L2

PDC OFFICE USE

# DATE FILED PDC

JAN 17 2017

# Lobbyist Monthly Expense Report

(as required by Chapter 397, 1995 Session Laws)

1. Lobbyist Name		•			
Rob Makin Consulting					
Mailing Address					
1940 5 <sup>th</sup> Avenue West	State	7in 1 4			
Seattle	WA	Zip + 4 <b>98119</b>	1	New Address?	☐ Yes x No
2. This report is	This report correct	***************************************		Business Telephor	ne
for the period DEC 2016	(Month)	(Year)		(206 ) 282 -5	
ALL COMPLETE TH	IS PART		COMPLETE IF YO	U HAVE MORE THAN	
Include all reportable expenditures by lobbyist and include all reportable expenditures by lobbyist incurred during the		or on behalf of the	Amount	attributed to each e	nployer
Expense Category	TOTAL AMOUNT THIS MONTH All employers plus own expense (Columns a + b + c + d and attached	Amounts paid from lobbyist's own funds, not reimbursed or attributed to an employer.  Column A	Employer No. <u>1</u> Column B	Employer No. <u>2</u> Column C	Employer No. <u>3</u> Column D
COMPENSATION earned from employer for lobbying this period (salary, wages, retainer)	pages) \$ 36,500.00	Columnia	\$ 3,000.00	\$ 4,000.00	\$ 3,750.00
PERSONAL EXPENSES for travel, food and refreshments	68.35			68.35	
5. ENTERTAINMENT, GRATUITIES, TRAVEL, SEMINARS for state officials, employees, their families (See #15)	340.54	٨		102.55	102.54
CONTRIBUTIONS to elected officials, candidates and political committees (See #16)	5,250.00	250.00			
7. ADVERTISING, PRINTING, INFORMATIONAL LITERATURE					
POLITICAL ADS, PUBLIC RELATIONS, POLLING, TELEMARKETING, ETC. (See #17)		-		, , , , ,	
9. OTHER EXPENSES AND SERVICES (See #18)	6,000.00				
10. TOTAL COMPENSATION AND EXPENSES INCURRED THIS MONTH	\$ 48,158.89	\$ 250.00	\$ 3,000.00	\$ 4,170.90	\$ 3,852.54
	,	(Attach additional pa	ge(s) if you lobby for m	ore than three employe	rs)
11. EMPLOYERS' No. 1 (B) Boehringer Ing	elheim Pharmaceu	ticals Inc			
NAMES No. 1 (b) Boeningering No 2 (c) Comcast Cable					
<b>-</b> ` '				`	
No. 3 (D) Deloitte Consu	•				
12. Subject matter of proposed legislation or other legislative ac Subject Matter, Issue or Bill No. Legis	•	obbyist was supporting or op ate Agency Considering Ma		Employer Repres	sented
Bus & Cons. Affairs, Fiscal, Health Care, S Bus & Cons. Affairs, Fiscal, Energy & Utiliti Bus & Cons. Affairs, Fiscal, Human Service x Continued on attached pages	es, State & Local G es, State Gov't			1 2 3	
13. Of the time spent lobbying, what percentage was devoted to		islature <u>80</u> % State Agend	ies <u>20</u> %.		
14. TERMINATION: (COMPLETE THIS ITEM ONLY IF YOU	I WISH TO TERMINATI	E YOUR REGISTRATION)			
Date registration ends: Empk	oyer's name:				,
I understand that an L-2 report is required for any month or must file a Monday in January of each odd numbered year.		am a registered lobbyist. I abbying for that employer in			

CERTIFICATION

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

LOBER ST SIGNATURE

CONTINUE ON REVERSE



L2

Lobbyist Monthly Expense Report

(as requ	ired by Chapter 397, 1995 Sessio	on Laws)			
1. Lobbyist Name					
Rob Makin Consulting					
Mailing Address					
1940 5 <sup>th</sup> Avenue West	State	Zip + 4			
Seattle	WA	2p+4 98119	3	New Address?	☐ Yes x No
2. This report is	This report correct			Business Telephor	ne
for the period DEC 2016	amends the report			(206 ) 282 -5	5700
(Month) (Year)	DI ETE TIUG DART	(Month)	(Year)	U HAVE MORE THAN	ONE ENDI OVER
Include all reportable expenditures by lobb	PLETE THIS PART	r or on behalf of the		·	
	turing the reporting period		Amount	attributed to each e	mployer r
Expense Category	TOTAL AMOUNT THIS MONTH All employers plus own expense (Columns a + b + c + d and attached	Amounts paid from lobbyist's own funds, not reimbursed or attributed to an employer.	Employer No. <u>4</u>	Employer No. <u>5</u>	Employer No. <u>6</u>
•	pages)	Column A	Column B	Column C	Column D
<ol> <li>COMPENSATION earned from employer for lob this period (salary, wages, retainer)</li> </ol>	bying \$		\$ 4,000.00	\$ 1,750.00	\$ 4,500.00
<ol> <li>PERSONAL EXPENSES for travel, food and refreshments</li> </ol>		\$			
<ol> <li>ENTERTAINMENT, GRATUITIES, TRAVEL, SE for state officials, employees, their families (See</li> </ol>					
<ol> <li>CONTRIBUTIONS to elected officials, candidate political committees (See #16)</li> </ol>	es and				
7. ADVERTISING, PRINTING, INFORMATIONAL LITERATURE					
<ol> <li>POLITICAL ADS, PUBLIC RELATIONS, POLLIN TELEMARKETING, ETC. (See #17)</li> </ol>	NG,				
9. OTHER EXPENSES AND SERVICES (See #18)					
10. TOTAL COMPENSATION AND EXPENSES INC THIS MONTH	CURRED \$	\$	\$ 4,000.00	\$ 1,750.00	\$ 4,500.00
(Attach additional page(s) if you lobby for more than three employers.)					
11. EMPLOYERS' No. 4 (B) Emera	ald Services Inc. (Cedar Gro	ove)			
TAMES /	en Incorporated	,			
<del>-</del> ····	soft Corporation				
No. <u>6</u> (D) Micros 12. Subject matter of proposed legislation or other le	•	lobbyist was supporting or o	opposina.		
Subject Matter, Issue or Bill No.	Legislative Committee or S			Employer Repre	sented
Bus & Cons. Affairs, Energy & Util Bus & Cons. Affairs, Fiscal, State Bus & Cons. Affairs, Education, Er	Gov <sup>i</sup> t, Transportation		Gov't, Technology	, Transportation	<b>4</b> 5 6
X Continued on attached pages			00		
13. Of the time spent lobbying, what percentage was		gislature <u>80</u> % State Agen			
14. TERMINATION: (COMPLETE THIS ITEM OF	NLT IF YOU WISH TO TERMINA	IE TUUK KEGISTKATION	<b>'</b>		
Date registration ends:	Employer's name:		l atau and and a second		mu ragiotestico
I understand that an L-2 report is required for an must Monday in January of each odd numbered year.	y month or portion thereof in which file a new registration pnor to				
	CER	TIFICATION			
I certify that this report is true and complete to the be		OBBYIST SIGNATURE			DATE
	1				



L2
1/15

**Lobbyist Monthly Expense Report** 

	1		(as required by Ch	apter 397, 1995 Sessi	ion Laws)		ł				
1.	Lobbyist Name						$\dashv$				
	Rob Makir	n Consulting	ı								
	Mailing Address										
	1940 5 <sup>th</sup> A	wenue West	t				$\perp$				
	City			State -	Zip + 4			New Address?	П	Yes x N	in
	Seattle			WA	9811	9				TES A IV	10
2.		250	2040	This report corre			- 1	Business Telepho		_	
		DEC (Month)	<u>2016</u> (Year)	amends the repo	ort for (Month)	(Year)	- 1	(206 ) 282 -	570	0	
	<u>'</u>	(MOHul)	ALL COMPLETE THI	IS DART	(MOTILI)	COMPLETE IF YO		AVE MORE THAN	- ON	F FMPLOYE	
	Include all report	table expenditu		.,	for or on behalf of the	<del></del>					
			t incurred during the	reporting period		Amount	attn	ibuted to each e	mpi	<u>yer</u>	
	Ext	pense Catego	ory	TOTAL AMOUNT THIS MONTH All employers plus own expense (Columns a + b + c + d and attached	attributed to an	Employer No. <u>7</u> Column B		Employer No. 8		Employer No. <u>9</u> Column D	
	COMPENICATION		1 5 - 1 - blu in a	pages)	Column A	Column	╀—	Column	╀		<del></del>
3.	COMPENSATION (	eamed from emp (salary, wages, ret		\$		\$ 3,000.00	\$	3,000.00	\$	3,000.0	00
4.	PERSONAL EXPERING PERSONAL PER	NSES for travel, f	ood and		\$						
5.	ENTERTAINMENT for state officials, er		TRAVEL, SEMINARS amilies (See #15)					135.45			
6.	CONTRIBUTIONS political committees		s, candidates and					5,000.00			
7.	ADVERTISING, PR LITERATURE	₹INTING, INFOR	MATIONAL								
8.	POLITICAL ADS, P TELEMARKETING						1				
9.	OTHER EXPENSE	S AND SERVICE	:S (See #18)							6,000.	.00
10.	TOTAL COMPENS THIS MONTH	ATION AND EXF	PENSES INCURRED	\$	\$	\$ 3,000.00	\$	8,135.45	\$	9,000.0	00
	(Attach additional page(s) if you lobby for more than three employers.)										
	11. EMPLOYERS' NAMES No. 7 (B) Philips Electronics North America  No. 8 (C) Sabey Corporation  No. 9 (D) Unified Grocers										
12.		oroposed legislationer, Issue or Bill N	-	-	lobbyist was supporting or op State Agency Considering N			Employer Repre	esenf	:ed	
x	Bus & Cons	s. Affairs, Ene s. Affairs, Stat	ergy & Utilities, Fisca ergy & Utilities, Fisca te & Local Gov't, Tr	al, State & Local 0	State & Local Gov't, Ted Gov't, Technology	chnology		7 8 9			
13	Of the time spent Ir	obbying, what per	centage was devoted to	lobbying: the L	_egislature 80% State Ager	ncies <u>20</u> %.					
					ATE YOUR REGISTRATIO						
	Date registration er		·	oyer's name:							
					n I am a registered lobbyist. I a ons terminate automatically or						đ
	CERTIFICATION										
I ce	artify that this report is	s true and comple	ete to the best of my kno	wledge.	LOBBYIST SIGNATURE				DAT	E	
					•						

**CONTINUE ON REVERSE** 



# **Lobbyist Monthly Expense Report**

(as required by Chapter 397, 1995 Session Laws) Lobbyist Name **Rob Makin Consulting** Mailing Address 1940 5th Avenue West Zip + 4 City New Address? ☐ Yes x No WA 98119 Seattle Business Telephone This report corrects or This report is DEC 2016 (206 ) 282 -5700 for the period amends the report for (Month) (Year) (Year) COMPLETE IF YOU HAVE MORE THAN ONE EMPLOYER **ALL COMPLETE THIS PART** include all reportable expenditures by lobbyist and lobbyist's employer for or on behalf of the Amount attributed to each employer lobbyist incurred during the reporting period TOTAL AMOUNT Amounts paid from THIS MONTH lobbyist's own funds, Employer Employer Employer not reimbursed or All employers plus No. 11 No. , No. 10 own expense attributed to an (Columns a + b + c employer. **Expense Category** + d and attached Column C Column D Column B pages) Column A COMPENSATION earned from employer for lobbying this period (salary, wages, retainer) \$ 4,000.00 2,500.00 PERSONAL EXPENSES for travel, food and refreshments \$ ENTERTAINMENT, GRATUITIES, TRAVEL, SEMINARS for state officials, employees, their families (See #15) CONTRIBUTIONS to elected officials, candidates and political committees (See #16) ADVERTISING, PRINTING, INFORMATIONAL LITERATURE POLITICAL ADS, PUBLIC RELATIONS, POLLING. TELEMARKETING, ETC. (See #17) 9. OTHER EXPENSES AND SERVICES (See #18) 10. TOTAL COMPENSATION AND EXPENSES INCURRED THIS MONTH 4,000.00 2,500.00 \$ (Attach additional page(s) if you lobby for more than three employers.) 11. EMPLOYERS' No. 10 (B) Washington State University NAMES No. 11 (C) Washington Wholesale Druggist Association 12. Subject matter of proposed legislation or other legislative activity or rulemaking the lobbyist was supporting or opposing. Legislative Committee or State Agency Considering Matter **Employer Represented** Subject Matter, Issue or Bill No. 10 Education, Higher Ed, State & Local Gov't 11 Bus & Cons. Affairs, Fiscal, Health Care, State Gov't 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: 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 DATE LOBBYIST SIGNATURE I certify that this report is true and complete to the best of my knowledge.

Page 2		LZ			
Lobbyist Name Rob	Makin Consulting	Reporting Period	DEC 2016 (Year)		
families. Il spent ente Entertair Receptue Travel, k Enrollme	of the following expenditures that were incurred by lobbyist or long the total amount column, show the total amount spent for the total amount spent for the example.  In the expenditures exceeding \$50 per occasion (including lobbons. See WAC 390-20-020A, L-2 Reporting Guide, to determine odding and subsistence expenses in connection with a speech, ent and course fees in connection with a seminar or educational must provide an elected official with a copy of the L-2 or Memo or her family member(s); or 2) providing travel, lodging, subsiste	each occasion including any stage yist's expense) for meals, beverages, e if per person cost is required. presentation, appearance, trade misse program. Report if the lobbyist reports: 1) sper	ing costs, tax, and gratuity.  tickets, passes, or for other  ion, seminar or educational particular on one occasion over \$	Also show the actual amount forms of entertainment. program.     For food or beverages for the official	
Date	Names of all Persons Entertained or Provided Travel, etc.	Description, Place, etc.	Sponsoring E	Employer Total	
mm/dd/year	Include actual amounts spent for entertainment  Example: Sen Bow (\$32), Rep Arrow (\$28), and J. D. Lobbyist (\$36)	Dinner et Anthony's, Olympia	XYZ Corporation	Amount \$121.41	
Í	tax & graturty (\$25.41)			\$	
,	See attached				
	•				
	,				
N/A	Total expenses itemized on attached Memo Reports				
	·				
16. If a monet	n attached pages. ary or in-kind contribution exceeding \$25 was given or transmitt	ed by the lobbyist to any of the follow	ng, itemize the contribution b	elow or on a Memo Report: local and	
state cand local or sta	lidates or elected officials; local and state officers or employees; ate ballot proposition. If a contribution exceeding \$25 was given ying campaign.	political committees supporting or op-	posing any candidate, electe	d official, officer or employee or any	
Date	Name of Individual or Committee Receiving Contribution	Source	of Contribution	Amount	
				<b>  s</b>	
	See attached				
		•			
N/A	Total contributions itemized on attached Memo Reports			<u> </u>	
If contribut PAC on C	tions were made directly by a political action committee associa -4 report need not be again included in this L-2 report.)	ted, affiliated or sponsored by your er	nployer, show name of the Pa	AC below. (Information reported by	
X Continued on					
directly or attached p	res for: a) political advertising supporting or opposing a state or indirectly are lobbying-related must be itemized by amount, ver age that also shows lobbyist name and report date. Put the ag-	dor or person receiving payment, and gregate total of these expenditures or	i a brief description of the act i line 8.	tivity. Itemize each expenditure on an	
<ol><li>Payments or assista</li></ol>	by the lobbyist for other lobbying expenses and services, includence in lobbying and payments for grass roots lobbying campaign	ling payments to subcontract lobbyist ns (except advertising/printing costs li	s, expert witnesses and otner sted in Item 7).	rs retained to provide lobbying services	
Date	Recipient's Name and Address	Employer for Wh	om Expense was Incurred	Amount	
12/1/16	Pierce Consulting Services, LLC		9	\$ 6,000.00	
	P. O. Box 4410				
	Tumwater, WA 98501				
	on attached page.				

#### Attachment to: Makin L2 December, 2016

# Item 15:

Date	Names of all Persons Entertained or Provided Travel, etc.	Description, Place, etc.	Sponsoring Employer	Amount
12/6/2016	Senator S. Litzow, D. Shoemaker, K. Clauson, K. Johnson, C. Holmstrom, R. Makin; share of total	1	2,3,8	\$307.64
12/6/2016	D. Schumacher, R. Makin	El Sarape; Lacey, WA	. 8	\$32.90
12/19/2016	J. Troyer, R. Makin	Red Robin; Lakewood, WA	8	\$38.68

# Item 16:

Date	Name of Individual or Committee Receiving Contribution	Source of Contribution	Amount
12/7/2016	Friends of Reagan Dunn	Self	\$250.00
12/8/2016	Vote for Brad Hawkins	8	\$1,000.00
12/9/2016	Marko for Senate	8	\$1,000.00
12/9/2016	Pat (Patrice) McCarthy	8	\$1,000.00
	Chris Reykdal for Superintendent of Public Instruction	8	\$1,000.00
12/12/2016	Committee to Elect Mike Volz	8	\$500.00
12/12/2016	Friends of Jim Walsh	8	\$500.00