PDC OFFICE USE

APR 10 201/

Lobbyist Monthly Expense Report

	(as required by Cri	apter 397, 1995 Session	Laws)				
1.	Lobbyist Name				7		
	Pete Subkoviak						
	Mailing Address						
	215 Columbia				-		
	City Seattle	State WA	Zip + 4 98104		New Address?	☐ Yes ☒ No	
2	This report is	This report corrects			Business Telephor	ne	
۷.	for the period	amends the report		2017	(206) 538 -5		
	(Month) (Year)		(Month)	(Year)	<u> </u>		
	ALL COMPLETE THI		- b - b - 16 - 5 4 b - 1 - b - 1 - 1 - 1	COMPLETE IF YOU	HAVE MORE THAN	ONE EMPLOYER	
ını	clude all reportable expenditures by lobbyist and lobby incurred during the repo		n benair of the lobbyist	Amount a	ttributed to each e	mployer	
	Expense Category	TOTAL AMOUNT THIS MONTH All employers plus own expense (Columns a + b + c + d and attached	Amounts paid from lobbyist's own funds, not reimbursed or attributed to an employer.	Employer No. <u>1</u>	Employer No	Employer No	
_		pages)	Column A	Column B	Column C	Column D	
3.	COMPENSATION earned from employer for lobbying this period (salary, wages, retainer)	\$ 5,087.74		\$ 5,087.74\$.	\$	
4.	PERSONAL EXPENSES for travel, food and refreshments	0.00	\$	0.00			
5.	ENTERTAINMENT, GRATUITIES, TRAVEL, SEMINARS for state officials, employees, their families (See #15)	0.00		0.00		1	
6.	CONTRIBUTIONS to elected officials, candidates and political committees (See #16)	0.00		0.00			
7.	ADVERTISING, PRINTING, INFORMATIONAL LITERATURE	0.00		0.00			
8.	POLITICAL ADS, PUBLIC RELATIONS, POLLING, TELEMARKETING, ETC. (See #17)	0.00		0.00			
9.	OTHER EXPENSES AND SERVICES (See #18)	0.00		0.00			
10	TOTAL COMPENSATION AND EXPENSES INCURRED THIS MONTH	\$ 5,087.74	\$ 0.00	\$ 5,087.74\$	3	\$	
			(Attach additional pa	ge(s) if you lobby for mor	e than three employer	s.)	
11	11. EMPLOYERS' No. <u>1</u> (B) SEIU 775 215 Columbia St., Seattle, WA 98104						
	No (C)						
	No (D)						
12	Subject matter of proposed legislation or other legislative act Subject Matter, Issue or Bill No. Legis		obyist was supporting or opp te Agency Considering Ma	=	Employer Repre	sented	
	LT Care worker IP Contract SEIU 775						
	Continued on attached pages						
13. Of the time spent lobbying, what percentage was devoted to lobbying. the Legislature 90% State Agencies%.							
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 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.						
		~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~~	TFICATION				
Ιc	I certify that this report is true and complete to the best of my knowledge. LOBBYIST SIGNATURE DATE						
			V. Sulsh	oviale	4,	15117	
	12.00 M. 10.10 M. 10.			_	CONTINUE OF	N REVERSE	

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Lob	oyist Name Pete	e Subkoviak		Jan (Month)	2017 (Year)			
15.	 5. Itemize all of the following expenditures that were incurred by lobbyist or lobbyist employer(s) for legislators, state officials, state employees and members of their immediate families Show the actual amount incurred for each individual or the amount fairly attributed to each. Entertainment expenditures exceeding \$25 per occasion (including lobbyist's expense) for meals, beverages, tickets, passes, or for other forms of entertainment. Travel, lodging and subsistence expenses in connection with a speech, presentation, appearance, trade mission, seminar or educational program. Enrollment and course fees in connection with a seminar or educational program. Lobbyists must provide an elected official with a copy of the L-2 or Memo Report if the lobbyist reports: 1) spending on one occasion over \$50 for food or beverages for the official and/or his or her family member(s); or 2) providing travel, lodging, subsistence expenses or enrollment or course fees for the official and, if permitted, the official's family. 							
	Date	Names of all Persons Entertained or Provided Travel, etc.	Description, Place, etc.		ponsoring Employer	Amount \$		
	N/A	Total expenses itemized on attached Memo Reports		<u> </u>		İ		
_								
	If a moneta	on attached pages ary or in-kind contribution exceeding \$25 was given or transmitted lidates or elected officials; local and state officers or employees; po- lilot proposition. If a contribution exceeding \$25 was given to the fampaign.	olitical committees supporting or oppo	osing any candida	ite, elected official, officer or	employee or any local		
	Date	Name of Individual or Committee Receiving Contribution	Source	of Contribution		Amount		
						\$		
	N/A Total contributions itemized on attached Memo Reports If contributions were made directly by a political action committee associated, affiliated or sponsored by your employer, show name of the PAC below. (Information reported by PAC on C-4 report need not be again included in this L-2 report.)							
	Continued of	on attached pages PAC Name SEIU 7	75 Quality Care Committe	ee				
17.	7. Expenditures for: a) political advertising supporting or opposing a state or local candidate or ballot measure; or b) public relations, telemarketing, polling or similar activities that directly or indirectly are lobbying-related must be itemized by amount, vendor or person receiving payment, and a brief description of the activity. Itemize each expenditure on an attached page that also shows lobbyist name and report date. Put the aggregate total of these expenditures on line 8.							
18.	8. Payments by the lobbyist for other lobbying expenses and services, including payments to subcontract lobbyists, expert witnesses and others retained to provide lobbying services or assistance in lobbying and payments for grass roots lobbying campaigns (except advertising/printing costs listed in Item 7).							
	Date	Recipient's Name and Address	Employer for Who		Incurred	Amount		
	Continued	on attached page				\$		

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

Lobbyist Name
Pete Subkoviak

Reporting Period

Reporting Period

Month)

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(Year)

12. Subject Matter, Issue or Bill No. Legislative Committee or State Agency Considering Matter

Employer Represented

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

INFORMATION CONTINUED

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

Lobbyist Name Pete	e Subkoviak	Reporting <u>Jan</u> Period (Month	2017 (Year)	
17. Date	Names of Vendor or Person Receiving Payment	Description, Place, etc.	Sponsoring Employer	Amount \$
18. Date	Recipient's Name and Address	Employer for Whom Exp	l ense was Incurred	Amount \$