)

Phone: (208) 334-2852 Fax: (208) 334-2282

See instructions at bottom of page							
Name of Agency/Office: Lewis-Clark State College							
Name of Contact: Teresa Cole, Controller					Item 1 Totals of all reportable expenditures made or incurred by the Agency or Department.		
Work Phone: (208) 792-2335					Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to	*Total Amount for	
Mailing Address: 500 8th Avenue Lewiston, ID 83501					Reported All Employer		
Date Prepared: 03/07/2018					Entertainment Food and Refreshment Living Accommodations	\$0.00	
Period Covered: (Mo.) (Day) (Yr.)  2 28 2018					Advertising  Travel		
					Telephone		
					Other Expenses or Services		
					Total	<u>\$</u> 0.00	
	The totals of each expenditure of more than one hundred ten dollars (sofficials and member(s) of their household.			ollars (\$1	10) for a legislator, other holder of	f public office, executive	
Item- 2	Date	Date Place		mount	Names of Legislators, Public and Executive Officials and Household Members in Group		
INSTRUCTIONS				Item 3	CERTIFICATION: I hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 Idaho Code.		
Who should file this form: Any State Agency or Office who is required to report interactions with the Legislative or Executive Departments under Section 67-6619A, Idaho Code.				Jusah Cole Agency Contact Signature			
Filing deadline: Monthly reports due within fifteen (15) days of the month for activities of the past month.					03/07/2017		
TO BE FILED WITH: Lawerence Denney Secretary of State PO Box 83720 Boise, ID 83720-0080 elections@sos.idaho.gov				Date			