



**PUBLIC DISCLOSURE COMMISSION**  
 711 CAPITOL WAY RM 206  
 PO BOX 40908  
 OLYMPIA WA 98504-0908  
 (360) 753-1111  
 TOLL FREE 1-877-601-2828

**L2**  
 1/02

PDC OFFICE USE

**Lobbyist Monthly Expense Report**  
 (as required by Chapter 397, 1995 Session Laws)

**DATE FILED PDC**  
**JAN 29 2019**

1. Lobbyist Name  
**T.K. Bentler-Public Affairs Associates**

Mailing Address  
**5838 Athens Beach Road, N.W.**

City **Olympia** State **WA** Zip + 4 **98502**

New Address?  Yes  No

2. This report is for the period **January 2019** (Month) (Year)  
 This report corrects or amends the report for **January 2019** (Month) (Year)

Business Telephone  
**(360) 789 -1176**

**ALL COMPLETE THIS PART**

**COMPLETE IF YOU HAVE MORE THAN ONE EMPLOYER**

Expense Category	TOTAL AMOUNT THIS MONTH All employers plus own expense (Columns a + b + c + d and attached pages)	Amounts paid from lobbyist's own funds, not reimbursed or attributed to an employer. Column A	Amount attributed to each employer		
			Employer No. 1 Column B	Employer No. 2 Column C	Employer No. 3 Column D
3. COMPENSATION earned from employer for lobbying this period (salary, wages, retainer)	\$ 53,513.75		\$ 6,250.00	\$ 1,300.00	\$ 4,000.00
4. PERSONAL EXPENSES for travel, food and refreshments	510.00	\$			120.00
5. ENTERTAINMENT, GRATUITIES, TRAVEL, SEMINARS for state officials, employees, their families (See #15)					
6. CONTRIBUTIONS to elected officials, candidates and political committees (See #16)					
7. ADVERTISING, PRINTING, INFORMATIONAL LITERATURE					
8. POLITICAL ADS, PUBLIC RELATIONS, POLLING, TELEMARKETING, ETC. (See #17)					
9. OTHER EXPENSES AND SERVICES (See #18)					
10. TOTAL COMPENSATION AND EXPENSES INCURRED THIS MONTH	\$ 54,023.75	\$	\$ 6,250.00	\$ 1,300.00	\$ 4,120.00

(Attach additional page(s) if you lobby for more than three employers.)

11. EMPLOYERS' NAMES

No. 1 (B) Metro Parks of Tacoma

No. 2 (C) Washington State Funeral Directors Association

No. 3 (D) Cannabis Organization of Retail Establishments

12. Subject matter of proposed legislation or other legislative activity or rulemaking the lobbyist was supporting or opposing.

Subject Matter, Issue or Bill No. **Park Funding** Legislative Committee or State Agency Considering Matter **Capitol Budget** Employer Represented **MPT**

**Age Restriction/Ci** **H Health** **WANS**

Continued on attached pages

13. Of the time spent lobbying, what percentage was devoted to lobbying: the Legislature 90% State Agencies 10%.

14. TERMINATION: (COMPLETE THIS ITEM ONLY IF YOU WISH TO TERMINATE YOUR REGISTRATION)

Date registration ends: **12/31/18** Employer's name: **Washington Assn. of Neighborhood Stores**

I understand that an L-2 report is required for any month or portion thereof in which I am a registered lobbyist. I also understand that once I have terminated my registration, I must file a new registration prior to lobbying for that employer in the future. All registrations terminate automatically on the second Monday in January of each odd numbered year.

**CERTIFICATION**

I certify that this report is true and complete to the best of my knowledge.

LOBBYIST SIGNATURE

DATE **1/29/19**

CONTINUE ON REVERSE

**Lobbyist Monthly Expense Report**  
(as required by Chapter 397, 1995 Session Laws)

**DATE FILED PDC**  
**JAN 28 2019**

1. Lobbyist Name  
**T.K. Bentler-Public Affairs Associates**

Mailing Address  
**5838 Athens Beach Road, N.W.**

City **Olympia** State **WA** Zip + 4 **98502** New Address?  Yes  No

2. This report is for the period **January 2019** (Month) (Year) This report corrects or amends the report for (Month) (Year) Business Telephone **(360) 789 -1176**

ALL COMPLETE THIS PART			COMPLETE IF YOU HAVE MORE THAN ONE EMPLOYER		
Include all reportable expenditures by lobbyist and lobbyist's employer for or on behalf of the lobbyist incurred during the reporting period			Amount attributed to each employer		
Expense Category	TOTAL AMOUNT THIS MONTH All employers plus own expense (Columns a + b + c + d and attached pages)	Amounts paid from lobbyist's own funds, not reimbursed or attributed to an employer. Column A	Employer No. <u>4</u> Column B	Employer No. <u>5</u> Column C	Employer No. <u>6</u> Column D
3. COMPENSATION earned from employer for lobbying this period (salary, wages, retainer)	\$		\$ 1,625.00	\$ 9,305.42	\$ 2,600.00
4. PERSONAL EXPENSES for travel, food and refreshments		\$	120.00		
5. ENTERTAINMENT, GRATUITIES, TRAVEL, SEMINARS for state officials, employees, their families (See #15)					
3. CONTRIBUTIONS to elected officials, candidates and political committees (See #16)					
7. ADVERTISING, PRINTING, INFORMATIONAL LITERATURE					
3. POLITICAL ADS, PUBLIC RELATIONS, POLLING, TELEMARKETING, ETC. (See #17)					
3. OTHER EXPENSES AND SERVICES (See #18)					
10. TOTAL COMPENSATION AND EXPENSES INCURRED THIS MONTH	\$ 0.00	\$ 0.00	\$ 1,745.00	\$ 9,305.42	\$ 2,600.00

(Attach additional page(s) if you lobby for more than three employers.)

1. EMPLOYERS' NAMES
- No. 4 (B) Washington Cemetery, Cremation & Funeral Association
  - No. 5 (C) Reynolds American, Inc. Services Company
  - No. 6 (D) Washington Brewers Guild

2. Subject matter of proposed legislation or other legislative activity or rulemaking the lobbyist was supporting or opposing.

Subject Matter, Issue or Bill No.

Legislative Committee or State Agency Considering Matter

Employer Represented

Beer Pourings  
Age Restrictions  
Dispositions

S C&L, H C&G  
S W&Ms, S Health  
H&S Judiciary

WBG  
RAIWANS  
WCFAWSFDA

Continued on attached pages

3. Of the time spent lobbying, what percentage was devoted to lobbying: the Legislature 90% State Agencies 10%.

**4. TERMINATION: (COMPLETE THIS ITEM ONLY IF YOU WISH TO TERMINATE YOUR REGISTRATION)**

Date registration ends:

Employer's name:

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**CERTIFICATION**

certify that this report is true and complete to the best of my knowledge.

LOBBYIST SIGNATURE

*[Handwritten Signature]*

DATE

1/28/19



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(as required by Chapter 397, 1995 Session Laws)

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JAN 28 2019

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Amount attributed to each employer

Expense Category	TOTAL AMOUNT THIS MONTH All employers plus own expense (Columns a + b + c + d and attached pages)	Amounts paid from lobbyist's own funds, not reimbursed or attributed to an employer. Column A	Employer No. <u>10</u>	Employer No. <u>11</u>	Employer No. <u>12</u>
			Column B	Column C	Column D
3. COMPENSATION earned from employer for lobbying this period (salary, wages, retainer)	\$		\$ 6,000.00	\$ 2,500.00	\$ 3,333.33
4. PERSONAL EXPENSES for travel, food and refreshments		\$	120.00		
5. ENTERTAINMENT, GRATUITIES, TRAVEL, SEMINARS for state officials, employees, their families (See #15)					
6. CONTRIBUTIONS to elected officials, candidates and political committees (See #16)					
7. ADVERTISING, PRINTING, INFORMATIONAL LITERATURE					
8. POLITICAL ADS, PUBLIC RELATIONS, POLLING, TELEMARKETING, ETC. (See #17)					
9. OTHER EXPENSES AND SERVICES (See #18)					
10. TOTAL COMPENSATION AND EXPENSES INCURRED THIS MONTH	\$	\$	\$ 6,120.00	\$ 2,500.00	\$ 3,333.33

(Attach additional page(s) if you lobby for more than three employers.)

11. EMPLOYERS' NAMES
- No. 10 (B) American Multi-Cinema, Inc.
  - No. 11 (C) Motion Picture Association of America, Inc.
  - No. 12 (D) 3M Company

12. Subject matter of proposed legislation or other legislative activity or rulemaking the lobbyist was supporting or opposing.
- Subject Matter, Issue or Bill No. Legislative Committee or State Agency Considering Matter

Employer Represented

Elect. Monitoring  
 B&O Taxes, Digital  
 Tolling

Pub Safety & L&J  
 S W&Ms, H Finance, L&J  
 S&H Transportation

3M  
 MPAA  
 3M

Continued on attached pages

13. Of the time spent lobbying, what percentage was devoted to lobbying: the Legislature 80% State Agencies 20%.

**14. TERMINATION: (COMPLETE THIS ITEM ONLY IF YOU WISH TO TERMINATE YOUR REGISTRATION)**

Date registration ends: \_\_\_\_\_ Employer's name: \_\_\_\_\_

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**CERTIFICATION**

certify that this report is true and complete to the best of my knowledge.

LOBBYIST SIGNATURE

DATE

*TK Bentler*

1/28/19

CONTINUE ON REVERSE