PUBLIC DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111

Employer's Lobbying Expenses

L3

THIS SPACE FOR OFFICE USE

	OLYMPIA WA 98 (360) 753-1111 TOLL FREE 1-877-6		Lobbying	g Exp	penses	1/15	DAT	FFI	LED PDC
1. Emp	loyer's Name (Use complete company,		entity name.)					L 1 "	
. (Cities Insurance Association of	Washington						n i	o 2018
Atter	ntion (Identify person to whom inquiries	about the information	on below should be directed;	; NOT the	e lobbyist.)	· .	-	R	3 2018
J	enni Bates			•		*			
Mail	ing Address			Tel	lephone				i.
2	151 Diamond Drive				(509) 754 -2027	•			~
City		State	Zip + 4	E-N	Mail Address	·	Year Repor	rt Cover	s
. 1	Ephrata	WA	98823	jba	ates@chooseclear	.com	2017	,	
2. Ident (plus legis)	ton State Legislature and/or any state ify each of your lobbyists/lobbying firm obligated) for other lobbying related exactive candidates, reimbursement for engh lobbyists in the space designated.	e agency. Complete as below. In column spenses that were ma	all sections. Use "none" of 1, show the full amount of de by or through the lobbyis	or "0" wh salary or st <u>and</u> rep	nen applicable. fee each earned for looted by the lobbyist o	bbying. In on the month	column 2, show	w the fu	Il amount paid
Nam	es of Registered Lobbyists (if paymen	ts were to lobbying f	irm. list firm name)	ı	Col 1-Salary	1 Co	l 2-Other	1 '	Total Amount
	Solutions, LLC		· · · · · · · · · · · · · · · · · · ·	ĺ	\$ 7066.6	1	-	s	7066.64
•	Cove Strategies, LLC		**************************************		3360.0	,			3360.00
			Total From Attache	d Page					
☐ Inform	nation continued on attached pages		•	_	Total Expenses	By or Thro	ugh Lobbyists	\$	10426.64
DO NOT	INCLUDE EXPENDITURES ALRI	EADY ACCOUNTE	ED FOR IN ITEM 2 ABOV	VE when	completing Items 3 t	hrough 7 b	elow.	1	v
	r expenditures made by the employer for expenditures made by the employer for vendors on behalf of or in support of the suppor		•				*	, \$	
b. t	o or on behalf of expert witnesses or oth he employer's lobbying effort;		•	-		xpertise that	assists		
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.)									
d. for composing, designing, producing and distributing informational materials for use primarily to influence legislation; and									
	or grass roots lobbying expenses, include o clients/customers (other than to corpo					ying comm	unications		
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.)						al and a second			
∙a. C	Contributions made directly by the empl	oyer, including those	previously reported on PDO	C Form L	-3c.	, , ,	~		g to a paperson of the same of
	f contributions were made by a political Information reported by the PAC on C-					name below.			·
ľ	Name of PAC								
	pendent expenditures supporting or oppolete Item 11.)	osing a candidate for	legislative or statewide exec	cutive off	ice or a statewide ball	ot measure.	(Also		
	nditures to or on behalf of legislators, sencing, honoring or benefiting the legisl						em 14.)		
	r lobbying-related expenditures, whether ient, purpose and amount). Do not include			Attach list	itemizing each expen	se (i.e., shov	v date,		
•	•				Tota	l Lobbying	Expenses	\$	10426.64
						(Item	s 2 thru 7)	*	,
8. This	report must be certified by the presiden	t, secretary-treasurer	or similar office of lobbying	g employe	er.				
Certifica knowled	tion: I certify that this report is true ge.	, complete and corr	ect to the best of my	Signa	ture of Employer Offi	cer /		0	Date .
Printed N	ame and Title of Officer: Tim Sn	ead – Chairman	of the Board		(may	ent	ć	1-	12-18

Em	ployer's Name		Year report covers:			
	Cities Insurance Association of Washington	•	2017			
9.	Entertainment, tickets, passes, travel expenses (including		and enrollment or co	urse fees provided to legislators, state officials, state		
٠	employees and members of their immediate families. See	instruction manual for details.		•		
	Name and Title		Cost or Value	Date and Description of Expense		
			\$			
			-			
				`		
			,			
, 🔲	Information continued on attached pages	x				
10.	Contributions (not reported by the lobbyist) totaling over	\$25 to a legislative or statewide exe	cutive office candidat	te, a committee formed to support or oppose one of these		
	candidates or a committee supporting or opposing a statev	vide ballot measure. Do not list em	ployer-affiliated PAC	contributions.		
	Name of Recipient		Amount	Date (and, if In-Kind, Description)		
		^	\$			
		*	Ψ			
			_			
		y		ا مقسم بناو پایده که و ایدر شمایات اساسیون کا خواندو است. ام		
٠,						
	•			Ä		
	Information continued on attached pages					
_		a lacialativa anatatawida ayaaytiy	a office condidate on b) a statawida hallat meanasitian		
11.	Independent expenditures in support of or opposition to a		e office candidate or o) a statewide ballot proposition.		
	See instruction manual for definition of "independent	-				
	Candidate's Name, Office Sought &		Amount	Date and Description of Expense		
	Ballot Proposition Number & Brief De	escription		(Note if Support or Oppose)		
	*		\$			
	3			•		
		•		· I		
	Information continued on attached pages					
	Compensation of \$2,400 or more during the preceding cal	endar vear for employment or prof	essional services naid	to state elected officials, successful candidates for state		
12.	office and each member of their immediate family.	citair year for employment or pro-	essionar services para	to state elected officials, successful dandidates for state		
	•	Dalationship to Condidate on	A	Description of Consideration on Company Evolution of Consideration		
	Name	Relationship to Candidate or Elected Official if Member of	Amount (Code)**	Description of Consideration or Services Exchanged for		
				Compensation		
		Family				
	*					
	٠					
				*		
	Information continued on attached pages					
13.	13. Compensation of \$2,400 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.					
	in which state elected official, successful state candidate of		y hold office, partners			
	Firm Name	Person's Name	Amount (Code)**	Description of Consideration or Services Exchanged for		
	'		-	Compensation		
				- a use o management and analysis		
			·			
	·	*		¥		
	Information continued on attached pages		٠	,		
14		indirectly to a state elected officia	L successful candidate	for state office or member of their immediate family if		
14. Any expenditure, not otherwise reported, made directly or indirectly to a state elected official, successful candidate made to honor, influence or benefit the person because of his or her official position.			. 201 Danie Strive of memory of mon minimum minity, if			
l .		- I	l Amount i	Data and Dumosa		
	Name	,	Amount	Date and Purpose		
			.			
			\$,		
		İ		1		
	Information continued on attached pages	•		t t		
ı	information continued on attached pages					

**DOLLAR
CODE AMOUNT

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

**DOLLAR
CODE AMOUNT

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

Washington Public Disclosure Commission

#31633

Ticket Details

Status Open	Priority Low	Source Outbound Email	Type Get help filing reports
Group Customer Service	Agent Office Staff	Requester name (Or Respondent)	Whose reports do you want?
When?	Report	Are you a Lobbyist, Candidate, etc.	Which system? Filing method Paper
Legal Name	Respondent name (the person's against whom the complaint i filed)	*	I certify (or declare) under penalty of perjury under the laws of the State of Washington that information provided with this complaint is true and correct to the best of my knowledge and belief. false
In the description below I have	Date complaint perfected with oath	Complainant	Analysis and Chronology of Review
described the allegations and attached any available	requirement e	Political Category	Status of Investigations
evidence to support my complaint.	Estimated Date of Completion	45-Day Due Date	45 Day Notice false
false	45 Day Acknowledgment false	10 Day Notice false	10 Day Acknowledgment false
Case Disposition Notice	Group Enforcement	Publish to web	Response Posted To Web
false		Complaint	Case

Results	Posted	То	Complaint/	Case
147 - L				

to Jbates on Fri, 23 Feb at 9:44 AM via Outbound Email

L3 - Employer's Lobbying Expenses - Response Requested

Hello Jenni,

Your L3 report(s) dated 02/13/2018 requires the following:

Please confirm the names of registered lobbyist for (United Schools Insurance Program, Schools Insurance Assn of WA, and Cities Insurance Assn of WA) forms attached. All three reports were submitted with Capitol Solutions LLC and South Cove Strategies LLC as registered lobbyist.

South Cove Strategies LLC cannot be found in our database. Did you by chance mean Alex Hur? Please confirm the names of registered lobbyist for the year 2017.

There is no L1 form on file registering South Cove Strategies to lobby for you during 2017. Did you file the L3 report under the same name that your lobbyist(s) used to identify you on the L1 registration form? If your name has changed since your lobbyist filed the L1 registration, please contact the PDC for guidance.

Please reply to this email or contact Ashley at (360) 753-1111. Thank you.



Ashley Miller

PDC Staff

360-753-1111

877-601-2828 toll free in WA State

pdc@pdc.wa.gov (mailto:pdc@pdc.wa.gov)

Comments

by Jbates on Fri, 23 Feb at 9:45 AM as Incoming email

I will be out of the office till February 23, 2018 If you need to reach me, please call or text me at 509-398-1173.

Thamks,
Jenni
byJbates on Sun, 25 Feb at 2:04 PM as Incoming email
We are working on the L-1 form with Alex to get this all up to date for you. Yes we do have South Cove
Strategies LLC , Alex Hur as the Lobbyist for the United Schools Insurance Program, the Schools Insurance
Association of Washington, the Cities Insurance Association of Washington and the Washington Rural
Counties Insurance Program. Do we need to re-do the L- 3 as well?
Thanks,
Jenni