



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

**L2**  
 1/15

PDC OFFICE USE

RECEIVED

JAN 19 2017

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

Public Disclosure Commission

1. Lobbyist Name  
**Gail Toraason McGaffick, Inc.**

Mailing Address  
**P.O. Box 47**

City **Olympia** State **WA** Zip + 4 **98507-0047**

New Address?  Yes  No

2. This report is for the period **December 2016** (Month) (Year)  
 This report corrects or amends the report for \_\_\_\_\_ (Month) (Year)

Business Telephone  
**(360 ) 754 -7266**

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> Column B	Employer No. <u>2</u> Column C	Employer No. <u>3</u> Column D
3. COMPENSATION earned from employer for lobbying this period (salary, wages, retainer)	\$14,100.00		\$ 3,000.00	\$ 2,500.00	\$ 2,600.00
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)					
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	\$14,100.00		\$ 3,000.00	\$ 2,500.00	\$ 2,600.00

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

11. EMPLOYERS' NAMES
- No. 1 (B) Washington State Podiatric Medical Association
  - No. 2 (C) Virginia Mason Memorial
  - No. 3 (D) Melanie Stewart & Associates, LLC

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 \_\_\_\_\_

Please see attached list of issues

Continued on attached pages

13. Of the time spent lobbying, what percentage was devoted to lobbying: the Legislature 30% State Agencies 70%.

**14. TERMINATION: (COMPLETE THIS ITEM ONLY IF YOU WISH TO TERMINATE YOUR REGISTRATION)**

Date registration ends: 11/1/16

Employer's name: **Yakima Valley Memorial Hospital (name change to Virginia Mason Memorial—see #2 above)**

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.

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

**CERTIFICATION**

LOBBYIST SIGNATURE

DATE

*Gail Toraason McGaffick*

11/16/17

(CONTINUE ON REVERSE)

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New Address?  Yes  No

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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. Column D
3. COMPENSATION earned from employer for lobbying this period (salary, wages, retainer)			\$ 3,500.00	\$ 2,500.00	\$
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)					
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	\$	\$	\$ 3,500.00	\$ 2,500.00	\$

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

11. EMPLOYERS' NAMES
- No. 4 (B) Fresenius Medical Care North America
  - No. 5 (C) Spectrum Health Systems, Inc.
  - No. (D)

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

Please see attached list of issues

Continued on attached pages

13. Of the time spent lobbying, what percentage was devoted to lobbying: the Legislature 30% State Agencies 70%.

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 \_\_\_\_\_ DATE \_\_\_\_\_

CONTINUE ON REVERSE

Lobbyist Name

Gail Toraason McGaffick, Inc.

Reporting Period

December 2016 (Month) (Year)

15. 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. In the total amount column, show the total amount spent for each occasion including any staging costs, tax, and gratuity. Also show the actual amount spent entertaining each individual, as shown in the example.

- Entertainment expenditures exceeding \$50 per occasion (including lobbyist's expense) for meals, beverages, tickets, passes, or for other forms of entertainment.
Receptions. See WAC 390-20-020A, L-2 Reporting Guide, to determine if per person cost is required.
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.

Table with 5 columns: Date, Names of all Persons Entertained or Provided Travel, etc., Description, Place, etc., Sponsoring Employer, Total Amount. Includes example row for dinner at Anthony's and a total row for N/A.

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.

Table with 4 columns: Date, Name of Individual or Committee Receiving Contribution, Source of Contribution, Amount. Includes a total row for N/A.

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 on attached pages.

PAC Name: PODPAC

17. 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.

18. 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).

Table with 4 columns: Date, Recipient's Name and Address, Employer for Whom Expense was Incurred, Amount. Includes a total row for N/A.

Continued on attached page.

Gail Toraason McGaffick, Inc. (page 4 of 4)  
#12—Subject Matter, December 2016

ISSUES	AGENCY	CLIENT
DOC chemical dependency services	Legislature, DOC, OFM	5
Certificate of need rulemaking for dialysis facilities	DOH	4
Monitoring health care rulemaking	DOH, HCA	All
HB 1713, and HB 1916, integration of chemical dependency and mental health	DSHS	5
Massage rulemaking	DOH, Massage Board	3
Interim studies, health care	Health care committees	All
PCI rulemaking	DOH	2
Prior authorization rulemaking	OIC	1,2,3