

# AGENCY CONTACT STATEMENT

THIS SPACE FOR OFFICE USE ONLY



**State of Idaho**  
Lawrence Denney  
Secretary of State

To Be Filed By: AGENCY CONTACTS  
**A-1**

(Type or print clearly in blue or black ink)  
See instructions at bottom of page

Reporting Year **2018**

Name of Agency/ Office Contact:		
Name of Agency/Office:		
Home Phone:	Work Phone:	Cell Phone:
Mailing Address:		
email address:		

This filing is an:  Original  Amendment

Activities will be directed at:  Legislature  Executive Officials

Name and contact information of the person who will have custody of the accounts, bills, receipts, books, papers and documents required to be kept under this act.

Name:
Work Phone:
Mailing Address:
email address:

### INSTRUCTIONS

**Who should file this form:** All individuals who will be primary contact for reporting State Agency and Office activities.

**Filing deadline:** At the start of each year or before doing any activity.

**New Filing Required:** When the agency or office contact person changes.

**Filing fee:** No fee required.

TO BE FILED WITH: Lawrence Denney  
Secretary of State  
PO Box 83720  
Boise, ID 83720-0080  
elections@sos.idaho.gov  
Phone: (208) 334-2852 Fax: (208) 334-2282

Certification: I hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 Idaho Code of this law.

Agency Contact's Signature

Date