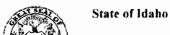
Rev. 12/2016

AGENCY MONTHLY REPORT FORM





To Be Filed By

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

Page of Page(s)
THIS SPACE FOR OFFICE USE ONLY

17 APR 21 AH 11: 40

STATE OF IDAHO

(Type or print clearly in black ink)

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

Lawerence Denney

Secretary of State

	Sec	instructions at bottom of page					
Name Agend	of cy/Office: I	daho Apple Commission					
Name Candi Fitch					Item Totals of all reportable expenditures made or incurred by the Agency or Department.		
Work Phone: (208) 722-5111					Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be *Total Amount for		
Mailing Address: P.O. Box 909, Parma, ID 83660					Reported All Employers		
Date Prepared: 04/21/2017					Entertainment Food and Refreshment Living Accommodations		
Period Covered: (Mo.) (Day) (Yr.) (Mo.) (Day) (Yr.) 17					Advertising		
					Travel		
					Telepho	ne	
					Other E	xpenses or Services	
						Total	s _{0.00}
ltem-	The totals of each expenditure of more than one hundred ten dollars (sofficials and member(s) of their household.				Names of Legislators, Public and Executive Officials		
2	Date	Date Place		mount	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.					4	121/17	
TO BE FILED WITH: Lawerence Denney Secretary of State PO Box 83720 Boise, ID 83720-0080					/		