Rev. 12/2016

AGENCY MONTHLY REPORT FORM

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To Be Filed By:

A-3

AGENCIES (Sec. 67-6619A)

18 APR 11 AM 9:44
SEURETARY OF STATE
STATE OF IDAHO

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

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

State of Idaho

Lawerence Denney

Secretary of State

	See	instructions at bottom of page						
Name Agenc	of y/Office: U	Iniversity of Idaho						
Name of Contact: Linda Campos, Controller					Item Totals of all reportable expenditures made or incurred by the Agency or Department.			
Work Phone: (208) 885-6530 Mailing 875 Perimeter Drive, MS 3168, Moscow ID 83844					Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be Reported *Total Amount for All Employers			
Address: Date Prepared: Period Covered: Mo. (Day) (Yr.) (Yr					Entertainment Food and Refreshment Living Accommodations Advertising Travel Telephone			
					· ·	xpenses or Services		
						Total	s 284.19	
Item-		The totals of each expenditure of more than one hundred ten do officials and member(s) of their household. Date Place A		mount	Names of Legislators, Public and Executive Officials			
INSTRUCTIONS 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					Item 3 CERTIFICATION: I hereby certify that the above is a true complete and correct statement in accordance with Section 67-6624 Idaho Code. Linda C Campos Digitally signed by Linda C Ca			
								Date