PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 **TOLL FREE 1-877-601-2828**

12/14

DATE FILED PDC

FEB 202018

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

Lobbyist Name Vladimir Gutman Mailing Address 1402 Third Ave, Suite 1305 City State Zip + 4☐ Yes ☐ No New Address? WA 98101 Seattle Business Telephone This report is This report corrects or amends the report for for the period) (Month) (Year) **ALL COMPLETE THIS PART** COMPLETE IF YOU HAVE MORE THAN ONE EMPLOYER Include all reportable expenditures by lobbylst and lobbylst's employer for or on behalf of the lobbylst Amount attributed to each employer incurred during the reporting period TOTAL AMOUNT Amounts paid from THIS MONTH lobbyist's own funds, **Employer Employer Employer** All employers plus not reimbursed or No. No. No. attributed to an own expense Expense Category :--(Columns a + b + c employer. + d and attached Column B Column C Column D Column A pages) COMPENSATION earned from employer for lobbying this 3600 *360*0 period (salary, wages, retainer) PERSONAL EXPENSES for travel, food and 1350 refreshments ENTERTAINMENT, GRATUITIES, TRAVEL, SEMINARS for state officials, employees, their families (See #15) CONTRIBUTIONS to elected officials, candidates and 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 \$4950 s 4950 THIS MONTH (Attach additional page(s) if you lobby for more than three employers.) No. _ (B) Claude Solutions 11. EMPLOYERS' NAMES 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 House Gune, Sen EET, Sundrys House TEB, Sun EET, Gun Ways Subject Matter, Issue or Bill No. **Employer Represented** Hora /Son Trans Continued on attached pages the Legislature & % State Agencies _ 13. Of the time spent lobbying, what percentage was devoted to lobbying: 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** I certify that this report is true and complete to the best of my knowledge. LOBBY