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

PDC OFFICE USE

## DATE FILED FUC

CONTINUE ON NEXT PAGE

Lobbyist Monthly Expense Report (as required by Chapter 397, 1995 Session Laws)					OCT 2 0 2016	
1. Lobbyist Name ROGER G. FERRIS						
Mailing Address P. O. BOX 134						
City	State	Zip + 4		New Address?	☐ Yes X No	
OLYMPIA 2. This report is	WA_	98507-01	.34			
for the period SEPT 2016	This report corrects amends the report		Business Telephone (360) 943 - 3880			
(Month) (Year)		(Month)	(Year)			
ALL COMPLETE TH			COMPLETE IF YOU HAVE MORE THAN ONE EMPLOYER			
Include all reportable expenditures by lobbyist and lobby incurred during the reportable		n behalf of the lobbyist	Amount attributed to each employer			
	TOTAL AMOUNT	Amounts paid from	Employer			
Expense Category	All employers plus own expense (Columns a + b + c + d and attached pages)	not reimbursed or attributed to an employer.  Column A	No. 1	No	No Column D	
<ol> <li>COMPENSATION earned from employer for lobbying this period (salary, wages, retainer)</li> </ol>	\$	S Constitution of the cons	\$	\$	\$	
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)						
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	\$ 0.00	\$	\$ 0.00	\$	\$ /	
(Attach additional page(s) if you lobby for more than three employers.)  11. EMPLOYERS' No. 1 (B) WASHINGTON FIRE COMMISSIONERS ASSOCIATION  No. (C)  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						
Continued on attached pages  13. Of the time spent lobbying, what percentage was devoted to	lobbying: the Leg	gislature%	State Agencies	%.		
14. TERMINATION: (COMPLETE THIS ITEM ONLY IF YOU			<u> </u>			
Date registration ends: Emple	ployer'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	portion thereof in which I a be future. All registrations	am a registered lobbyist. I a s terminate automatically on	ilso understand that of the second Monday is	nce I have terminated my n January of each odd ni	registration, I must imbered year.	
	CERT	TIFICATION		•		
I certify that this report is true and complete to the best of my kno	owledge. LC	BBYIST SIGNATURE			DATE	
		Moza	ton	<u>.                                    </u>	10/17/16	

Lobbyist Name	Reporting SEPT	2016						
ROGER G. FERRIS	Reporting SEPT Period (Month)	(Year)						
15. Itemize all of the following expenditures that were incurred by lobbyist or lobbyist employer(s) for legislators, state officials, state employees and members of their immediate families.  Show the actual amount incurred for each Individual or the amount fairly attributed to each.  • Entertainment expenditures exceeding \$25 per occasion (including lobbyist's expense) for meals, beverages, tickets, passes, or for other forms of entertainment.  • Travel, lodging and subsistence expenses in connection with a speech, presentation, appearance, trade mission, seminar or educational program.  • Enrollment and course fees in connection with a seminar or educational program.  Lobbyists must provide an elected official with a copy of the L-2 or Memo Report if the lobbyist reports: 1) spending on one occasion over \$50 for food or beverages for the official and/or his or her family member(s); or 2) providing travel, lodging, subsistence expenses or enrollment or course fees for the official and, if permitted, the official's family.								
Date Names of all Persons Entertained or Provided Travel, etc. Descrip	otion, Place, etc.	Sponsoring Employer	Amount					
	dan e saget		\$					
N/A Total expenses itemized on attached Memo Reports			•					
Continued on attached pages.								
16. If a monetary or in-kind contribution exceeding \$25 was given or transmitted by the lobbyist to state candidates or elected officials; local and state officers or employees; political committee or state ballot proposition. If a contribution exceeding \$25 was given to the following, itemize lobbying campaign.	s supporting or opposing an	v candidate, elected official, officer or	employee or any local					
Date Name of Individual or Committee Receiving Contribution	Source of Cont	ribution .	Amount					
			\$					
			<b>-</b>					
			i					
N/A Total contributions itemized on attached Memo Reports								
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 report need not be again included in this L-2 report.)								
Continued on attached pages. PAC Name:								
17. Expenditures for. a) political advertising supporting or opposing a state or local candidate or directly or indirectly are lobbying-related must be itemized by amount, vendor or person received.	ballot measure; or b) public	relations, telemarketing, polling or sime	illar activities that					
attached page that also shows lobbyist name and report date. Put the aggregate total of the	se expenditures on line 8.	•						
<ol> <li>Payments by the lobbyist for other lobbying expenses and services, including payments to su assistance in lobbying and payments for grass roots lobbying campaigns (except advertising)</li> </ol>	bcontract lobbyists, expert v printing costs listed in Item	vitnesses and others retained to provid 7).	le lobbying services or					
Date Recipient's Name and Address	Employer for Whom Expo	ense was incurred	Amount					
			s					
i			*					
	·							
Continued on attached page.			i					