TOLL FREE 1-877-601-2828

PDC OFFICE USE

Lobbyist Monthly Expense Report

TOLL FREE 1-877-601-2828 Lobbyist Monthly Expense Report (as required by Chapter 397, 1995 Session Laws)				Da	DATE	
				DATE FILED PDC		
						1. Lobbyist Name ISHBEL DICKENS
Mailing Address 3306 E. JOHN	51	-		_		
City SGAMG	State WM	Zip+4				
2 This report is A			112	New Address?	☐ Yes X No	
for the period HOOK 2017	This report corrects or amends the report for			Business Telephone		
(Month) (Year) (Month) ALL COMPLETE THIS PART		(Year)	12061851-6385			
Include all reportable expenditures by jobbylst and jobbylst's employer for on on bobylst still			COMPLETE IF YOU HAVE MORE THAN ONE EMPLOYER			
lobbyist incurred during the reporting period			Amount attributed to each employer			
	TOTAL AMOUNT	Amounts paid from lobbyist's own funds,	Employer	Employer	- Semplaine	
Expense Category	All employers plus own expense (Columns a + b + c + d and attached	not reimbursed or attributed to an employer.	No	No	No	
3. COMPENSATION earned from employer for lobbying this	pages)	Column A	Column B	Column C	Column D	
period (salary, wages, retainer) 4. PERSONAL EXPENSES for travel, food and refreshments	\$ \$		\$		\$	
and remealing		s D				
 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	\$ B	\$ D \$	\$ \$		c	
	7		ge(s) if you lobby for more	than three employer	re \	
11. EMPLOYERS' No. 1 (B) ASSOCIA No. (C)	TION OF MA	WU (A CTUCE)	> Home a	uvers (A	muo)	
					المالية المناصب المناسبة المراكبين	
12. Subject matter of proposed legislation or other legislative act	tivity or rulemaking the lol lative Committee or Sta	bbyist was supporting or opp te Agency Considering Ma	osing. tter	Employer Repres	sented	
☐ Continued on attached pages						
13. Of the time spent lobbying, what percentage was devoted to	lobbying: the Leai	slature% S	tate Agencies%	<u>.</u>		
14. TERMINATION: (COMPLETE THIS ITEM ONLY IF YOU	WISH TO TERMINAT	E YOUR REGISTRATION)	7	ó.		
Date registration ends: 12/3/12017 Employ	yer's name: ASSO	CENTION OF	MANUCACAT	rest thom	e Owners	
I understand that an L-2 report is required for any month or pa file a new registration prior to lobbying for that employer in the	ortion thoroat in which I a				i i	
certify that this report is true and complete to the best of my know	CERTI	FICATION				
and the same complete to the best of my know	wieage. LOE	BBYIST SIGNATURE		-	DATE	

LOBBYIST SIGNATURE Dickens CONTINUE ON REVERSE