AGENCY ANNUAL REPORT FORM





State of Idaho

Lawerence Denney Secretary of State

To Be Filed By:

AGENCIES A-2 (Sec. 67-6619A)

_of__ _Page(s) THIS SPACE FOR OFFICE USE ONLY

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2017

elections@sos.idaho.gov Phone: (208) 334-2852 Fax: (208) 334-2282

| | | ype or print clearly in black ink) se instructions at bottom of page | | | STA | TE OF IDAHO | | | |
|--|--------------------|---|-----------|--|----------------|--|--|---------------------|----------------------------|
| Name Agen | e of cy/Office: | Idaho Correctional Ir | ndustries | | | | | | |
| Name of Contact: Andrea Sprengel | | | | | | Item 1 Totals of all reportable expenditures made or incurred by the Agency or Department. | | | |
| Work Phone: 577-5561 | | | | | | Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported Entertainment Food and Refreshment Living Accommodations Advertising Travel Telephone Other Expenses or Services *Total Amount for All Employers *Total Amount for All Employers *Indiana Amount for All Employers *Total Amount for All Employers *Indiana Amount for All Employers | | | *Total Amount for |
| Mailing Address: 1301 N. Orchard St. Suite 110 Boise, ID 83706 | | | | | | | | | All Employers |
| Date Prepared: 04/07/2017 | | | | | | | | | s |
| Period Covered: Vear ending (Mo.) (Day) (Yr.) O4 07 2017 | | | | | | | | | |
| NOTE: Totals should include all expenses for the full year. Please include all previously reported totals plus an expenses made from the end of the Legislative Session to December 31st. | | | | | | | | | 1,642.20 |
| | | | | | | | | Total | _{\$} 1,642.20 |
| · | | The totals of each expenditure of more than one hundred ten dollars (\$1) officials and member(s) of their household. | | | | | | or, other holder of | f public office, executive |
| Item- 2 | Date | Place | | | mount | Names of Legislators, Public and Executive Officials and Household Members in Group | | | |
| | | | | | | | | | |
| INSTRUCTIONS | | | | | | 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. Filing deadline: Annual report is due on January 31st. | | | | | | Malla Splengel Contact Signature | | | |
| TO BE FILED WITH: Lawerence Denney Secretary of State PO Box 83720 Boise, ID 83720-0080 | | | | | 4-7-17 Date | | | | |