

**L2**  
1/15

MAY 13 2016

# Lobbyist Monthly Expense Report

(as required by chapter 397, 1995 Session Laws)

1. Lobbyist Name		Last	First	Middle Initial
		GRASSI	LORI	L
Mailing Address 21400 INTERNATIONAL BLVD #207				
City SEATAC		State WA	Zip 98198	New Address? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
2. This report is for the following period		4	2016	OR This report corrects or amends the report for
		Month	Year	Month Year
				Business Phone 206-878-6055

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 expenses (Columns a+b+c+d)	Amounts paid from lobbyist's own funds, not reimbursed or attributed to an employer.  Column A	Employer #1 Identify by name below (11) Column B	Employer #2 Column C	Employer #3 Column D
3. COMPENSATION earned from employer for lobbying this period (salary, wages, retainer)	\$6,500.00		\$6,500.00		
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)	\$1,000.00		\$1,000.00		
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	<del>\$0.00</del> \$7,500.00	\$0.00	<del>\$</del> 7,500.00	\$0.00	\$0.00

11. EMPLOYERS' NAMES (from above)

No. 1 (Column B) WA ST CHIROPRACTIC ASSN

No. 2 (Column C)

No. 3 (Column 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

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

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 the 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.

Certified By:  
Lori L. Grassi

Date Filed  
05/13/2016

CONTINUE ON NEXT PAGE







