

L2
12/14

PDC OFFICE USE

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

DATE FILED PDC
 FEB 24 2017

1. Lobbyist Name
Nick Federici

Mailing Address
2714 North Alder St.

City **Tacoma** State **WA** Zip + 4 **98407**

2. This report is for the period (Month) (Year) This report corrects or amends the report for (Month) (Year)
 (Month) (Year) **3** **2016**

New Address? Yes No
 Business Telephone (360)481 -1936

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. 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)	\$ 21,100.00		\$ 4000.00	\$ 3000.00	\$ 100.00
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	\$ 21,100.00	\$	\$ 4000.00	\$ 3000.00	\$ 100.00

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

11. EMPLOYERS' NAMES
- No. 1 (B) Fairfax Hospital
 - No. 2 (C) Pioneer Human Services
 - No. 3 (D) Respiratory Care Society of WA

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
	Mental Health	1
	Human Services	2
	Respiratory Health	3

Continued on attached pages

13. Of the time spent lobbying, what percentage was devoted to lobbying: the Legislature 100% 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

DATE

Nick Federici

2/17/2017

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City Tacoma	State WA	Zip + 4 98407	New Address? <input type="checkbox"/> Yes <input type="checkbox"/> No
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3. COMPENSATION earned from employer for lobbying this period (salary, wages, retainer)	\$		\$ 2500.00	\$ 1250.00	\$ 2500.00
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	\$	\$	\$ 2500.00	\$ 1250.00	\$ 2500.00

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

11. EMPLOYERS' NAMES
- No. 1 (B) SEIU
 - No. 2 (C) United Way of King CO
 - No. 3 (D) WA Information Network 211

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
	Long Term Care and Minimum Wage	4
	Human Services	5
	211 System	6

Continued on attached pages

13. Of the time spent lobbying, what percentage was devoted to lobbying: the Legislature 100% State Agencies _____%.

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Date registration ends: _____ Employer's name: _____

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I certify that this report is true and complete to the best of my knowledge.	LOBBYIST SIGNATURE _____ DATE _____ <div style="text-align: right;">2/17/2017</div>

CONTINUE ON REVERSE

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 (Month) (Year) **3** **2016** (Month) (Year) **(360) 481-1936**

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3. COMPENSATION earned from employer for lobbying this period (salary, wages, retainer)	\$	\$	\$ 3750.00	\$ 2000.00	\$ 2000.00
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)					
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9. OTHER EXPENSES AND SERVICES (See #18)					
10. TOTAL COMPENSATION AND EXPENSES INCURRED THIS MONTH	\$	\$	\$ 3750.00	\$ 2000.00	\$ 2000.00

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

11. EMPLOYERS' NAMES
- No. 1 (B) WA Low-Income Housing Alliance
 - No. 2 (C) United Ways of the Pacific Northwest
 - No. 3 (D) Verified Voting

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
	Housing and Homelessness	7
	Human Services	8
	Voting Rights	9

Continued on attached pages

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2/17/2017

CONTINUE ON REVERSE

WA 211

has been readjusted
from 0 to \$2500