AGENCY MONTHLY REPORT FORM

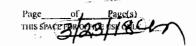


State of Idaho

Lawerence Denney Secretary of State



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



18 MAR 22 PM 2: 50
SECRETARY OF STATE
STATE OF IDAHO

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

Name Agend	of cy/Office:	Department of Environmental Qual	lity				
Name of Contact: Jack Carpenter					Item 1	Totals of all reportable expenditures made or incurred by the Agency or Department.	
Work Phone: 373-0292 Mailing Address: 1410 N Hilton Date Prepared: Period Covered: Mo. (Day) (Yr.) (Yr.) (Day) (Yr.) (Yr.) (Yr.) (Day) (Yr.) (Yr.					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 Advertise Travel Telepho	d Refreshment Accommodations sing	\$
					- Add an annual Arthur	Total	s_0.00
Item-2	The totals of each expenditure of more than one hu officials and member(s) of their household. Date Place		Amount			nes of Legislators, Public a and Household Memb	nd Executive Officials
		INSTRUCTIONS this form: Any State Agency or Office who is requ		Item 3	comple	FICATION: I hereby certite and correct statement in Idaho Code.	
to re Sect Filit mon	port interaction 67-6619, ig deadline: th for activit BE FILED W	ons with the Legislative or Executive Departments in A, Idaho Code. Monthly reports due within fifteen (15) days of the past month.	nder /	Agenty Co	intact Sign	Mature 18	