

Employer's Name Continental Casualty Company		Year report covers: 2016	
--	--	------------------------------------	--

9. Entertainment, tickets, passes, travel expenses (including transportation, meals, lodging, etc.) and enrollment or course fees provided to legislators, state officials, state employees and members of their immediate families. See instruction manual for details.			
Name and Title None	Cost or Value \$	Date and Description of Expense	
<input type="checkbox"/> Information continued on attached pages			

10. Contributions (not reported by the lobbyist) totaling over \$25 to a legislative or statewide executive office candidate, a committee formed to support or oppose one of these candidates or a committee supporting or opposing a statewide ballot measure. Do not list employer-affiliated PAC contributions.		
Name of Recipient Enterprise Washington Jobs PAC Greg Zembel for Justice	Amount 10,000.00 2,000.00	Date (and, if In-Kind, Description) 6-20-16 6-23-16

11. Independent expenditures in support of or opposition to a) a legislative or statewide executive office candidate or b) a statewide ballot proposition. See instruction manual for definition of "independent expenditure."		
Candidate's Name, Office Sought & Party or Ballot Proposition Number & Brief Description None	Amount \$	Date and Description of Expense (Note if Support or Oppose)
<input type="checkbox"/> Information continued on attached pages		

12. Compensation of \$2,000 or more during the preceding calendar year for employment or professional services paid to state elected officials, successful candidates for state office and each member of their immediate family.			
Name None	Relationship to Candidate or Elected Official if Member of Family	Amount (Code)**	Description of Consideration or Services Exchanged for Compensation
<input type="checkbox"/> Information continued on attached pages			

13. Compensation of \$2,000 or more during the preceding calendar year for professional services paid to any corporation, partnership, joint venture, association or other entity in which state elected official, successful state candidate or member of their immediate family hold office, partnership, directorship or ownership interest of 10% or more.			
Firm Name None	Person's Name	Amount (Code)**	Description of Consideration or Services Exchanged for Compensation
<input type="checkbox"/> Information continued on attached pages			

14. Any expenditure, not otherwise reported, made directly or indirectly to a state elected official, successful candidate for state office or member of their immediate family, if made to honor, influence or benefit the person because of his or her official position.		
Name None	Amount \$	Date and Purpose
<input type="checkbox"/> Information continued on attached pages		

****DOLLAR**
CODE AMOUNT

A - \$1 to \$3,999
B - \$4,000 to \$19,999
C - \$20,000 to \$39,999

****DOLLAR**
CODE AMOUNT

D - \$40,000 to \$99,999
E - \$100,000 or more

L3

Year report covers:

Continental Casualty Company

2016

2. Names of Registered Lobbyists	Col 1-Salary	Col 2-Other	Total Amount
\$	\$	\$	
Total From This Page			

9. Entertainment, etc.

[illegible]

INFORMATION CONTINUED

(Use this page if you need additional space for Items 10 or 11)

L3

Employer's Name

Continental Casualty Company

Year report covers:

2016

10. Contributions

Name of Recipient

Amount

Date (and, if In-Kind, Description)

\$

David DeWolf for Justice

2000.00

6-23-16

Friends of Ann Rivers

500.00

6-23-16

Friends to Elect Lynda Wilson

500.00

6-23-16

Sen Committee for Mark Schoesler

1000.00

6-23-16

Friends of Dan Kristiansen

1000.00

6-23-16

Citizens for Steve Litzow

500.00

6-23-16

Friends of Hans Zeiger

500.00

6-23-16

Friends of Steve Oban

500.00

6-23-16

11. Independent expendituresCandidate's Name, Office Sought & Party or
Ballot Proposition Number & Brief Description

Amount

Date and Description of Expense
(Note if Support or Oppose)

\$

INFORMATION CONTINUED

(Use this page if you need additional space for Items 12 thru 14)

L3

Employer's Name Continental Casualty Company		Year report covers: 2016	
12. Compensation of \$2,000 or more for employment, etc.			
Name	Relationship to Candidate or Elected Official if Member of Family	Amount (Code)**	Description of Consideration or Services Exchanged for Compensation
13. Compensation of \$2,000 or more for professional services			
Firm Name	Person's Name	Amount (Code)**	Description of Consideration or Services Exchanged for Compensation
14. Any expenditure not otherwise reported			
Name	Amount \$	Date and Purpose	

****DOLLAR
CODE AMOUNT**A - \$1 to \$3,999
B - \$4,000 to \$19,999
C - \$20,000 to \$39,999****DOLLAR
CODE AMOUNT**D - \$40,000 to \$99,999
E - \$100,000 or more