L2
12/14

PDC OFFICE USE

CONTINUE ON REVERSE

DATE FILED PDC

OCT 3 1 2016

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

(as required by Chapter 397, 1995 Session Laws)

Lobbyist Name		-		7				
Pamela B. Loginsky								
Mailing Address				7				
206 10th Avenue SE								
City	State	Zip + 4						
Olympia	WA	9850	1-1399	New Address?	☐ Yes No			
2. This report is	This report	corrects or		Business Telephone				
for the period OCTOBER 2016	amends the report for			(360)753 -2175				
(Month) (Year) ALL COMPLETE THI	C DARM	(Month)	(Year)	<u> </u>				
Include all reportable expenditures by lobbyist and lobbyist's emplo	DU HAVE MORE THAN O	U HAVE MORE THAN ONE EMPLOYER						
reporting period		the loopyist incurred during the	Amount attributed to each employer					
and the second s	TOTAL AMOU THIS MONT All employers own expens	H lobbyist's own funds, plus not reimbursed or	Employer No	Employer	Employer No			
Expense Category	(Columns a + I + d and attack pages)	o+c employer.	Column B	Column C	Column D			
COMPENSATION earned from employer for lobbying this period (salary, wages, retainer)	\$ 0.0		\$		¢			
4. PERSONAL EXPENSES for travel, food and	ψ <u> </u>		Ψ Ψ	,	\$			
refreshments		\$	1					
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	\$ 0.0	00 \$	\$ \$		\$			
(Attach additional page(s) if you lobby for more than three employers.)								
	ON ASSOCIA	TION OF PROSECUTI	ING ATTORNEYS					
No (C)				الاخيس يدعوه				
No (D)	, ,	- the var - errors v v r	-		•			
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								
		nearing such legislation		#1				
Continued on attached pages								
13. Of the time spent lobbying, what percentage was devoted to	lobbying:	the Legislature 0%	State Agencies	0%.				
14. TERMINATION: (COMPLETE THIS ITEM ONLY IF YOU WISH TO			3					
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						
I certify that this report is true and complete to the best of my knowledge. LOBBYIST SIGNATURE DATE								
PAMELA B. LOGINSKY 10/31/2016								

☐ Continued on attached page.

P	age 2		L2							
Lobbyist Name			Reporting	OCTOBER	2016					
	PAN	IELA B. LOGINSKY	Period	(Month)	(Year)					
15.	 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. In the total amount column, show the total amount spent for each occasion including any staging costs, tax, and gratuity. Also show the actual amount spent entertaining each individual, as shown in the example. When reporting a reception or similar event, show the amount fairly attributed to each individual. Entertainment expenditures exceeding \$50 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	NONE	Description, Place, etc.		Sponsoring Employer	Total Amount \$				
	N/A	Total expenses itemized on attached Memo Reports		I		1				
	Continued of	Continued on attached pages.								
_	If a monetary or in-kind contribution exceeding \$25 was given or transmitted by the lobbyist to any of the following, itemize the contribution below or on a Memo Report: local and state candidates or elected officials; local and state officers or employees; political committees supporting or opposing any candidate, elected official, officer or employee or any local or state ballot proposition. If a contribution exceeding \$25 was given to the following, itemize the contribution below: a caucus political committee; a political party; or a grass roots lobbying campaign.									
	Date	Name of Individual or Committee Receiving Contribution	Sour	ce of Contribution		Amount				
		NONE				\$				
	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 of	on attached pages. PAC Name:								
	-directly or	res for: a) political advertising supporting or opposing a state or l indirectly are lobbying-related must be itemized by amount, vend lage that also shows lobbyist name and report date. Put the aggi	or or person receiving payment, and	a bnef description						
18.	8. Payments by the lobbyist for other lobbying expenses and services, including payments to subcontract lobbyists, expert witnesses and others retained to provide lobbying services of assistance in lobbying and payments for grass roots lobbying campaigns (except advertising/printing costs listed in Item 7).									
	Date	Recipient's Name and Address	Employer for W	/hom Expense wa	s Incurred	Amount				
		NONE				\$				