

DATE FILED PDC  
APR 17 2017

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

1. Lobbyist Name: David Michener Page I  
 Mailing Address: P.O. Box 12419  
 City: Olympia State: WA Zip + 4: 98508  
 New Address?  Yes  No  
 2. This report is for the period: March 2017 (Month) (Year)  
 This report corrects or amends the report for: \_\_\_\_\_ (Month) (Year)  
 Business Telephone: 360 770 6200

ALL COMPLETE THIS PART		COMPLETE IF YOU HAVE MORE THAN ONE EMPLOYER			
Include all reportable expenditures by lobbyist and lobbyist's employer for or on behalf of the lobbyist incurred during the reporting period		Amount attributed to each employer			
Expense Category	TOTAL AMOUNT THIS MONTH All employers plus own expense (Columns a + b + c + d and attached pages)	Amounts paid from lobbyist's own funds, not reimbursed or attributed to an employer. Column A	Employer No. <u>1</u>	Employer No. <u>2</u>	Employer No. <u>3</u>
			Column B	Column C	Column D
3. COMPENSATION earned from employer for lobbying this period (salary, wages, retainer)	\$30,970		\$2,500	\$5,500	\$6,000
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)					
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	\$30,970	\$	\$2,500	\$5,500	\$6,000

(Attach additional page(s) if you lobby for more than three employers.)

11. EMPLOYERS' NAMES
- No. 1 (B) Port of Kalama
  - No. 2 (C) Washington Beverage Assoc.
  - No. 3 (D) Washington Health Care Assoc.

12. Subject matter of proposed legislation or other legislative activity or rulemaking the lobbyist was supporting or opposing.  
 Subject Matter, Issue or Bill No. \_\_\_\_\_ Legislative Committee or State Agency Considering Matter \_\_\_\_\_ Employer Represented \_\_\_\_\_

Continued on attached pages

13. Of the time spent lobbying, what percentage was devoted to lobbying: the Legislature 95 % State Agencies 5 %.

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.

LOBBYIST SIGNATURE: David Michener DATE: 4/15/17

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

1. Lobbyist Name \_\_\_\_\_  
 Mailing Address \_\_\_\_\_  
 City \_\_\_\_\_ State \_\_\_\_\_ Zip + 4 \_\_\_\_\_  
 New Address?  Yes  No

2. This report is for the period \_\_\_\_\_ (Month) \_\_\_\_\_ (Year)  
 This report corrects or amends the report for \_\_\_\_\_ (Month) \_\_\_\_\_ (Year)  
 Business Telephone ( ) - -

ALL COMPLETE THIS PART		COMPLETE IF YOU HAVE MORE THAN ONE EMPLOYER			
Include all reportable expenditures by lobbyist and lobbyist's employer for or on behalf of the lobbyist incurred during the reporting period		Amount attributed to each employer			
Expense Category	TOTAL AMOUNT THIS MONTH All employers plus own expense (Columns a + b + c + d and attached pages)	Amounts paid from lobbyist's own funds, not reimbursed or attributed to an employer. Column A	Employer No. <u>4</u> Column B	Employer No. <u>5</u> Column C	Employer No. <u>6</u> Column D
3. COMPENSATION earned from employer for lobbying this period (salary, wages, retainer)	\$		\$ 10,000	\$ 2,570	\$ 4,400
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)					
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	\$	\$	\$ 10,000	\$ 2,570	\$ 4,400

(Attach additional page(s) if you lobby for more than three employers.)

11. EMPLOYERS' NAMES
- No. 4 (B) Peace Health
  - No. 5 (C) Boswell Consulting
  - No. 6 (D) Northwest Marine Technologies

12. Subject matter of proposed legislation or other legislative activity or rulemaking the lobbyist was supporting or opposing.  
 Subject Matter, Issue or Bill No. \_\_\_\_\_ Legislative Committee or State Agency Considering Matter \_\_\_\_\_ Employer Represented \_\_\_\_\_

Continued on attached pages

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LOBBYIST SIGNATURE \_\_\_\_\_ DATE 4/15/17

Client	Subject Matter	Legislative Committee/State Agency
Peace Health	Health Care Insurance	Senate/House Health Care Department of Health Senate/House Ways & Means House Financial Inst, & Insurance
Washington Beverage Association	Environmental Issues Tax Issues General Business	Senate/House Environmental Affairs Senate Ways & Means House/Senate Commerce & Labor House Capital Facilities House Finance
Port of Kalama	Transportation Economic Development	Trade & Economic Development Transportation Commerce & Labor
Washington Health Care Association	Long-term Care	Senate Health Care House Health Care Senate Ways & Means House Appropriations
Boswell Consulting	Health Care	Senate/House Health Care
Northwest Marine Technologies	State Budget	Dept. Fish & Wildlife Senate Natural Resources & Parks House Agriculture & Natural Resources Senate Ways & Means House Appropriations