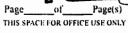
Rev. 12/2016

AGENCY MONTHLY REPORT FORM







State of Idaho

Lawerence Denney Secretary of State

To Be Filed By

A-3

AGENCIES (Sec. 67-6619A)

17 APR 10 PM 5: 18 STATE OF IDAHO

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

Boise, ID 83720-0080 elections@sos.idaho.gov Phone: (208) 334-2852 Fax: (208) 334-2282

Name Agend	e of cy/Office: Idaho	State Unive	rsity					
Name of Contact: Tana Christensen						Item Totals of all reportable expenditures made or incurred by the Agency or Department.		
Work Phone: (208) 282-3198 Mailing Address: 921 S. 8th Ave., Stop 8024, Pocatello, ID 83209						1 applying Activity Do Not Have to be		*Total Amount for All Employers
Date Prepared: 04/10/2017 Period Covered: 1 month ending 03 31 2017						Entertainment Food and Refreshment Living Accommodations Advertising Travel Telephone Other Expenses or Services		
ltem-		h expenditure of r mber(s) of their h		ne hundred to	en dollars (\$1	,	Total legislator, other holder o	
2	Date	Plac	ee		Amount		and Household Memb	
INSTRUCTIONS					Item 3	CERTIFICATION: 1 hereby certify that the above is a true, complete and correct statement in accordance with Section 67-6624 Idaho Code.		
to rep Secti Filin mont	o should file this for port interactions with ion 67-6619A. Idah ag deadline: Mont th for activities of the BE FILED WITH:	o the Legislative or E o Code. hly reports due wit	ixecutive Dep hin fifteen (1 ey e	partments und	Agency Co	and ontact Sign	Chio /10/17	tere