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

State Agencies

DATE FILED PDC FEB 08 2017

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

Lobbyist Name Thomas Franta Mailing Address 210 S. Hudson Street, #324 State Zip + 4 City New Address? ☐ Yes ⊠ No 98134 WA Seattle Business Telephone This report corrects or This report is for the period 01 2017 amends the report for (206) 832 -8505 (Month) (Year) (Month) (Year) 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** THIS MONTH lobbyist's own funds, Employer, not reimbursed or All employers plus No. ___ No. 1 No. ___ attributed to an own expense employer. (Columns a + b + c **Expense Category** + d and attached Column C Column D Column B pages) Column A COMPENSATION earned from employer for lobbying. this period (salary, wages, retainer) \$ 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) OTHER EXPENSES AND SERVICES (See #18) 10. TOTAL COMPENSATION AND EXPENSES INCURRED THIS MONTH \$ 0 \$ 0\$

11. EMPLOYERS No. 1 (B) WA Charters Action NAMES No. ___ (C) 12. Subject matter of proposed legislation or other legislative activity or rulemaking the lobbyist was supporting or opposing. **Employer Represented** Legislative Committee or State Agency Considering Matter Subject Matter, Issue or Bill No. WA Charters Action **Charter Schools Legislative** Legislature Fix (ESSB 6194, HB3002)

13. Of the time spent lobbying, what percentage was devoted to lobbying: the Legislature 100% 14. TERMINATION: (COMPLETE THIS ITEM ONLY IF YOU WISH TO TERMINATE YOUR REGISTRATION)

Employer's name: Date registration ends:

Continued on attached pages

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.						
W. 10 10 10 10 10 10 10 10 10 10 10 10 10	CERTIFICATION	1				
certify that this report is true and complete to the best of my knowledge.	LOBBYIST SIGNATURE >	DATE				

CONTINUE ON REVERSE

02/09/2017

Page	2			LZ	•	
Lobbyist I		as Franta	Reporting Period	O1 (Month)	2017 (Year)	
famili enter • En • Tra • En Lobb	ies. In t rtaining ntertainm avel, loo rrollmen ovists mi	the following expenditures that were incurred by lobbyist or lothe total amount column, show the total amount spent for each individual, as shown in the example. When reporting the expenditures exceeding \$50 per occasion (including lobbying and subsistence expenses in connection with a speech, and course fees in connection with a seminar or educational st provide an elected official with a copy of the L-2 or Memo Fer family member(s); or 2) providing travel, lodging, subsister	each occasion including any stag ga reception or similar event, sh yist's expense) for meals, beverages presentation, appearance, trade mis program. Report if the lobbyist reports: 1) spei	jing costs, tax, an ow the amount fa s, tickets, passes, c sion, seminar or ec nding on one occa	nd gratuity. Also show the hirly attributed to each ind or for other forms of entertai ducational program. sion over \$50 for food or be	e actual amount spent ividual. nment. everages for the official
Date mm/dd/y		Names of all Persons Entertained or Provided Travel, etc. Include actual amounts spent for entertainment Example: Sen Bow (\$32), Rep Arrow (\$28), and J D Lobbyist (\$36) tax & gratuity (\$25.41)	Description, Place, etc. Dinner at Anthony's, Olympia	XYZ Cor	Sponsoring Employer	Total Amount \$121 41
		N/A	·			
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N/A		Total expenses itemized on attached Memo Reports		<u> </u>		
16. If a n	Continued on attached pages 16. If a monetary or in-kind contribution exceeding \$25 was given or transmitted by the lobbyist to any of the following, itemize the contribution below or on a Memo Report: local and state candidates or elected officials, local and state officers or employees; political committees supporting or opposing any candidate, elected official, officer or employee or any local or state ballot proposition. If a contribution exceeding \$25 was given to the following, itemize the contribution below: a caucus political committee; a political party; or a grass					
Date		Name of Individual or Committee Receiving Contribution N/A	Source	ee of Contribution		Amount \$
N/A		Total contributions itemized on attached Memo Reports — ns were made directly by a political action committee associat	ed, affiliated or sponsored by your e	employer, show nar	me of the PAC below. (Info	rmation reported by
	PAC on C-4 report need not be again included in this L-2 report.)					
17. Expe	enditure ctly or in ched pa	attached pages PAC Name s for: a) political advertising supporting or opposing a state or directly are lobbying-related must be itemized by amount, ven ge that also shows lobbyist name and report date. Put the age	dor or person receiving payment, an gregate total of these expenditures of	nd a brief description on line 8.	on of the activity. Itemize ea	ach expenditure on an
18. Payr or as	ments b ssistanc	y the lobbyist for other lobbying expenses and services, include e in lobbying and payments for grass roots lobbying campaigr	ling payments to subcontract lobbys is (except advertising/printing costs	sts, expert witnesse listed in Item 7).	es and others retained to pro	ovide lobbying services
Date		Recipient's Name and Address N/A	Employer for W	hom Expense was	Incurred	Amount \$
☐ Cont	tinued on	attached page	l 			

INFORMATION CONTINUED

L2

(Use th	nis page if you need additional space f	or Items 12, 15 or 16)				
Lobbyist Na	me		Deporting	Ω1	2017	
Th	omas Franta		Reporting Period	01 (Month)	<u>2017</u> (Year)	
12. Sut	bject Matter, Issue or Bill No.	Legislative Committee	or State Agency Considering	matter	Employer Represe	ntea
N/	A				•	
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15. Date	Names of all Persons Entertained or	Provided Travel, etc.	Description, Place, etc.	- T	Sponsoring Employer	Amount
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16. Date	Name of Individual or Committee Re	eceiving Contribution	Sou	rce of Contrib	ution	Amount
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INFORMATION CONTINUED

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

Lobbyist Name Thor	nas Franta	Reporting <u>01</u> Period (Month	<u>2017</u> (Year)	
17. Date	Names of Vendor or Person Receiving Payment	Description, Place, etc.	Sponsoring Employer	Amount
	N/A			
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18. Date	Recipient's Name and Address	Employer for Whom Exp	ense was Incurred	Amount
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