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

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

L2

PDC OFFICE USE

DATE FILED PDC
JUL 03 2017

CONTINUE ON NEXT PAGE

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

Lobbyist Name OURC Mailing Address City Zip + 4 Yes | No New Address? This report is Business Telephone for the period amends the report for (360) 2 80-6200 (Month) (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 lobbyist Amount attributed to each employer incurred during the reporting period TOTAL AMOUNT Amounts paid from THIS MONTH lobbyist's own funds. Emplover **Employer** Employer All employers plus not reimbursed or No. 👱 No. No.D_ own expense attributed to an (Columns a + b + c + d and attached **Expense Category** employer. Column B Column C Column D Column A pages) COMPENSATION earned from employer for lobbying this 2200 period (salary, wages, retainer) 000 PERSONAL EXPENSES for travel, food and refreshments O O ENTERTAINMENT, GRATUITIES, TRAVEL, SEMINARS O for state officials, employees, their families (See #15) 0 6 6 CONTRIBUTIONS to elected officials, candidates and δ δ political committees (See #16) ADVERTISING, PRINTING, INFORMATIONAL LITERATURE POLITICAL ADS, PUBLIC RELATIONS, POLLING, TELEMARKETING, ETC. (See #17) OTHER EXPENSES AND SERVICES (See #18) 10. TOTAL COMPENSATION AND EXPENSES INCURRED \$6000 THIS MONTH (Attach additional page(s) if you lobby for more than three employers.) NO. B (B) SNO-KINE 11. EMPLOYERS' **NAMES** No. C (C) WAPE No. D (D) Pur B 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** leg. Discol, phycommittees, Do Con. Dott, OOF, of the Covernois After Budget + Pulicy Wills Continued on attached pages 13. Of the time spent lobbying, what percentage was devoted to lobbying: the Legislature State Agencies 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

LOBBYIST SIGNATURE

Merka advocates June 2017

Condributions,

June 41 allen Miller Cle Sef Flor, 00