DISCLOSURE COMMISSION

Employer's

THIS SPACE FOR OFFICE USE

CONTINUE ON REVERSE

•	(360) 753-1	WA 98504-0908 111 1-877-601-2828	Lobbying 1	Lxpenses	1/09	DA	ΈΙ	FILED PDC
1.	Employer's Name (Use complete co KapStone Paper and Packag	ompany, association, union or	entity name.)		I			25 2017
	Attention (Identify person to whom	inquiries about the informatio	n below should be directed; NO	OT the lobbyist.)		1		2017
	Paul Duncan			•				
	Mailing Address PO Box 3000			Telephone (360) 703-150.	5			
	City	State	Zip + 4	E-Mail Address	<u> </u>	Year Report	Cove	ers
	Longview	WA	98632	Paul.Duncan@kapsto	пера	2016	2012	
	IIS REPORT MUST BE FILED B ashington State Legislature and/or				ing the previ	ous calendar y	ear fo	or lobbying the
2.	Identify each of your lobbyists/lobb (plus obligated) for other lobbying legislative candidates, reimbursement through lobbyists in the space design	related expenses that were mad nt for entertainment expenses,	le by or through the lobbyist an	d reported by the lobbyist	on the monthly	y L-2 report (e.	g., co	ntributions to
	Names of Registered Lobbyists (i	f payments were to lobbying fi	rm, list firm name)	Col 1-Salary	Col \$	2-Other	\$	Total Amount
Ga	no and Associates			60000.0	0	0		60000.00
			Total From Attached Pa	age				
	Information continued on attached pages			Total Expense			\$	60000.00
DO	NOT INCLUDE EXPENDITURI	ES ALREADY ACCOUNTE	D FOR IN ITEM 2 ABOVE	when completing Items 3	through 7 be	low.		
3.	Other expenditures made by the em a. to vendors on behalf of or in su		-			,	\$	0
	b. to or on behalf of expert witnes the employer's lobbying effort;		de lobbying services who offer	specialized knowledge or e	expertise that a	nssists		0
	c. for entertainment, tickets, passe legislators, state officials, state	employees and members of the	eir immediate families; (Also c	omplete Item 9.)	-			0
	d. for composing, designing, prod	-	•	•				0
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).							0	
4.	Political contributions to candidates for legislative or statewide executive office, committees supporting or opposing these candidates, or committees supporting or opposing statewide ballot measures. (Also complete Item 10.) a. Contributions made directly by the employer, including those previously reported on PDC Form L-3c.							0
	• •				name below			0
	 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.) Name of PAC: Northwest Pulp & Paper Association Political Action Committee 							21000.00
 Independent expenditures supporting or opposing a candidate for legislative or statewide executive office or a statewide ballot measure. (Also complete Item 11.) 							0	
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.)							0	
7.	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.							0
				Tot	al Lobbying l	Expenses		81000.00
8.	This report must be certified by the	president, secretary-treasurer	or similar office of lobbying en	nployer.	(Items	2 thru 7)		
	rtification: I certify that this repo	•	· i	Signature of Employer Off	icer			Date
kn	owledge.	Paul E. Dunca. NP Longriew Mi	n	Sand		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		2/24/17
Pri	nted Name and Title of Officer:	VY Longview Mi	u uperations	Jane	~ m		NUF	ON REVERSE

Page 2 Employer's Name Year report covers:

Kapstone Paper and Packaging		2015				
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		Cost or Value	Date and Description of Expense			
None		\$				
☐ 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 t candidates or a committee supporting or opposing a statewide ballot measure. Do not list employer-affiliated PAC contributions.						
Name of Recipient	ride banot measure. Do not list em	Amount	Date (and, if In-Kind, Description)			
Northwest Pulp & Paper Association Political Act	tion Committee	\$ 15000.00	6/30/2016 (Northwest Pulp and Paper			
1 (2.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1		12000100	Association's engagement in the "No On			
			I-732" campaign in Washington)			
Northwest Pulp & Paper Association Political Act	tion Committee	\$ 6000.00	11/28/2016 (Northwest Pulp and Paper			
			Association's engagement in the "No On			
☐ Information continued on attached pages			I-732" campaign in Washington)			
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	Amount	Date and Description of Expense			
Ballot Proposition Number & Brief De	escription		(Note if Support or Oppose)			
None		\$				
☐ Information continued on attached pages 12. Compensation of \$2,000 or more during the preceding cal	ander year for ampleyment or prof	assional carriage paid	to state elected officials, successful condidates for state			
office and each member of their immediate family.	endar year for employment or pro-	essionai sei vices paid				
Name	Relationship to Candidate or Elected Official if Member of	Amount (Code)**	Description of Consideration or Services Exchanged for Compensation			
	Family	-	·			
None						
_						
Information continued on attached pages 13. Compensation of \$2,000 or more during the preceding cal	endar year for professional service	s paid to any corporat	ion, partnership, joint venture, association or other entity			
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	Person's Name	Amount (Code)**	Description of Consideration or Services Exchanged for Compensation			
None						
☐ 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 made to honor, influence or benefit the person because of his or her official position.						
Name	no or nor ornorar position.	Amount	Date and Purpose			
None		\$				
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

INFORMATION CONTINUED

L3

((Use this page if you need additional space for Items 2 or 9)				LU					
	Employer's Name				Year report covers:					
K	Kapstone Paper and Packaging 2015									
2. N	lames of Registered Lobbyists		Col 1-Salar	ту	Col 2-Other	Total Amount				
			\$		\$	\$				
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ļ										
	·									
	Total From This P	age		·						
			!							
9. E	Intertainment, etc.									
	Name and Title		Cost or Value Date and Description			ion of Expense				
		\$								
					•					
			-							
						,				
-	•									
1		1		1						

INFORMATION CONTINUED

L3

Employer's Name Kapstone Paper and Packaging		Year report covers: 2015					
10. Contributions Name of Recipient	Amount	Date (and, if In-Kind, Description)					
None	\$						
		•					
		••					
		,					
11. Independent expenditures							
Candidate's Name, Office Sought & Party or Ballot Proposition Number & Brief Description	Amount	Date and Description of Expense (Note if Support or Oppose)					
	\$						
•							
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-							

INFORMATION CONTINUED

L3

(Use this page if you need additional space for Items 12 th	LU				
Employer's Name	Year report covers:				
			and the control of th		
12. Compensation of \$2,000 or more for employment, etc.			All and the second of the seco		
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		<u></u>			
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