

L2
1/02

DATE FILED PDC

AUG 14 2018

Lobbyist Monthly Expense Report
 (as required by Chapter 397, 1995 Session Laws)

1. Lobbyist Name
Dennis J. Lawson

Mailing Address
1069 Adams Street SE

City **Olympia** State **WA** Zip + 4 **98501**

New Address? Yes No

2. This report is for the period 7 (Month) 18 (Year)

This report corrects or amends the report for _____ (Month) _____ (Year)

Business Telephone
 (360) 943 -3030

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 expense (Columns a + b + c + d and attached pages)	Amounts paid from lobbyist's own funds, not reimbursed or attributed to an employer. Column A	Employer No. <u>1</u> Column B	Employer No. ____ Column C	Employer No. ____ Column D
3. COMPENSATION earned from employer for lobbying this period (salary, wages, retainer)	\$ 2442.25		\$ 2442.25	\$	\$
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)	\$	\$			
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	\$ 2442.25	\$	\$ 2442.25	\$	\$

(Attach additional page(s) if you lobby for more than three employers.)

11. EMPLOYERS' NAMES
 No. 1 (B) Washington State Council of Fire Fighters (WSCFF)
 No. ____ (C)
 No. ____ (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. **Fire Service Issues** Legislative Committee or State Agency Considering Matter _____ Employer Represented _____

Continued on attached pages

13. Of the time spent lobbying, what percentage was devoted to lobbying: the 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 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.

LOBBYIST SIGNATURE
Dennis J. Lawson

DATE
 8/14/18

CONTINUE ON REVERSE

Lobbyist Name

Dennis J. Lawson

Reporting Period

7 (Month)

18 (Year)

15. Itemize all of the following expenditures that were incurred by lobbyist or lobbyist employer(s) for legislators, state officials, state employees and members of their immediate families. Show the actual amount incurred for each individual or the amount fairly attributed to each.

- Entertainment expenditures exceeding \$25 per occasion (including lobbyist's expense) for meals, beverages, tickets, passes, or for other forms of entertainment.
- Travel, lodging and subsistence expenses in connection with a speech, presentation, appearance, trade mission, seminar or educational program.
- Enrollment and course fees in connection with a seminar or educational program.

Lobbyists must provide an elected official with a copy of the L-2 or Memo Report if the lobbyist reports: 1) spending on one occasion over \$50 for food or beverages for the official and/or his or her family member(s); or 2) providing travel, lodging, subsistence expenses or enrollment or course fees for the official and, if permitted, the official's family.

Date	Names of all Persons Entertained or Provided Travel, etc.	Description, Place, etc.	Sponsoring Employer	Amount
N/A	Total expenses itemized on attached Memo Reports			

Continued on attached pages.

16. If a monetary or in-kind contribution exceeding \$25 was given or transmitted by the lobbyist to any of the following, itemize the contribution below or on a Memo Report: local and state candidates or elected officials; local and state officers or employees; political committees supporting or opposing any candidate, elected official, officer or employee or any local or state ballot proposition. If a contribution exceeding \$25 was given to the following, itemize the contribution below: a caucus political committee; a political party; or a grass roots lobbying campaign.

Date	Name of Individual or Committee Receiving Contribution	Source of Contribution	Amount
N/A	Total contributions itemized on attached Memo Reports		

If contributions were made directly by a political action committee associated, affiliated or sponsored by your employer, show name of the PAC below. (Information reported by PAC on C-4 report need not be again included in this L-2 report.)

Continued on attached pages.

PAC Name.

17. Expenditures for: a) political advertising supporting or opposing a state or local candidate or ballot measure; or b) public relations, telemarketing, polling or similar activities that directly or indirectly are lobbying-related must be itemized by amount, vendor or person receiving payment, and a brief description of the activity. Itemize each expenditure on an attached page that also shows lobbyist name and report date. Put the aggregate total of these expenditures on line 8.

18. Payments by the lobbyist for other lobbying expenses and services, including payments to subcontract lobbyists, expert witnesses and others retained to provide lobbying services or assistance in lobbying and payments for grass roots lobbying campaigns (except advertising/printing costs listed in Item 7).

Date	Recipient's Name and Address	Employer for Whom Expense was Incurred	Amount
			\$

Continued on attached page.

L2
1/02

Lobbyist Monthly Expense Report
 (as required by Chapter 397, 1995 Session Laws)

1. Lobbyist Name
Greg B. Markley

Mailing Address
1069 Adams Street SE

City **Olympia** State **WA** Zip + 4 **98501**

New Address? Yes No

2. This report is for the period 7 (Month) 18 (Year) This report corrects or amends the report for _____ (Month) _____ (Year) Business Telephone **(360) 943 -3030**

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 expense (Columns a + b + c + d and attached pages)	Amounts paid from lobbyist's own funds, not reimbursed or attributed to an employer. Column A	Employer No. <u>1</u> Column B	Employer No. ____ Column C	Employer No. ____ Column D
3. COMPENSATION earned from employer for lobbying this period (salary, wages, retainer)	\$ 339.18		339.18	\$	\$
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)					
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	\$ 339.18	\$	\$ 339.18	\$	\$

(Attach additional page(s) if you lobby for more than three employers.)

11. EMPLOYERS' NAMES
 No. 1 (B) Washington State Council of Fire Fighters (WSCFF)
 No. ____ (C)
 No. ____ (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. **Fire Service Issues** Legislative Committee or State Agency Considering Matter _____ Employer Represented _____

Continued on attached pages

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

14. TERMINATION: (COMPLETE THIS ITEM ONLY IF YOU WISH TO TERMINATE YOUR REGISTRATION)

Date registration ends: _____ Employer's name: _____

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CERTIFICATION

I certify that this report is true and complete to the best of my knowledge

LOBBYIST SIGNATURE 

DATE **8/14/18**

CONTINUE ON REVERSE

Lobbyist Name

Greg B. Markley

Reporting
Period

7
(Month)

18
(Year)

15. Itemize all of the following expenditures that were incurred by lobbyist or lobbyist employer(s) for legislators, state officials, state employees and members of their immediate families. Show the actual amount incurred for each individual or the amount fairly attributed to each.

- Entertainment expenditures exceeding \$25 per occasion (including lobbyist's expense) for meals, beverages, tickets, passes, or for other forms of entertainment.
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Lobbyists must provide an elected official with a copy of the L-2 or Memo Report if the lobbyist reports: 1) spending on one occasion over \$50 for food or beverages for the official and/or his or her family member(s); or 2) providing travel, lodging, subsistence expenses or enrollment or course fees for the official and, if permitted, the official's family.

Date	Names of all Persons Entertained or Provided Travel, etc.	Description, Place, etc.	Sponsoring Employer	Amount
				\$
N/A	Total expenses itemized on attached Memo Reports			

Continued on attached pages.

16. If a monetary or in-kind contribution exceeding \$25 was given or transmitted by the lobbyist to any of the following, itemize the contribution below or on a Memo Report: local and state candidates or elected officials; local and state officers or employees; political committees supporting or opposing any candidate, elected official, officer or employee or any local or state ballot proposition. If a contribution exceeding \$25 was given to the following, itemize the contribution below: a caucus political committee; a political party; or a grass roots lobbying campaign.

Date	Name of Individual or Committee Receiving Contribution	Source of Contribution	Amount
			\$
N/A	Total contributions itemized on attached Memo Reports		

If contributions were made directly by a political action committee associated, affiliated or sponsored by your employer, show name of the PAC below. (Information reported by PAC on C-4 report need not be again included in this L-2 report.)

Continued on attached pages.

PAC Name: _____

17. Expenditures for: a) political advertising supporting or opposing a state or local candidate or ballot measure; or b) public relations, telemarketing, polling or similar activities that directly or indirectly are lobbying-related must be itemized by amount, vendor or person receiving payment, and a brief description of the activity. Itemize each expenditure on an attached page that also shows lobbyist name and report date. Put the aggregate total of these expenditures on line 8.

18. Payments by the lobbyist for other lobbying expenses and services, including payments to subcontract lobbyists, expert witnesses and others retained to provide lobbying services or assistance in lobbying and payments for grass roots lobbying campaigns (except advertising/printing costs listed in Item 7).

Date	Recipient's Name and Address	Employer for Whom Expense was Incurred	Amount
			\$

Continued on attached page



11 CAPITOL WAY
 RM 206
 PO BOX 40908
 OLYMPIA WA
 98504-0908
 (360) 753-1111
 TOLL FREE 1-877-
 601-2828

**Employer of Lobbyist Monthly Political
 Contribution Report**

L-3c
 6/90

**THIS SPACE FOR
 OFFICE USE**

Employer's Name (Use complete company, association, union or entity name.)

Washington State Council of Fire Fighters (WSCFF)

Mailing Address

1069 Adams Street SE

City	State	Zip
Olympia	WA	98501

Who Must File Report: Employers of lobbyists registered in Washington State making one or more contributions, including in-kind contributions, during one calendar month totaling more than \$100 to a candidate for state or local office, an elected state or local official, an officer or employee of any public agency, or a political committee. *Employer contributions made through and reported by a registered lobbyist or an employer-affiliated PAC are not reportable on an L-3c*

What Must Be Reported: Contributions, including a loan, gift, deposit, subscription, forgiveness of indebtedness, donation, advance, pledge, payment, or transfer of anything of value, including personal and professional services for less than full consideration. Contributions to campaign accounts and public office fund accounts are reportable.

When Is The Report Filed: Within 15 days after the last day of each calendar month during which reportable contributions were made. Reports are considered filed as of the post mark or hand-delivery date to PDC.

Itemize contributions that alone, or together with other contributions to the same recipient, total over \$100 during the calendar month specified above. If space provided is insufficient, use additional L-3c forms or 8 1/2" x 11" white paper.

JULY 2018

Date	Name and Address of Recipient	Description of Contribution*	Amount or Value*
7/24/18	Economic Opportunity Institute 603 Stewart Street, #715 Seattle, WA 98101	Monetary Contribution	\$ 5,100.00
7/26/18	Kennedy Fund C/O Blue Wave Political Partners 119 First Ave. S., Suite 320 Seattle, WA 98104	Monetary Contribution	25,000.00
7/30/18	Truman Fund c/o Jason Bennet P.O. Box 9100 Seattle, WA 98109	Monetary Contribution	25,000.00
7/31/18	WSCFF FAST PAC 1069 Adams Street SE Olympia, WA 98501	In-Kind Contribution – Value of Staff Time	1,500.00

*See next page for details.

Certification: I certify that the information contained herein is true and complete to the best of my knowledge.

Name and title of person authorized to sign on employer's behalf	Signature	Date
Greg B. Markley, WSCFF Secretary-Treasurer		8/14/18

L2
1/02

Lobbyist Monthly Expense Report
 (as required by Chapter 397, 1995 Session Laws)

1. Lobbyist Name
Michael White

Mailing Address
1069 Adams Street SE

City **Olympia** State **WA** Zip + 4 **98501**

New Address? Yes No

2. This report is for the period 7 (Month) 18 (Year)

This report corrects or amends the report for _____ (Month) _____ (Year)

Business Telephone
 (360)943 -3030

ALL COMPLETE THIS PART			COMPLETE IF YOU HAVE MORE THAN ONE EMPLOYER		
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3. COMPENSATION earned from employer for lobbying this period (salary, wages, retainer)	\$ 2885.41		\$ 2885.41	\$	\$
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)					
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	\$ 2885.41	\$	\$ 2885.41	\$	\$

(Attach additional page(s) if you lobby for more than three employers.)

11. EMPLOYERS' NAMES
 No. 1 (B) Washington State Council of Fire Fighters (WSCFF)
 No. ____ (C)
 No. ____ (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. **Fire Service Issues** Legislative Committee or State Agency Considering Matter _____ Employer Represented _____

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CERTIFICATION

I certify that this report is true and complete to the best of my knowledge. LOBBYIST SIGNATURE  DATE **8/14/18**

CONTINUE ON REVERSE

Lobbyist Name
Michael White

Reporting Period 7 (Month) 18 (Year)

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				\$
N/A Total expenses itemized on attached Memo Reports				

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Continued on attached pages. PAC Name _____

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Date	Recipient's Name and Address	Employer for Whom Expense was Incurred	Amount
			\$

Continued on attached page.

L2
1/02

Lobbyist Monthly Expense Report

(as required by Chapter 397, 1995 Session Laws)

1. Lobbyist Name
AJ Johnson

Mailing Address
1069 Adams Street SE

City **Olympia** State **WA** Zip + 4 **98501**

New Address? Yes No

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This report corrects or amends the report for (Month) (Year)

Business Telephone
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10. TOTAL COMPENSATION AND EXPENSES INCURRED THIS MONTH	\$ 2885.41	\$	\$ 2885.41	\$	\$

(Attach additional page(s) if you lobby for more than three employers.)

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 No. (C)
 No. (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**

Fire Service Issues

Continued on attached pages

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

14. TERMINATION: (COMPLETE THIS ITEM ONLY IF YOU WISH TO TERMINATE YOUR REGISTRATION)

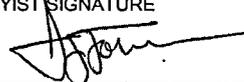
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CERTIFICATION

certify that this report is true and complete to the best of my knowledge.

LOBBYIST SIGNATURE DATE

 8/14/18

Lobbyist Name
AJ Johnson

Reporting Period 7 (Month) 18 (Year)

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Date	Recipient's Name and Address	Employer for Whom Expense was Incurred	Amount \$
<input type="checkbox"/> Continued on attached page			