

L2
11/95

PDC OFFICE USE

RECEIVED
APR 14 2017

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

Public Disclosure Commission

1. Lobbyist Name
Pierce Consulting Services, LLC

Mailing Address
P. O. Box 4410

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

New Address? Yes No

2. This report is for the period March (Month) 2017 (Year) This report corrects or amends the report for _____ (Month) _____ (Year)

Business Telephone
(360) 860-2729

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. <u>2</u> Column C	Employer No. <u>3</u> Column D
3. COMPENSATION earned from employer for lobbying this period (salary, wages, retainer)	\$ 41,924.99		\$ 3,000.00	\$ 2,500.00	\$ 1802.10
4. PERSONAL EXPENSES for travel, food and refreshments	950.26	\$			
5. ENTERTAINMENT, GRATUITIES, TRAVEL, SEMINARS for state officials, employees, their families (See #15)	813.20				
6. CONTRIBUTIONS to elected officials, candidates and political committees (See #16)	350.00	250.00			
7. ADVERTISING, PRINTING, INFORMATIONAL LITERATURE					
8. POLITICAL ADS, PUBLIC RELATIONS, POLLING, TELEMARKETING, ETC. (See #17)					
9. OTHER EXPENSES AND SERVICES (See #18)	4,000.00				197.90
10. TOTAL COMPENSATION AND EXPENSES INCURRED THIS MONTH	\$ 48,038.45	\$ 250.00	\$ 3,000.00	\$ 2,500.00	\$ 2,000.00

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

11. EMPLOYERS' NAMES

No. 1 (B) The Everett Clinic

No. 2 (C) Bristol-Myers Squibb (BMS)

No. 3 (D) WA State Opportunity Scholarship (WSOS)

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
Health Care, Fiscal, Bus&Con. Aff	Fiscal, OFM, HCA	Everett
Health Care, Fiscal, Bus&Con. Aff	Fiscal, DOR, OFM, Health Care	BMS
Higher Education, Education	Fiscal, OFM	WSOS

Continued on attached pages

13. Of the time spent lobbying, what percentage was devoted to lobbying: the Legislature 80% State Agencies 20%.

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: *Cindi Holmuth* DATE: 4/14/17

CONTINUE ON NEXT PAGE

Lobbyist Name

Pierce Consulting Services, LLC

Reporting Period

March (Month)

2017 (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
3/14/17	Sen Rep Caucus Reception	4,8,10,12,15 Martin Flynn March PDC Report	\$ 100.00
3/14/17	Friends of Dow Constantine	Cindi Holmstrom, personal	250.00
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
3/5/17	Jessica Fortescue	3,4,5,6,7,8,9,10,12,13,14,15,16	\$ 4,000.00

Continued on attached page.

L2
11/95

Lobbyist Monthly Expense Report

(as required by Chapter 397, 1995 Session Laws)

1. Lobbyist Name
Pierce Consulting Services, LLC

Mailing Address
P. O. Box 4410

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

New Address? Yes No

2. This report is for the period **March** (Month) **2017** (Year) This report corrects or amends the report for _____ (Month) _____ (Year) Business Telephone **(360) 870-2729**

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>4</u> Column B	Employer No. <u>5</u> Column C	Employer No. <u>6</u> Column D
3. COMPENSATION earned from employer for lobbying this period (salary, wages, retainer)	\$		\$ 3,604.21	\$ 2,703.15	\$ 2,703.15
4. PERSONAL EXPENSES for travel, food and refreshments		\$	372.42	52.52	
5. ENTERTAINMENT, GRATUITIES, TRAVEL, SEMINARS for state officials, employees, their families (See #15)					
6. CONTRIBUTIONS to elected officials, candidates and political committees (See #16)			20.00		
7. ADVERTISING, PRINTING, INFORMATIONAL LITERATURE					
8. POLITICAL ADS, PUBLIC RELATIONS, POLLING, TELEMARKETING, ETC. (See #17)					
9. OTHER EXPENSES AND SERVICES (See #18)			395.79	296.85	296.85
10. TOTAL COMPENSATION AND EXPENSES INCURRED THIS MONTH	\$	\$	\$ 4,392.42	\$ 3,052.52	\$ 3,000.00

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

11. EMPLOYERS' NAMES

No. 4 (B) Microsoft Corporation

No. 5 (C) CNSI

No. 6 (D) Rob Makin Consulting (for Unified Grocers, Inc.)

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
Tech, Ed, Bus&Cons. Affairs Bus&ConsAffairs, Fiscal, HC Fiscal, Bus&Con.Aff.	Tech, Ed, Energy&Utilities, Labor HCA, State Government Fiscal, DoR, Ways & Means	Microsoft Corporation CNSI Rob Makin Consulting

Continued on attached pages

13. Of the time spent lobbying, what percentage was devoted to lobbying: the Legislature 80% State Agencies 20%.

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: *Cindi Holmstrom* DATE: 4/14/17

CONTINUE ON NEXT PAGE

L2

11/95

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

1. Lobbyist Name
Pierce Consulting Services, LLC

Mailing Address
P. O. Box 4410

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

New Address? Yes No

2. This report is for the period March (Month) 2017 (Year) This report corrects or amends the report for _____ (Month) _____ (Year) Business Telephone **(360) 870-2729**

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>7</u> Column B	Employer No. <u>8</u> Column C	Employer No. <u>9</u> Column D
3. COMPENSATION earned from employer for lobbying this period (salary, wages, retainer)	\$		\$ 3,604.21	\$ 2,703.15	\$ 2,928.42
4. PERSONAL EXPENSES for travel, food and refreshments		\$			
5. ENTERTAINMENT, GRATUITIES, TRAVEL, SEMINARS for state officials, employees, their families (See #15)				203.29	
6. CONTRIBUTIONS to elected officials, candidates and political committees (See #16)				20.00	
7. ADVERTISING, PRINTING, INFORMATIONAL LITERATURE					
8. POLITICAL ADS, PUBLIC RELATIONS, POLLING, TELEMARKETING, ETC. (See #17)					
9. OTHER EXPENSES AND SERVICES (See #18)			395.79	296.85	321.58
10. TOTAL COMPENSATION AND EXPENSES INCURRED THIS MONTH	\$	\$	\$ 4,000.00	\$ 3,223.29	\$ 3,250.00

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

11. EMPLOYERS' NAMES

No. 7 (B) Vulcan, Inc.
 No. 8 (C) Washington Dental Service Foundation (WDSF)
 No. 9 (D) Washington Bankers Association

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
Fiscal, Land Use, Bus&ConAff.	Fiscal, OFM, Transp,Energy&Utilities	Vulcan
Fiscal, Health Care, Hum.Serv.	Fiscal, Health Care, Human Services	WDS
Fiscal, Financial, Bus&ConAff.	Fiscal, FII, DoR	WBA

Continued on attached pages

13. Of the time spent lobbying, what percentage was devoted to lobbying: the Legislature 80% State Agencies 20%.

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 **Cindi Holmet** DATE **4/14/17**

CONTINUE ON NEXT PAGE

L2

11/95

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

1. Lobbyist Name
Pierce Consulting Services, LLC

Mailing Address
P. O. Box 4410

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

New Address? Yes No

2. This report is for the period **March** (Month) **2017** (Year) This report corrects or amends the report for _____ (Month) _____ (Year) Business Telephone **(360) 870-2729**

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. 10 Column B	Employer No. ____ Column C	Employer No. 12 Column D
3. COMPENSATION earned from employer for lobbying this period (salary, wages, retainer)	\$		\$ 1,802.10	\$	\$ 1,959.79
4. PERSONAL EXPENSES for travel, food and refreshments		\$			368.52
5. ENTERTAINMENT, GRATUITIES, TRAVEL, SEMINARS for state officials, employees, their families (See #15)			203.30		203.30
6. CONTRIBUTIONS to elected officials, candidates and political committees (See #16)			20.00		20.00
7. ADVERTISING, PRINTING, INFORMATIONAL LITERATURE					
8. POLITICAL ADS, PUBLIC RELATIONS, POLLING, TELEMARKETING, ETC. (See #17)					
9. OTHER EXPENSES AND SERVICES (See #18)			197.90		215.21
10. TOTAL COMPENSATION AND EXPENSES INCURRED THIS MONTH	\$	\$	\$ 2,223.30	\$	\$ 2,766.82

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

11. EMPLOYERS' NAMES
 No. **10** (B) **Washington Forest Protection Association (WFPA)**
 No. ____ (C)
 No. **12** (D) **Washington Roundtable**

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
Fiscal, NatRes, Bus&Cons.Aff.	Fiscal, Natural Resources, Environment	WFPA
Fiscal, Ed, Bus&Cons.Aff.	Fiscal, Education, DoR, OFM	Washington Roundtable

Continued on attached pages

13. Of the time spent lobbying, what percentage was devoted to lobbying: the Legislature **80%** State Agencies **20%**.

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 **Cindi Holmstr** DATE **4/14/17**

CONTINUE ON NEXT PAGE

L2
11/95

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

1. Lobbyist Name
Pierce Consulting Services, LLC

Mailing Address
P. O. Box 4410

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

New Address? Yes No

2. This report is for the period March 2017 This report corrects or amends the report for _____ (Month) _____ (Year)

Business Telephone
(360) 870-2729

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>13</u> Column B	Employer No. <u>14</u> Column C	Employer No. <u>15</u> Column D
3. COMPENSATION earned from employer for lobbying this period (salary, wages, retainer)	\$		\$ 2,477.89	\$ 2,703.15	\$ 3,604.21
4. PERSONAL EXPENSES for travel, food and refreshments		\$			156.80
5. ENTERTAINMENT, GRATUITIES, TRAVEL, SEMINARS for state officials, employees, their families (See #15)					203.30
6. CONTRIBUTIONS to elected officials, candidates and political committees (See #16)					20.00
7. ADVERTISING, PRINTING, INFORMATIONAL LITERATURE					
8. POLITICAL ADS, PUBLIC RELATIONS, POLLING, TELEMARKETING, ETC. (See #17)					
9. OTHER EXPENSES AND SERVICES (See #18)			272.11	296.85	395.79
10. TOTAL COMPENSATION AND EXPENSES INCURRED THIS MONTH	\$	\$	\$ 2,750.00	\$ 3,000.00	\$ 4,380.10

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

11. EMPLOYERS' NAMES

No. 13 (B) Washington Wholesale Druggists Association (WWDA)

No. 14 (C) Russell Investments

No. 15 (D) Comcast Cable Communications

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
Fiscal, Tax, Health Care, HumServ.	Fiscal, Tax, Health Care, Bus&Cons.Aff.	WWDA
Fiscal, StGovt, Bus&Cons.Aff.	Fiscal, DoR, OFM	Frank Russell Company
Telecom, Bus&Cons.Aff.	Telecom, Energy&Utilities, Fiscal	Comcast

Continued on attached pages

13. Of the time spent lobbying, what percentage was devoted to lobbying: the Legislature 80% State Agencies 20%.

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 <i>Cindi Holmstrom</i>	DATE <i>4/14/17</i>
--	------------------------

CONTINUE ON NEXT PAGE

L2
11/95

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

1. Lobbyist Name
Pierce Consulting Services, LLC

Mailing Address
P. O. Box 4410

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

New Address? Yes No

2. This report is for the period March (Month) 2017 (Year) This report corrects or amends the report for _____ (Month) _____ (Year) Business Telephone **(360) 870-2729**

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>16</u> Column B	Employer No. <u>17</u> Column C	Employer No. ____ Column D
3. COMPENSATION earned from employer for lobbying this period (salary, wages, retainer)	\$		\$ 2,703.15	\$ 1,126.31	\$
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)			296.85	123.69	
10. TOTAL COMPENSATION AND EXPENSES INCURRED THIS MONTH	\$	\$	\$ 3,000.00	\$ 1,250.00	\$

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

11. EMPLOYERS' NAMES

No. 16 (B) **WA Charters Action (WCA)**

No. 17 (C) **College Success Foundation (CSF)**

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
Fiscal, Education Fiscal, Education	Higher Ed, Education, Fiscal Higher Ed, Fiscal	WCA CSF

Continued on attached pages

13. Of the time spent lobbying, what percentage was devoted to lobbying: the Legislature 80% State Agencies 20%.

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 <i>Cindi Holmst</i>	DATE <i>4/14/17</i>
---	------------------------

CONTINUE ON NEXT PAGE

L-2 Attachment - Pierce Consulting Services, LLC
Mar-17

Item #15

3/21/2017	Dockside Bistro, Olympia	R. Makin, Rep Goodman, D. Shoemaker, D. Eliason, C. Holmstrom, Rep Slater, Rep Springer (pd own), Rep McBride (pd own), Rep Clibborn (pd own) share of total	111.39	8,10,12,15
3/21/2017	1611 Water Street SW, Olympia	Sen Bailey, Sen Braun (pd own), Sen Rossi, R. Moore, M. Loesch, Sen Becker, Sen Brown, J. Troyer, S. Gano, C. Holmstrom, D. Shoemaker, J. Justin, Sen Fain (pd own), K. Wirtz, R. Makin share of total	274.31	8,10,12,15
3/7/2017	Dockside Bistro, Olympia	Senator J. Fain (paid own), Reps. L. Springer (paid own), J. Clibborn (paid own), R. Goodman; Senator G. Palumbo, D. Eliason, C. Holmstrom, D. Shoemaker, K. Clauson, R. Makin - share of total	236.99	8,10,12,15
3/14/2017	Dockside Bistro, Olympia	Sen Polumbo, Rep Stokesbury, Rep Senn, Rep Springer, Rep Graves (pd own), Rep Goodman, Sen Fain (pd own), C Holmstrom, K. Clauson, R. Makin, D. Shoemaker (split 4 ways)	190.52	8,10,12,15