DATE 04/10/2017



I certify that this report is true and complete to the best of my knowledge.

1/02

Lobbyist Monthly Expense Report

PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 TOLL FREE 1-877-601-2828 Lobbyist Monthly Expense Report (as required by Chapter 397, 1995 Session Laws)						DATE FILED PDC APR 10 2017		
Lobbyist Name							-	,
Michael G	roesch					-		
Mailing Address			· · · · · · · · · · · · · · · · · · ·					
120 State	Ave NE #294							
City		State		Zip + 4			New Address?	☐ Yes x No
Olympia	*		WA 98501					
2. This report is This report corrects or for the period amends the report for					Business Telephone 360 280-7187			
(Month) 03 (Year	r) 2017 (Month) ALL COMPLETE 7	(Year)		 	601	DI ETE IE VOII	HAVE MORE THAN	ONE EMBLOYER
Include all reportab	le expenditures by lobbyist and lob	·	ver for or o	n behalf of the lobbyist	COM			·
	incurred during the re	porting perio	d	-		Amount a	attributed to each employer	
Expense Category		THIS M All emplo own ex (Columns	AMOUNT MONTH byers plus xpense s a + b + c	Amounts paid from lobbyist's own funds, not reimbursed or attributed to an employer.		iployer lo. 1	Employer No. <u>2</u>	Employer No. 3
			attached ges)	Column A	Co	lumn B	Column C	Column D
	earned from employer for lobbying salary, wages, retainer)	\$ 1	5,500.00		\$	1,500.00\$	1,500.00	\$ 3,500.00
PERSONAL EXPE refreshments	NSES for travel, food and			\$				
	, GRATUITIES, TRAVEL, SEMINARS mployees, their families (See #15)	\$		\$				-
CONTRIBUTIONS political committees	to elected officials, candidates and s (See #16)	\$		\$	'			-
7. ADVERTISING, PR LITERATURE	RINTING, INFORMATIONAL			ł				
TELEMARKETING								
	S AND SERVICES (See #18)		0					
10. TOTAL COMPENS THIS MONTH	ATION AND EXPENSES INCURRED	l l	,500.00	\$	\$	1,500.00\$	1,500.00	
Subject Matte 1 Transpo 2 Transpo	rtation Tr rtation Tr Resources Bu	n WA Histo	orical So making the le mittee or Sta			. e e umade h —	Employer Repre- WA Roundta Microsoft The EWSHS	
13. Of the time spent lo	obbying, what percentage was devoted	to lobbying:	the Leg	jislature <u>100</u> %	State Age	encies	% .	
	COMPLETE THIS ITEM ONLY IF YO		ERMINATE	YOUR REGISTRATION)				
	nds: Em n L-2 report is required for any month on prior to lobbying for that employer i		eof in which I					
	-		CERT	TIFICATION		/		

LOBBYIST SIGNATURE



711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111

1/02

TOLL FREE 1-877-601-2828

Lobbyist Monthly Expense Report

(as required by Cr	iapter 397, 1995 Sessio	n Laws)				
1. Lobbyist Name				1		
Michael Groesch	****					
Mailing Address						
120 State Ave NE #294						
City	State	Zip + 4		New Address?	☐ Yes x No	
Olympia	WA	9850)]			
This report is for the period	This report correct amends the report			Business Telephone		
(Month) 03 (Year) 2017	(Month) (Y			360 -280 71	101	
ALL COMPLETE TH	IS PART		COMPLETE IF YOU	HAVE MORE THAN	ONE EMPLOYER	
Include all reportable expenditures by lobbyist and lobby		n behalf of the lobbyist	Amount a	ttributed to each en	plover	
incurred during the rep	orting period TOTAL AMOUNT	Amounts paid from				
Expense Category	THIS MONTH All employers plus own expense (Columns a + b + c	lobbylst's own funds, not reimbursed or attributed to an employer.	No. <u>4</u>	No. <u>5</u>	No. 6	
	+ d and attached pages)	Column A	Column B	Column C		
COMPENSATION earned from employer for lobbying		经实现的证据	_			
this period (salary, wages, retainer)	\$		\$ 1,500.00\$	2,000.00	\$ 2,000.00	
PERSONAL EXPENSES for travel, food and 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)					-	
9. OTHER EXPENSES AND SERVICES (See #18)						
10. TOTAL COMPENSATION AND EXPENSES INCURRED THIS MONTH	\$	\$	\$ 1,500.00\$	2,000.00	\$ 2,000.00	
		(Attach additional p	page(s) if you lobby for mor	e than three employe	rs.)	
11. EMPLOYERS' No. 4 (B) Explore Infor		- ·			,	
No_5_(c) Washington	I rust for Historic I	Preservation	e i magazina a statina - mas di	e notambe negati – september soom . – a	and the second of the second	
No. <u>6</u> (D) K&L Gates 12. Subject matter of proposed legislation or other legislative as Subject Matter, Issue or Bill No. Legis				Employer Repres	sented	
			*			
	nsportation	Explore Information Services				
	udget		WA Trust for Historic Preservation K&L Gates/PS Schl Coal			
6 Education E	Budget		ral '	Gales/FO OCITI	Coai	
A continued on allached pages						
14. TERMINATION: (COMPLETE THIS ITEM ONLY IF YOU	WISH TO TERMINATE	YOUR REGISTRATION)				
Date registration ends: Empl	oyer's name:					
I understand that an L-2 report is required for any month or file a new registration prior to lobbying for that employer in						
		TIFICATION			DATE	
I certify that this report is true and complete to the best of my kr	BBYIST SIGNATURE	()		DATE		
	.	Mund	me -		04/10/2017	

DATE

04/10/2017



711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 TOLL FREE 1-877-601-2828

I certify that this report is true and complete to the best of my knowledge.

DISCLOSURE

L2

1/02

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

1.	Lobbyist Name				,		
	Michael Groesch						
	Mailing Address				7		
	120 State Ave NE #294					,	
	City	State	Zip + 4				
	Olympia	WA	98501	•	New Address?	☐ Yes x No	
2.		This report correct			Business Telephor	пе	
	for the period	amends the report			360 -280 7°	187	
	(Month) 03 (Year) 2017	(Month) (Y	ear)	001101 FTF 1F 101		OUE CHELONES	
•	ALL COMPLETE TH nclude all reportable expenditures by lobbyist and lobby		n habalf of the labbuist	COMPLETE IF TO	J HAVE MORE THAN	ONE EMPLOTER	
•	incurred during the repo		or the lobbyist	Amount	attributed to each en	nployer	
	The state of the s	TOTAL AMOUNT THIS MONTH	Amounts paid from lobbyist's own funds,			Employer	
^ .	•	All employers plus	not reimbursed or	Employer No. 7	Employer - No. 8	Employer No. 9	
		own expense	attributed to an	No. 1	No. <u>o</u>	No. <u>5</u>	
	Expense Category	(Columns a + b + c + d and attached	employer.	Cature 5	0.1	Column D	
		pages)	Column A	Column B	Column C	Column D	
3.	COMPENSATION earned from employer for lobbying this period (salary, wages, retainer)					_	
		\$		\$ 2,000.00	1,500.00	\$	
4.	PERSONAL EXPENSES for travel, food and refreshments						
			\$				
5.	ENTERTAINMENT, GRATUITIES, TRAVEL, SEMINARS for state officials, employees, their families (See #15)						
6.	CONTRIBUTIONS to elected officials, candidates and political committees (See #16)				<u> </u>		
7.	ADVERTISING, PRINTING, INFORMATIONAL LITERATURE						
8.	POLITICAL ADS, PUBLIC RELATIONS, POLLING, TELEMARKETING, ETC. (See #17)						
9.	OTHER EXPENSES AND SERVICES (See #18)						
10	. TOTAL COMPENSATION AND EXPENSES INCURRED						
	THIS MONTH	\$	\$	\$ 2,000.00	1,500.00	¢	
		ΙΨ	 	age(s) if you lobby for mo			
4.4	. EMPLOYERS'		(Attach additional pa	age(s) if you lobby for the	are man insee employe	15.)	
	NAMES No. 7 (B) Jensen Moto	r Boat Co.					
	No. 8 (c) Parametrix						
~		g =	n manus e e e embre au con	, ., - *	ng - manggar yang mengang pan	*	
12	No. 9 (D) . Subject matter of proposed legislation or other legislative ac	rtivity or rulemaking the le	obbyjet wae eupporting or o	nnosina		*	
12			ate Agency Considering N		Employer Repre	sented	
	7 Transportation Trai	nsportation		Jense	n Motor Boat Co.		
		nsportation			Parametrix		
	9	•		÷			
	X Continued on attached pages						
14	. TERMINATION: (COMPLETE THIS ITEM ONLY IF YOU	WISH TO TERMINATE	YOUR REGISTRATION)			· · · · · · · · · · · · · · · · · · ·	
	Date registration ends: Emplo	oyer'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 one	ce I have terminated m	y registration, I mus	

CERTIFICATION
LOBBYIST SIGNATURE

Menu