

L2

DATE FILED PDC

DEC 3 0 2016

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

1. Lobbyist Name Adam Glickman Mailing Address 215 Columbia St. State 7in + 4 City ☐ Yes ☒ No New Address? 98104 WA Seattle Business Telephone This report corrects or This report is 2016 (206) 538 -5735 Oct for the period amends the report for (Year) (Month) (Year) (Month) COMPLETE IF YOU HAVE MORE THAN ONE EMPLOYER ALL COMPLETE THIS PART Include all reportable expenditures by lobbyist and lobbyist's employer for or on behalf of the lobbyist Amount attributed to each employer incurred during the reporting period TOTAL AMOUNT Amounts paid from Employer **Employer Employer** THIS MONTH lobbyist's own funds, not reimbursed or All employers plus No. 1 No. \_ No. \_\_\_ attributed to an own expense (Columns a + b + c employer. **Expense Category** + d and attached Column B Column C Column D Column A pages) COMPENSATION earned from employer for lobbying this 0.00\$ period (salary, wages, retainer) 696.52\$ 696.52 PERSONAL EXPENSES for travel, food and 0.0d 0.00 0.00 \$ refreshments ENTERTAINMENT, GRATUITIES, TRAVEL, SEMINARS for state officials, employees, their families (See #15) 0.00 0.00 0.00 CONTRIBUTIONS to elected officials, candidates and 453.518.69 0.00political committees (See #16) 453,518.69 ADVERTISING, PRINTING, INFORMATIONAL 0.00 0.00 LITERATURE 0.00 POLITICAL ADS, PUBLIC RELATIONS, POLLING, 0.00 0.00 TELEMARKETING, ETC. (See #17) 0.00 9. OTHER EXPENSES AND SERVICES (See #18) 0.00 0.00 0.0d 10 TOTAL COMPENSATION AND EXPENSES INCURRED 0.00\$ 454.215.21\$ 454,215.21 \$ THIS MONTH \$ (Attach additional page(s) if you lobby for more than three employers.) 11. EMPLOYERS' No. 1 (B) SEIU 775 215 Columbia St., Seattle, WA 98104 NAMES No. \_\_\_ (C) No. (D) 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 Employer Represented Subject Matter, Issue or Bill No. **SEIU 775** 2016 Legislative & **Budget Priorities** Continued on attached pages the Legislature 90% 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) Employer's name: Date registration ends: 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 LOBBYIST SIGNATURE I certify that this report is true and complete to the best of my knowledge. 6lickmun

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Lobbyist Name Adai	m Glickman	Reporting Period	Oct (Month)	<u>2016</u> (Year)			
Show the	of the following expenditures that were incurred by lobbyist or lot actual amount incurred for each individual or the amount fainment expenditures exceeding \$25 per occasion (including lobby odging and subsistence expenses in connection with a speech, gent and course fees in connection with a seminar or educational must provide an elected official with a copy of the L-2 or Memo R or her family member(s); or 2) providing travel, lodging, subsister	In y attributed to each.  ist's expense) for meals, beverages  presentation, appearance, trade missipprogram.  leport if the lobbyist reports: 1) sper	, tickets, par sion, semina ading on one	sses, or for other forms of entertain ar or educational program.	nment. verages for the official		
Date	Names of all Persons Entertained or Provided Travel, etc.	Description, Place, etc.	1	Sponsoring Employer	Amount		
					\$		
		, — , — , — , — , — , — , — , — , — , —					
N/A	Total expenses itemized on attached Memo Reports		,				
	on attached pages.		!ta!	the contribution below as an a file	no Deports local and		
state cand	ary or in-kind contribution exceeding \$25 was given or transmitte lidates or elected officials; local and state officers or employees; allot proposition. If a contribution exceeding \$25 was given to the ampaign.	political committees supporting or or	pposing any	candidate, elected official, officer	or employee or any local		
Date	Name of Individual or Committee Receiving Contribution	Sour	ce of Contri	bution	Amount		
10/31/16	See attached list				\$ 453,518.69		
				·			
N/A	Total contributions itemized on attached Memo Reports	·			453,518.69		
If contribut on C-4 rep	I tions were made directly by a political action committee associate port need not be again included in this L-2 report.)	ed, affiliated or sponsored by your er	mployer, sho	ow name of the PAC below. (Infor	mation reported by PAC		
		775 Quality Care Commi					
directly or attached p	res for: a) political advertising supporting or opposing a state or indirectly are lobbying-related must be itemized by amount, veno page that also shows lobbyist name and report date. Put the agg	lor or person receiving payment, and regate total of these expenditures or	d a brief des n line 8.	cription of the activity. Itemize eac	ch expenditure on an		
18. Payments assistance	by the lobbyist for other lobbying expenses and services, includi e in lobbying and payments for grass roots lobbying campaigns (o	ng payments to subcontract lobbyist except advertising/printing costs liste	s, expert wited in Item 7)	tnesses and others retained to pro	vide lobbying services or		
Date	Recipient's Name and Address	Employer for V	Vhom Exper	nse was incurred	Amount		
10/31/16	~				\$		
L Continued of	on attached page.						

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Subject Matter, Issue or Bill No.

(Use this page if you need additional space for Items 12, 15 or 16)

**L2** 

**Employer Represented** 

(Ose this page it you need additional space for items 12, 15 or 16)				
Lobbyist Name		<b>.</b>	0040	
Adam Glickman	Reporting	<u>Oct</u>	<u>2016</u>	
Adam Gilckman	Period	(Month)	(Year)	

Legislative Committee or State Agency Considering Matter

15. Date Names of all Persons Entertained or Provided Travel, etc. Description, Place, etc. Sponsoring Employer Amount \$ Source of Contribution Amount 16. Date Name of Individual or Committee Receiving Contribution

INFORMATION CONTINUED
(Use this page if you need additional space for Items 17 or 18)

Lobbyist Name Ada	m Glickman	Reporting Period	Oct (Month)	<u>2016</u> (Year)		**
17. Date	Names of Vendor or Person Receiving Payment	Description, Place, etc.		Sponsoring Employer		Amount
					\$	
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-		·				
•		`		en e e e e e e e e e e e e e e e e e e		
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18. Date	Recipient's Name and Address	Employer for Wh	om Expe	nse was Incurred		Amount
					\$	
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## **SEIU 775** October 2016

	10/31/2016	10/31/2016	10/29/2016	10/29/2016	10/24/2016	10/22/2016	10/05/2016		Date
	Campaign- Prevent Fraud & Protect Seniors	SEIU 775 Quality Care Committee	Raise Up Washington	Campaign- Prevent Fraud & Protect Seniors	Campaign- Prevent Fraud & Protect Seniors	SEIU 775 Quality Care Committee	Campaign- Prevent Fraud & Protect Seniors	Monetary/In-Kind Contributions from SEIU 775	Name
Total #16	InKind staff time provided by SEIU 775 to Ballot Measure I-1501	InKind staff time/overhead provided by SEIU 775 to SEIU 775 QCC	InKind staff time provided by SEIU 775 to Raise Up Washington Yes on 1433	InKind staff time provided by SEIU 775 to Ballot Measure I-1501	I-1501 - contribution	Contribution	I-1501 - contribution		Memo
453,518.69	1,664.00	729.17	562.76	562.76	350,000.00	50,000.00	50,000.00		Amount