

*Amended*  
 3-30-17

**L2**  
 1/15

PDC OFFICE USE

DATE FILED PDC

MAR 10 2016  
 DATE FILED PDC

JUL 26 2017

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

1. Lobbyist Name: **Christophersen, Inc.** Mailing Address: **P. O. Box 9157** City: **Seattle** State: **WA** Zip + 4: **98109** Date Filed: **JAN 13 2017**

2. This report is for the period (Month) **FEB** (Year) **2016**. This report corrects or amends the report for (Year) **Feb 2016**. New Address?  Yes  No Business Telephone: **(360) 485-2026**

**ALL COMPLETE THIS PART** Include all reportable expenditures by lobbyist and lobbyist's employer for or on behalf of the lobbyist incurred during the reporting period.

**COMPLETE IF YOU HAVE MORE THAN ONE EMPLOYER** 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	Amount attributed to each employer		
			Employer No. 1 Column B	Employer No. 2 Column C	Employer No. 3 Column D
3. COMPENSATION earned from employer for lobbying this period (salary, wages, retainer)	\$ 48,480.00				
4. PERSONAL EXPENSES for travel, food and refreshments	\$ 474.50	\$ 68.00	\$ 4,500.00	\$ 2,000.00	\$ -0-
5. ENTERTAINMENT, GRATUITIES, TRAVEL, SEMINARS for state officials, employees, their families (See #15)	232.58				
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)	1500.00				
10. TOTAL COMPENSATION AND EXPENSES INCURRED THIS MONTH	\$ 49,250.58	\$ 68.00	\$ 4,500.00	\$ 2,000.00	\$ -0-

11. EMPLOYERS' NAMES: No. 1 (B) Association of Washington Spirits and Wine Distributors; No. 2 (C) LifeCenter Northwest; No. 3 (D) LMH INC. (Attach additional page(s) if you lobby for more than three employers.)

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

Bus & Cons. Affairs, State Gov't 1  
 Fiscal, Health Care, Human Services, State Gov't 2  
 Bus & Cons. Affairs, Fiscal, Health Care, State & Local Gov't 3

13. Of the time spent lobbying, what percentage was devoted to lobbying: the Legislature 90% State Agencies 10%.

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

Date registration ends: 11/1/15 Employer's name: OneEnergy Renewables

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: *Vicki Christophersen* DATE: *3/10/16*

CONTINUE ON REVERSE

*1123117*  
*3/30/17*

Lobbyist Name

Christophersen, Inc.

Reporting Period

FEB (Month)

2016 (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. In the total amount column, show the total amount spent for each occasion including any staging costs, tax, and gratuity. Also show the actual amount spent entertaining each individual, as shown in the example.

- Entertainment expenditures exceeding \$50 per occasion (including lobbyist's expense) for meals, beverages, tickets, passes, or for other forms of entertainment.
- Receptions. See WAC 390-20-020A, L-2 Reporting Guide, to determine if per person cost is required.
- 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. Include actual amounts spent for entertainment	Description, Place, etc.	Sponsoring Employer	Total Amount
	See attached			
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: \_\_\_\_\_

7. 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.

8. 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
5-16	Sara Stewart 6722 Amirothys SW Riverton UT 84579	S, H, 10, 14	1500.00

Continued on attached page.



**PUBLIC DISCLOSURE COMMISSION**  
 711 CAPITOL WAY RM 206  
 PO BOX 40908  
 OLYMPIA WA 98504-0908  
 (360) 753-1111  
 TOLL FREE 1-877-601-2828

**L2**  
1/15

PDC OFFICE USE

# Lobbyist Monthly Expense Report

(as required by Chapter 397, 1995 Session Laws)

1. Lobbyist Name: **Christophersen, Inc.**  
 Mailing Address: **P. O. Box 9157**  
 City: **Seattle** State: **WA** Zip + 4: **98109**

2. This report is for the period: **FEB** (Month) **2016** (Year)  
 This report corrects or amends the report for: **2** (Month) **16** (Year)

New Address?  Yes  No  
 Business Telephone: **(360) 485-2026**

**ALL COMPLETE THIS PART**

**COMPLETE IF YOU HAVE MORE THAN ONE 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	Amount attributed to each employer		
			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)					
4. PERSONAL EXPENSES for travel, food and refreshments	\$		\$ 4,000.00	\$ 3,750.00	\$ 5,000.00
5. ENTERTAINMENT, GRATUITIES, TRAVEL, SEMINARS for state officials, employees, their families (See #15)		\$		3375.00	
6. CONTRIBUTIONS to elected officials, candidates and political committees (See #16)				119.01	
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	\$	\$	\$ 4,000.00	\$ 3,869.01	\$ 4,500.00

11. EMPLOYERS' NAMES: (Attach additional page(s) if you lobby for more than three employers.)

No. 4 (B) Merck Sharp & Dohme Corp. & Affiliates  
 No. 5 (C) Pediatrix Medical Group  
 No. 6 (D) Stand for Children Washington

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**

Bus & Cons. Affairs, Fiscal, Health Care, Human Services, State & Local Gov't  
 Fiscal, Health Care, Human Services, State Gov't  
 Education, Fiscal, State & Local Gov't

Employer Represented: 4, 5, 6

3. Of the time spent lobbying, what percentage was devoted to lobbying: the Legislature 90% State Agencies 10%.

4. 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 \_\_\_\_\_ DATE \_\_\_\_\_

CONTINUE ON REVERSE



**PUBLIC DISCLOSURE COMMISSION**  
**711 CAPITOL WAY RM 206**  
**PO BOX 40908**  
**OLYMPIA WA 98504-0908**  
**(360) 753-1111**  
**TOLL FREE 1-877-601-2828**

**L2**  
1/15

PDC OFFICE USE

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

1. Lobbyist Name  
**Christophersen, Inc.**

Mailing Address  
**P. O. Box 9157**

City  
**Seattle** State **WA** Zip + 4 **98109**

2. This report is for the period **FEB** (Month) **2016** (Year) This report corrects or amends the report for **2** (Month) **14** (Year)

New Address?  Yes  No

Business Telephone  
**(360) 485 -2026**

ALL COMPLETE THIS PART

COMPLETE IF YOU HAVE MORE THAN ONE 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	Amount attributed to each employer		
			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)	\$				
4. PERSONAL EXPENSES for travel, food and refreshments		\$	\$ 2,000.00	\$ 2,000.00	\$ <del>5,500.00</del> <b>5225</b>
5. ENTERTAINMENT, GRATUITIES, TRAVEL, SEMINARS for state officials, employees, their families (See #15)					\$ <del>125.00</del>
6. CONTRIBUTIONS to elected officials, candidates and political committees (See #16)					113.57
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	\$	\$	\$ 2,000.00	\$ 2,000.00	\$ <del>5,613.57</del> <b>5778.57</b>

11. EMPLOYERS' NAMES (Attach additional page(s) if you lobby for more than three employers.)

No. 7 (B) Washington Alliance of Boys & Girls Clubs  
 No. 8 (C) Washington State University  
 No. 9 (D) Washington Refuse & Recycling 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

Education, Fiscal, Human Services, State & Local Gov't 7  
 Education, Health Care, Higher Ed., State & Local Gov't 8  
 Bus & Cons. Affairs, Energy & Utilities, Env. Affairs, Fiscal, Labor, State & Local Gov't, Transportation 9

13. Of the time spent lobbying, what percentage was devoted to lobbying: the Legislature 90% State Agencies 10%.

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 \_\_\_\_\_ DATE \_\_\_\_\_

CONTINUE ON REVERSE



**PUBLIC DISCLOSURE COMMISSION**  
**711 CAPITOL WAY RM 206**  
**PO BOX 40908**  
**OLYMPIA WA 98504-0908**  
**(360) 753-1111**  
**TOLL FREE 1-877-601-2828**

**L2**  
1/15

PDC OFFICE USE

# Lobbyist Monthly Expense Report

(as required by Chapter 397, 1995 Session Laws)

1. Lobbyist Name  
**Christophersen, Inc.**

Mailing Address  
**P. O. Box 9157**

City  
**Seattle** State  
**WA** Zip + 4  
**98109**

2. This report is for the period **FEB** (Month) **2016** (Year)

This report corrects or amends the report for **2** (Month) **16** (Year)

New Address?  Yes  No

Business Telephone  
**(360) 485-2026**

**ALL COMPLETE THIS PART**

**COMPLETE IF YOU HAVE MORE THAN ONE 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	Amount attributed to each employer		
			Employer No. <u>15</u> Column B	Employer No. <u>16</u> Column C	Employer No. Column D
3. COMPENSATION earned from employer for lobbying this period (salary, wages, retainer)	\$		\$ 5,000.00	\$ 3,000.00	\$
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)					
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	\$	\$	\$ 5,000.00	\$ 3,000.00	\$

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

11. EMPLOYERS' NAMES
- No. 15 (B) Washington Biotechnology & Biomedical Association
  - No. 16 (C) CalTex Protective Coatings
  - 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**

**Bus & Cons. Affairs, Fiscal, Health Care, Higher Ed, Technology**  
**Bus & Cons. Affairs**

Employer Represented

**15**  
**16**

x Continued on attached pages

13. Of the time spent lobbying, what percentage was devoted to lobbying: the Legislature 90% State Agencies 10%.

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**

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

LOBBYIST SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

CONTINUE ON REVERSE



**PUBLIC DISCLOSURE COMMISSION**  
 714 CAPITOL WAY RM 206  
 PO BOX 40908  
 OLYMPIA WA 98504-0908  
 (360) 753-1111  
 TOLL FREE 1-877-601-2828

**L2**  
1/15

PDC OFFICE USE

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

1. Lobbyist Name  
**Christophersen, Inc.**

Mailing Address  
**P. O. Box 9157**

City **Seattle** State **WA** Zip + 4 **98109**

2. This report is for the period **FEB** (Month) **2016** (Year) This report corrects or amends the report for **2** (Month) **14** (Year)

New Address?  Yes  No

Business Telephone **(360) 485 -2026**

**ALL COMPLETE THIS PART**

**COMPLETE IF YOU HAVE MORE THAN ONE 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	Amount attributed to each employer		
			Employer No. <u>10</u> Column B	Employer No. <u>11</u> Column C	Employer No. Column D
3. COMPENSATION earned from employer for lobbying this period (salary, wages, retainer)	\$				
4. PERSONAL EXPENSES for travel, food and refreshments		\$	\$ 6,000.00-	\$ 2,000.00	\$
5. ENTERTAINMENT, GRATUITIES, TRAVEL, SEMINARS for state officials, employees, their families (See #15)			\$ 5625.00		
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)			\$ 375.00		
10. TOTAL COMPENSATION AND EXPENSES INCURRED THIS MONTH	\$	\$	\$ 6,000.00	\$ 2,000.00	\$

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

11. EMPLOYERS' NAMES
- No. 10 (B) Washington CannaBusiness Association
  - No. 11 (C) Northwest Kidney Centers
  - 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. **Bus & Cons. Affairs, Agriculture, Fiscal, State Gov't Fiscal, Health Care, Human Services, State Gov't**

Legislative Committee or State Agency Considering Matter

Employer Represented **10 11**

x Continued on attached pages

13. Of the time spent lobbying, what percentage was devoted to lobbying: the Legislature 90% State Agencies 10%.

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 \_\_\_\_\_ DATE \_\_\_\_\_

CONTINUE ON REVERSE



**PUBLIC DISCLOSURE COMMISSION**  
 711 CAPITOL WAY RM 206  
 PO BOX 40908  
 OLYMPIA WA 98504-0908  
 (360) 753-1111  
 TOLL FREE 1-877-601-2828

**L2**  
1/15

PDC OFFICE USE

# Lobbyist Monthly Expense Report

(as required by Chapter 397, 1995 Session Laws)

1. Lobbyist Name: **Christophersen, Inc.**  
 Mailing Address: **P. O. Box 9157**  
 City: **Seattle** State: **WA** Zip + 4: **98109**  
 2. This report is for the period: **FEB** (Month) **2016** (Year)  
 This report corrects or amends the report for: **2** (Month) **16** (Year)  
 New Address?  Yes  No  
 Business Telephone: **(360) 485 -2026**

**ALL COMPLETE THIS PART**

**COMPLETE IF YOU HAVE MORE THAN ONE 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	Amount attributed to each employer		
			Employer No. <u>12</u> Column B	Employer No. <u>13</u> Column C	Employer No. <u>14</u> Column D
3. COMPENSATION earned from employer for lobbying this period (salary, wages, retainer)	\$		\$ - 0 -	\$ - 0 -	\$ -4,200.00-
4. PERSONAL EXPENSES for travel, food and refreshments		\$			3825.00
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)					375.00
10. TOTAL COMPENSATION AND EXPENSES INCURRED THIS MONTH	\$	\$	\$ - 0 -	\$ - 0 -	\$ 4,200.00

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

11. EMPLOYERS' NAMES  
 No. 12 (B) Snohomish County Fire District 1  
 No. 13 (C) Gilda's Club Seattle  
 No. 14 (D) The College Board

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, Health Care               |  | 13                   |
| Fiscal                            |  | 14                   |
| Education, Fiscal                 |  | 15                   |
- Continued on attached pages

13. Of the time spent lobbying, what percentage was devoted to lobbying: the Legislature 90% State Agencies 10%.

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

DATE

CONTINUE ON REVERSE

Attachment to:  
**Christophersen L2**  
Feb-16

**Item 15:**

Date	Names of Persons Entertained or Provided Travel, etc.	Description, Place, etc.	Sponsoring Employer	Amount
2/23/2016	Senator C. King (paid own), V. Christophersen, Brad Boswell; share of total	Basillico; Olympia, WA	9	\$113.57
2/24/2016	Rep. H. Zeiger (paid own), D. Michener, V. Christophersen, B. Boswell; share of total	Waterstreet Café; Olympia, WA	5	\$119.01