AGENCY CONTACT STATEMENT

State of Idaho
Lawerence Denney
Secretary of State

To Be Filed By: AGENCY CONTACTS

A-1

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: Lawerence 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