0908 (360) 753-1111 TOLL FREE 1-877-601-2828

PDC OFFICE USE

DATE FILED POC APR 24 2017

Labbuist Monthly Expanse Papart

(as required by Chapter 397, 1995 Session Laws)					42017			
1. Lobbyist Name		· · · · · · · · · · · · · · · · · · ·						
Shawn Bunney Mailing Address				_				
5360 W. Tapps Dr. E								
City	State	Zip + 4						
Lake Tapps	WA	98391		New Address?	☐ Yes ☐ No			
2. This report is	This report of			Business Telepho				
for the perio September 2016 (Month) (Year)	amends the	report for (Month)	(Year)	(253) 208 (0163			
ALL COMPLETE 1	THIS PART	(Monary		U HAVE MORE THAN	ONE EMPLOYER			
Include all reportable expenditures by lobbyist and lob		for or on behalf of the lobbyist Amou		attributed to each employer				
incurred during the re	TOTAL AMOUNT THIS MONTH All employers plu own expense (Columns a + b +	lobbyist's own funds, s not reimbursed or attributed to an c employer.	Employer No. <u>1</u>	Employer No	Employer No			
-	+ d and attached pages)	Column A	Column B	Column C	Column D			
COMPENSATION earned from employer for lobbying this period (salary, wages, retainer)			\$ 5,000	\$	\$			
PERSONAL EXPENSES for travel, food and refreshments		0			0			
ENTERTAINMENT, GRATUITIES, TRAVEL, SEMINARS for state officials, employees, their families (See #15)					-			
CONTRIBUTIONS to elected officials, candidates and political committees (See #16)	\$500		\$500					
7. ADVERTISING, PRINTING, INFORMATIONAL LITERATURE								
8. POLITICAL ADS, PUBLIC RELATIONS, POLLING, TELEMARKETING, ETC. (See #17)								
9. OTHER EXPENSES AND SERVICES (See #18)					1. 1			
10. TOTAL COMPENSATION AND EXPENSES INCURRED THIS MONTH	\$ 5,500	\$	\$ 5,000	\$	\$			
Application of the contract of	and the second second	(Attach additional	page(s) if you lobby for r	nore than three employe	ers.)			
11. EMPLOYERS' No. 1 Newland Comm	munities	,						
Subject matter of proposed legislation or other legislative Subject Matter, Issue or Bill No.	-	g the lobbyist was supporting or or State Agency Considering	• • •	Employer Repro	esented			
Transportation				1				
☐ Continued on attached pages								
13. Of the time spent lobbying, what percentage was devote	ed to lobbying: ti	he Legislature 80% State Age	encies <u>20</u> %.					
14. TERMINATION: (COMPLETE THIS ITEM ONLY IF YO	OU WISH TO TERMIN	IATE 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.	LOBBYIST SIGNATURE	~	DA	ATE			

L2

Lot	byist Name)			-					
			Reporting 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. 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.	Description, Place, etc.	Sponsoring Employer	Amount					
			-	*	\$					
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	-			*						
			-	-	-					
				-	•					
***************************************	year ware.	The second of the second second of the second secon	magneys mentalenders and a magnetic to the log on the contract.	or the second of	in the same of the					
	ALI/A	Tarahaman ing ing ing ing ing ing ing ing ing in			-					
п	N/A	Total expenses itemized on attached Memo Reports								
16.	If a monet	ary or in-kind contribution exceeding \$25 was given or transmitte								
	local or sta	lidates or elected officials; local and state officers or employees; ate ballot proposition. If a contribution exceeding \$25 was given ying campaign.								
	Date	Name of Individual or Committee Receiving Contribution	Source of Contribution		Amount					
	9/9	Rep. Wilcox	Nash Cascadia Verde, LLC		\$500.00					
	-				-					
		•								
		` -			- -					
-										
	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.)	and the second s	the Manager conference to the conference on succession of succession of the conference of the conferen	for formulating we want and an analysis of the model of the strength of the st					
17.		n attached pages. PAC Name: res for: a) political advertising supporting or opposing a state or	local candidate or ballot measure; or b) public	relations, telemarketing, polling or si	milar activities that					
	directly or attached p	indirectly are lobbying-related must be itemized by amount, veno age that also shows lobbyist name and report date. Put the agg	for or person receiving payment, and a brief of regate total of these expenditures on line 8.	description of the activity. Itemize eac	h expenditure on an					
18.	Payments or assistar	by the lobbyist for other lobbying expenses and services, includince in lobbying and payments for grass roots lobbying campaigns	ng payments to subcontract lobbyists, expert s (except advertising/printing costs listed in Ite	witnesses and others retained to provem 7).	ride lobbying services					
	Date	Recipient's Name and Address	Employer for Whom Expe	ense was incurred	Amount					
	-				\$					
-					-					
				-						
				-						
	-		-							
П	Continued	n attached page.								
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