Rev. 12	2/2016	AGENCY MONTHLY REP				ORT FORM		PageOfPage(s) THIS SPACE FOR OFFICE USE ONLY	
		State of Idaho Lawerence Denney Secretary of State	To Be Filed I A-3	AGEN	NCIES 67-6619/	A)	18 APR SECRETA STATE	5 AM	11: 18
		Type or print clearly in black ink) See instructions at bottom of page							· ·
Nam Agen	e of cy/Office:	Lewis-Clark State Colleg	e						
Name of Contact: Teresa Cole, Controller						Item Totals of all reportable expenditures made or 1 incurred by the Agency or Department.			
Work Phone: (208) 792-2335						Category of Expenditure Reimbursed Personal Living and Travel Expenses Pertaining to Lobbying Activity Do Not Have to be			
Mailing Address: 500 8th Avenue Lewiston, ID 83501						Reported All Employers Entertainment Food and Refreshment \$0.00 Living Accommodations			
Date Prepared: 04/05/2018									\$ <u>0.00</u>
Period Covered: Mo.) (Day) (Yr.) 3 31 2018						Advertising			
						Travel Telephor Other Ex	ne openses or Service	25	
					ſ			Total	<u>\$</u> 0.00
Item- 2	The totals of each expenditure of more than one hundred ten dollars (\$1 officials and member(s) of their household.					0) for a l	egislator, other l	nolder of	f public office, executive
	Date	Place	Place			Names of Legislators, Public and Executive Officials and Household Members in Group			
INSTRUCTIONS					3	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.					Susa R. Cole gency Contact Signature				
Filing deadline: Monthly reports due within fifteen (15) days of the						L/05/2018			
TO BE FILED WITH: Lawerence Denney Secretary of State PO Box 83720 Boise, ID 83720-0080 elections@sos.idaho.gov Phone: (208) 334-2852 Fax: (208) 334-2282									