

(360) 753-1111 TOLL FREE 1-877-601-2828

PDC OFFICE USE

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JAN 11 2017

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

CI IDI IS				ILIC DISCI OSUE	RE COMMISSION
1. Lobbyist Name Voderum Putman			100	EL DISCLOSOR	(E COMMISSION
Mailing Address / Koszthod See	Sh Bos		,		
Seatte	State Zip+4 WH 98082			New Address?	☐ Yes ☐ No
2. This report is for the period 12 LG	This report corrects or		Business Telephone		
for the period (Month) (Year) amends the report for (Month) (Year)			(Vear)	() -	
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			
to Dynamical Control of the Control	TOTAL AMOUNT	Amounts paid from			
Francisco Outros and a series of the series	THIS MONTH All employers plus own expense	lobbylst's own funds, not reimbursed or attributed to an	Employer No	Employer No	Employer No
Expense Category	(Columns a + b + c + d and attached pages)	employer. Column A	Column B	Column C	Column D
 COMPENSATION earned from employer for lobbying this period (salary, wages, retainer) 	\$ 429		\$ Lew	\$	\$
4. PERSONAL EXPENSES for travel, food and refreshments	200	\$	200		
 ENTERTAINMENT, GRATUITIES, TRAVEL, SEMINARS for state officials, employees, their families (See #15) 					
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)					
10. TOTAL COMPENSATION AND EXPENSES INCURRED THIS MONTH	\$628	\$	\$63	\$	\$
		(Attach additional pa	age(s) if you lobby for mo	ore than three employer	rs.)
11. EMPLOYERS' NAMES No (B) Charles l No (C) No (D)	-dwy	ما ما معمد المعمد ا			,
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 Less TCD, Courecce, Course Coure Course Cours					
Continued on attached pages		Sn.) _		•
13. Of the time spent lobbying, what percentage was devoted to			State Agencies	_%.	
14. TERMINATION: (COMPLETE THIS ITEM ONLY IF YOU	WISH TO TERMINAT	E YOUR REGISTRATION	1)		
	yer's name:		•		
I understand that an L-2 report is required for any month or p file a new registration prior to lobbying for that employer in the	ortion thereof in which I a e future. All registrations	im a registered lobbyist. I a terminate automatically on	lso understand that once the second Monday in J	e I have terminated my anuary of each odd nu	registration, I must mbered year.
Long Alford London	CERTI	FICATION,			
I certify that this report is true and complete to the best of my known	wiedge. LOI	BRYST SIGNATURE		1/0	PATE