AGENCY MONTHLY REPORT FORM





State of Idaho

Lawerence Denney Secretary of State To Be Filed By:

A-3 AGENCIES (Sec. 67-6619A)

17 MAR 14 AM 11: 34

STATE OF IDAHO

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

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Name Agen	of cy/Office:	Idaho Apple Commission					
Name of Contact: Candi Fitch					Item Totals of all reportable expenditures made or incurred by the Agency or Department.		
Work Phone: (208) 722-5111 Mailing P.O. Box 909, Parma, ID 83660					Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported *Total Amount for All Employers		
Date 03/14/2017 Prepared:					Entertainment \$40.00 Living Accommodations		
Period Covered: month ending 02 28 17					Advertising		
					Telepho Other E	ne xpenses or Services	
						Total	s <u>4</u> 0.00
Item-	The totals of each expenditure of more than one hundred ten dollars (sofficials and member(s) of their household.				10) for a	legislator, other holder of	public office, executiv
2	Date	Place	A	Amount	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.					Agency Contact Signature		
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				3-/4 Date	_		
	Phon	Boise, 1D 83720-0080 elections@sos.idaho.gov e: (208) 334-2852 Fax: (208) 334-2282					