

Employer's Lobbying Expenses

L3

THIS SPACE FOR OFFICE USE

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DATE FILED PDC

	TOLL FREE 1-877-601-2	328			1	/15	· · · · · · · ·		
۱.	Employer's Name (Use complete company, associa	ation, union c	r entity name.)				בכם (0 ^ `0	047
	United Technologies Corporation Attention (Identify person to whom inquiries about	4h - : C	:	OT 4L	- Interviet		FEB :	787	.017
	Allen Thompson	the informat	ion below should be directed, No	or ui	ie loobyist.)				
	Mailing Address		Mr. Committee and the committee of the c	Te	lephone				
	1101 Pennsylvania Avenue NW 10 th	Flr		10	(202) 336 -7455				
		ate	Zip + 4	E-I	Mail Address		ear Report	Covers	<u> </u>
	Washington	DC	20004	1	llen.Thompson@utc		016	20.01	•
	.,			or					
	IIS REPORT MUST BE FILED BY THE <u>LAST</u> ashington State Legislature and/or any state agen					the previous	calendar y	ear for	· lobbying the
2.	Identify each of your lobbyists/lobbying firms belo (plus obligated) for other lobbying related expense legislative candidates, reimbursement for entertain through lobbyists in the space designated.	s that were m	ade by or through the lobbyist <u>ar</u>	<u>ıd</u> rep	orted by the lobbyist on	the monthly L-	2 report (e.	g., con	tributions to
	Names of Registered Lobbyists (if payments were	to lobbying	firm, list firm name)		Col 1-Salary	Col 2-C	ther	ן ז	Total Amount
Са	rney Badley Spellman, P.S.				\$ 30,000.00	\$	64.77	\$	30,064.77
			····						
			Total From Attached P	200					
			Total From Attached P	age				ф.	20.064.77
	Information continued on attached pages		`		Total Expenses B	y or Through	Lobbyists	\$	30,064.77
DC	NOT INCLUDE EXPENDITURES ALREADY	ACCOUNT	ED FOR IN ITEM 2 ABOVE	when	completing Items 3 thr	ough 7 below.			
3.	Other expenditures made by the employer for lobb		-						
	a. to vendors on behalf of or in support of registe	red lobbyists	(e.g., entertainment credit card p	urcha	ases);			\$	0.00
 to or on behalf of expert witnesses or others retained to provide lobbying services who offer specialized knowledge or expertise that assists the employer's lobbying effort; 							0.00		
c. for entertainment, tickets, passes, travel expenses (e.g., transportation, meals, lodging, etc.) and enrollment or course fees provided to legislators, state officials, state employees and members of their immediate families; (Also complete Item 9.)							0.00		
	d. for composing, designing, producing and distri	buting inform	national materials for use primar	ily to	influence legislation; and	i			0.00
	e. for grass roots lobbying expenses, including those previously reported by employer on Form L-6, and payments for lobbying communications to clients/customers (other than to corporate stockholders and members of an organization or union).					tions		0.00	
4.									
	a. Contributions made directly by the employer,	ncluding tho	se previously reported on PDC F	orm I	L-3c.				0.00
	b. If contributions were made by a political committee associated, affiliated or sponsored by the employer, show the PAC name below. (Information reported by the PAC on C-4 reports need not be again included as part of this L-3 report.)							23,500.00	
	Name of PAC <u>UTC PAC</u>		•						
5.	Independent expenditures supporting or opposing a candidate for legislative or statewide executive office or a statewide ballot measure. (Also						0.00		
6. Expenditures to or on behalf of legislators, state officials, or their spouse, registered domestic partner and dependents for the purpose of influencing, honoring or benefiting the legislator or official. (Normal course of business payments are not reportable.) (Also complete Item 14.)					4.)		0.00		
7. Other lobbying-related expenditures, whether through or on behalf of a registered lobbyist. Attach list itemizing each expense (i.e., show date, recipient, purpose and amount). Do not include payments accounted for above.						e,		0.00	
					Total I	obbying Exp	enses	\$	53,564.77
						(Items 2 th	ıru 7)		
8.	This report must be certified by the president, secre	etary-treasure	r or similar office of lobbying en	nploy	er.				
Ce	rtification: I certify that this report is true, comp	lete and cor	rect to the best of my	Signa	nture of Employer Officer	•			Date
kn	owledge. X							_	
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Allen Thompson Executive Director Government Relations

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Employer's Name		Year report covers:				
9. Entertainment, tickets, passes, travel expenses (includi	ng transportation, meals, lodging, etc.) and enrollment or co	urse fees provided to legislators, state officials, state			
employees and members of their immediate families. Name and Title	See instruction manual for details.	Cost or Value	Date and Description of Expense			
Name and Title		Cost of Value	Date and Description of Expense			
		\$				
		*				
Information continued on attached pages	625 4 1:-1-4:					
 Contributions (not reported by the lobbyist) totaling over candidates or a committee supporting or opposing a state. 						
Name of Recipient		Amount	Date (and, if In-Kind, Description)			
		 \$				
		J 49				
☐ Information continued on attached pages		,				
11. Independent expenditures in support of or opposition to	o a) a legislative or statewide executiv	ze office candidate or h	a statewide ballot proposition.			
See instruction manual for definition of "independe	nt expenditure."					
Candidate's Name, Office Sought Ballot Proposition Number & Brief		Amount	Date and Description of Expense (Note if Support or Oppose)			
Danot Proposition Number & Brief	Description		(Note if Support of Oppose)			
		\$,			
☐ Information continued on attached pages						
12. Compensation of \$2,400 or more during the preceding	calendar year for employment or pro	fessional services paid	to state elected officials, successful candidates for state			
office and each member of their immediate family. Name	Relationship to Candidate or	Amount (Code)**	Description of Consideration or Services Exchanged for			
Name	Elected Official if Member of	Amount (code)	Compensation			
	Family					
•						
☐ Information continued on attached pages						
13. Compensation of \$2,400 or more during the preceding						
in which state elected official, successful state candidate. Firm Name	e or member of their immediate fami Person's Name	ly hold office, partners Amount (Code)**	ship, directorship or ownership interest of 10% or more. Description of Consideration or Services Exchanged for			
I IIII I Vaine	1 cross s rune	/mount (code)	Compensation			
☐ Information continued on attached pages						
14. Any expenditure, not otherwise reported, made directly made to honor, influence or benefit the person because		il, successful candidate	e for state office or member of their immediate family, if			
Name	or his or her official position.	Amount	Date and Purpose			
			_			
		\$	-			
	•					
Information continued on attached pages						
**DOLLAR CODE AN	MOUNT	**DOLI CODE				

A - \$1 to \$4,499 B - \$4,500 to \$23,999 C - \$24,000 to \$47,999

D - \$48,000 to \$119,999 E - \$120,000 or more

INFORMATION CONTINUED

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(Use this page if you need additional space for Items 2 or 9)

Employer's Name Year report covers:						
2. Names of Registered Lobbyists			Col 1-Salary	Col 2-Other	Total Amount	
	•					
					-	
	Total From Th	nis Page				
9. Entertainment, etc.	. Entertainment, etc. Name and Title		Cost or Value Date and Description of Expense			
		\$				
			*			
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INFORMATION CONTINUED

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

Employer's Name	,	Year report covers:			
10. Contributions					
	Name of Recipient	Amount	Date (and, if In-Kind, Description)		
,		\$			
•					
	•		•		
		'			
11. Independent expe	nditures	1			
	Candidate's Name, Office Sought & Party or Ballot Proposition Number & Brief Description	Amount	Date and Description of Expense (Note if Support or Oppose)		
	Ballot Proposition Number & Brief Description		(Note if Support or Oppose)		
		\$			
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(Use this page if you need additional space for Items 12 t Employer's Name		Year report covers:					
12. Compensation of \$2,400 or more for employment, etc.							
Name	Relationship to Candidate or Elected Official if Member of Family	Amount (Code)**	Description of Consideration or Services Exchanged fo Compensation				
•							
		1					
13. Compensation of \$2,400 or more for professional service							
Firm Name	Person's Name	Amount (Code)**	Description of Consideration or Services Exchanged for Compensation				
			Compensation				
	,						
			,				
		,					
14. Any expenditure not otherwise reported	·I.	1	and the second s				
Name		Amount	Date and Purpose				
		\$	·				
		_					
		-					
4			`				

**DOLLAR CODE AMOUNT

A - \$1 to \$4,499 B - \$4,500 to \$23,999 C - \$24,000 to \$47,999

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