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

L2

PDC OFFICE USE

DATE FILED PDC

MAR 162017

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

Lobbyist Name Mailing Addre New Address? This report is This report corrects or **Business Telephone** for the period amends the report for (Year) (Month) **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 Amount attributed to each employer lobbyist incurred during the reporting period TOTAL AMOUNT Amounts paid from THIS MONTH lobbyist's own funds, Employer **Employer Employer** All employers plus not reimbursed or No. ___ No. No. ___ own expense attributed to an **Expense Category** (Columns a + b + c employer. + d and attached Column C Column D pages) Column A COMPENSATION earned from employer for lobbying this 2:28 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 (Attach additional page(s) if you lobby for more than three employers.) No. 1 Teamsters Local #38 11. EMPLOYERS' NAMES 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** Labor Issues Non-Compete HB 1967 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) 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

			CONTINUE ON REVERSE	
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LOBBYIST SIGNATURE			DATE	

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Lobbyist Nam	le	Reporting Period (Montr	(Year)	
families. entertali e Enterta e Recep e Travel e Enrollr Lobbyists	Il of the following expenditures that were incurred by lobbyist or lot in the total amount column, show the total amount spent for hing each individual, as shown in the example. Simment expenditures exceeding \$50 per occasion (including lobbitions. See WAC 390-20-020A, L-2 Reporting Guide, to determine lodging and subsistence expenses in connection with a speech, nent and course fees in connection with a seminar or educational must provide an elected official with a copy of the L-2 or Memo Is or her family member(s); or 2) providing travel, lodging, subsistence.	r each occasion including any staging cos yist's expense) for meals, beverages, tickets, e if per person cost is required. presentation, appearance, trade mission, ser program. Report if the lobbyist reports: 1) spending on	passes, or for other forms of entertain minar or educational program. one occasion over \$50 for food or beve	actual amount spent ment. erages for the official
Date mm/dd/year	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	Sponsoring Employer XYZ Corporation	Total Amount \$121.41
	NA			
N/A	Total expenses itemized on attached Memo Reports	1	<u> </u>	ı
	on attached pages.			
state car local or s	stary or in-kind contribution exceeding \$25 was given or transmitted didates or elected officials; local and state officers or employees, tate ballot proposition. If a contribution exceeding \$25 was given bying campaign.	political committees supporting or opposing	any candidate, elected official, officer	or employee or any
Date	Name of Individual or Committee Receiving Contribution	Source of Cor	atribution	Amount
				\$
N/A	Total contributions itemized on attached Memo Reports			!
	utions were made directly by a political action committee associa sport need not be again included in this L-2 report.)	ted, affiliated or sponsored by your employer,	show name of the PAC below. (Inform	nation reported by PAC
	on attached pages. PAC Name			7
directly of attached	ures for: a) political advertising supporting or opposing a state or r indirectly are lobbying-related must be itemized by amount, ven page that also shows lobbyist name and report date. Put the agg	dor or person receiving payment, and a brief or pregate total of these expenditures on line 8.	description of the activity. Itemize each	n expenditure on an
	s by the lobbyist for other lobbying expenses and services, includ ance in lobbying and payments for grass roots lobbying campaigr			ide lobbying services
Date	Recipient's Name and Address	Employer for Whom Exp	ense was incurred	Amount
	,			\$
☐ Continued	on attached page.	'		1

INFORMATION CONTINUED

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

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12. Subject Matter, Issue or Bill No. Legislative Committee or State Agency Considering Matter Employer Represented 15. Date Names of all Persons Energtained or Provided Travel, etc. Description, Place, etc. Sponsoring Employer Amount \$ 16. Date Name of Individual or Committee Receiving Contribution Source of Contribution Amount \$	Lobbyist Name	е					
15. Date Names of all Persons Entertained or Provided Travel, etc. Description, Place, etc. Sponsoring Employer Amount \$ 15. Date Name of Inclividual or Committee Receiving Contribution Source of Contribution Amount				Reporting Period	(Month)	(Year)	
18. Date Name of Individual or Committee Receiving Contribution Source of Contribution Amount	12. Subj	ect Matter, Issue or Bill No.	Legislative Commit	tee or State Agency Considering	Matter	Employer Represent	ted
16. Date Name of Individual or Committee Receiving Contribution Source of Contribution Amount							
16. Date Name of Individual or Committee Receiving Contribution Source of Contribution Amount							
16. Date Name of Individual or Committee Receiving Contribution Source of Contribution Amount							
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16. Date Name of Individual or Committee Receiving Contribution Source of Contribution Amount	15. Date	Names of all Persons Entertained o	or Provided Travel, etc.	Description, Place, etc.	SF	onsoring Employer	Amount
16. Date Name of Individual or Committee Receiving Contribution Source of Contribution Amount							\$
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	16. Date	Name of Individual or Committee R			ce of Contribution		Amount
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INFORMATION CONTINUED

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

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Lobbyist Nam	e	Reporting Period (Month)	(Year)
17. Date	Names of Vendor or Person Receiving Payment	Description, Place, etc.	Sponsoring Employer Amount
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18. Date	Recipient's Name and Address	Employer for Whom Exper	nse was Incurred Amount \$
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