

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

L2

DATE FILED PDC

| Lobbyist Monthly Expense Report (as required by Chapter 397, 1995 Session Laws) | | | | | JUN 0 4 2019 | |
|---|--|---|---|--|---|--|
| 1. Lobbyist Name | | | | | | |
| Majiling Address | -(, | | | 1 | | |
| 4030 NE 2811 | 8t. | · · · · · · · · · · · · · · · · · · · | | | | |
| Scattle | State LVA | Zip+4 98119 | New Address? | | | |
| 2. This report is | This report corrects or | | | Business Telephone | | |
| for the period (Month) (Year) | amends the report for (Month) (Year) | | | 12061718-5853 | | |
| ALL COMPLETE THI | | | | U 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 TOTAL AMOUNT Amounts paid from lobbyist's own funds, not reimbursed or attributed to an employer. | | Employer No | Employer No | Employer No | |
| | + d and attached pages) | Column A | Column B | Column C | Column D | |
| COMPENSATION earned from employer for lobbying this period (salary, wages, retainer) | \$ 9000 | | s 9000 | \$ · | \$ | |
| PERSONAL EXPENSES for travel, food and refreshments | 1 | \$ 0 | | , and the second | | |
| ENTERTAINMENT, GRATUITIES, TRAVEL, SEMINARS for state officials, employees, their families (See #15) | | ſ | · | | | |
| CONTRIBUTIONS to elected officials, candidates and political committees (See #16) | · | | | | | |
| 7. ADVERTISING, PRINTING, INFORMATIONAL LITERATURE | | | | | | |
| POLITICAL ADS, PUBLIC RELATIONS, POLLING, TELEMARKETING, ETC. (See #17) | | | | | | |
| 9. OTHER EXPENSES AND SERVICES (See #18) | V | V | V . | | | |
| 10. TOTAL COMPENSATION AND EXPENSES INCURRED THIS MONTH | \$ 9000 | \$ | \$ 9000 | \$ | \$ | |
| 11. EMPLOYERS' No. X (B) A War | Home WA | · | age(s) if you lobby for mo | ore than three employ | ers.) | |
| 12. Subject matter of proposed legislation or other legislative as Subject Matter, Issue or Bill No. Legis Howoless York Yorg Abults | · · | obbyist was supporting or op ate Agency Considering M | • | Employer Rep | resented . | |
| Budget Buhavoral Heatth Families in Cusis Continued on attached pages | Appropriat Human Sew | zens Ways & M nies Commute | eans ees | A Way4 | lame WA | |
| 13. Of the time spent lobbying, what percentage was devoted to | o lobbying: the Le | gislature <u>75</u> % | State Agencies 25 | <u>.</u> %. | | |
| 14. TERMINATION: (COMPLETE THIS ITEM ONLY IF YOU | WISH TO TERMINATE | OUR REGISTRATION) | | | | |
| Date registration ends: Emp | loyer's name: | | | · | | |
| I understand that an L-2 report is required for any month or file a new registration prior to lobbying for that employer in t | portion thereof in which I he future. All registration | am a registered lobbyist. I a s terminate automatically on | also understand that once the second Monday in J | e I have terminated m lanuary of each odd n | ny registration, I must numbered year. | |
| | | TIFICATION | | | | |
| I certify that this report is true and complete to the best of my kn | owiedge. | DBBYIST SIGNATURE | 4.00 | | DATE . | |

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| Lobby | rist Name | | Reporting Period (Mon | th) (Year) | • | | | | |
| S • | Entertains Travel, loe Enrollmes | the following expenditures that were incurred by lobbyist or lobb ctual amount incurred for each individual or the amount fairlannt expenditures exceeding \$25 per occasion (including lobbyis lang and subsistence expenses in connection with a speech, pro- it and course fees in connection with a seminar or educational pro- just provide an elected official with a copy of the L-2 or Memo Re- or her family member(s); or 2) providing travel, lodging, subsistence | y attributed to each. i's expense) for meals, beverages, tickets esentation, appearance, trade mission, se ogram. port if the lobbyist reports: 1) spending or | s, passes, or for other forms of entertainm eminar or educational program. | ent. ages for the official | | | | |
| | Date | Names of all Persons Entertained or Provided Travel, etc. | Description, Place, etc. | Sponsoring Employer | Amount | | | | |
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| | N/A | Total expenses itemized on attached Memo Reports | | | i e | | | | |
| _ | | · . | | • | | | | | |
| | | n attached pages. ary or in-kind contribution exceeding \$25 was given or transmitter | by the lobbuist to any of the following ste | mize the contribution below or on a Memo | Report local and | | | | |
| 10. | state cand | idates or elected officials; local and state officers or employees; particular proposition. If a contribution exceeding \$25 was given to the | political committees supporting or opposing | g any candidate, elected official, officer or | employee or any local | | | | |
| | Date | Name of Individual or Committee Receiving Contribution | Source of C | Contribution | Amount | | | | |
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| | N/A | Total contributions itemized on attached Memo Reports | | | • | | | | |
| | I If contributions were made directly by a political action committee associated, affiliated or sponsored by your employer, show name of the PAC below. (Information reported by PAC | | | | | | | | |
| | on C-4 re | port need not be again included in this L-2 report.) | • | | | | | | |
| | Continued | on attached pages. PAC Name: | • | | | | | | |
| | Expendit | ures for: a) political advertising supporting or opposing a state or | local candidate or ballot measure; or b) pu | ublic relations, telemarketing, polling or sin | nilar activities that . | | | | |
| | directly o | rindirectly are lobbying-related must be itemized by amount, ven- page that also shows lobbyist name and report date. Put the ago | lor or person receiving payment, and a brid regate total of these expenditures on line i | <u>ef description of the activity Itemize</u> each 8. | expenditure on an | | | | |
| 18 | . Payment | s by the lobbyist for other lobbying expenses and services, includie in lobbying and payments for grass roots lobbying campaigns (| ng payments to subcontract lobbyists, exp | ert witnesses and others retained to provi | de lobbying services or | | | | |
| | Date | Recipient's Name and Address | Employer for Whom | Expense was incurred | Amount | | | | |
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| _ | 1 Continue | d on attached page. | | | 1 | | | | |
| | Continue | on anathed paye. | | ······································ | | | | | |