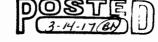
Rev. 12/2016

AGENCY MONTHLY REPORT FORM





State of Idaho

Lawerence Denney Secretary of State To Be Filed By:

A-3

AGENCIES (Sec. 67-6619A) Page___of__Page(s)
THIS SPACE FOR OFFICE USE ONLY

17 MAR 14 AM 9:51

STATE OF IDAHO

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

Name Agend	of cy/Office:	North Idaho College					
Name of Contact: Laura Rumpler Work Phone: (208) 769-3316 Mailing Address: 1000 W. Garden Ave., Coeur d'Alene, ID 83814 Date O3/13/2017 Period Monitor (Monitor) (Pay) (Yr.) Period Covered: Monitor (Monitor) (Pay) (Yr.)					Item Totals of all reportable expenditures made or incurred by the Agency or Department.		
					Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported *Total Amount for All Employers		
					Living A Adverting Travel Telepho	d Refreshment Accommodations sing ne xpenses or Services	\$752.40
		of each expenditure of more than one hur nd member(s) of their household.	ndred ten d	ollars (\$1	l 0) for a	Total legislator, other holder o	\$ 752.40 f public office, executive
Item- 2	Date	Place	А	Amount		Names of Legislators, Public and Executive Officials and Household Members in Group	
02/14/17		The Rose Room - Boise	75	752.40		ost of annual Comr neon hosted for all end	•
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. Filing deadline: Monthly reports due within fifteen (15) days of the month for activities of the past month. 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				Agency Co 03/ Date	omfact Sign	, ,	ع ا