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

PDC FORM

L-5

(Rev 1/09)

LOBBYING BY STATE AND LOCAL GOVERNMENT AGENCIES

2020-07-07

| 3768 | | | |
|--|-------------------------------------|-----------------|---|
| Agency or Governmental Entity Name and Address | Date p | repared | Report for calendar quarter ending |
| WASHTUCNA SD 109-43 | 202 | 2020-07-07 | |
| 730 E BOOTH AVE | County | County | |
| WASHTUCNA WA 99371 | ADAMS | | Month Year |
| | | | |
| PERSONS WHO LOBBIED THIS QUARTER | | | |
| Name Job title | | Annual salary | % of time spent lobbying during quarter |
| Bill/WAC number General description of lobbying activities or objectives | | | |
| | | | |
| ☐ Check if person spent more than \$15 of non-public funds in lobbying | | | |
| Name Job title | | Annual salary | % of time spent lobbying |
| | | | during quarter |
| Bill/WAC number General description of lobbying activities or objectives | | | |
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| Observation and the state of th | | | |
| Check if person spent more than \$15 of non-public funds in lobbying Job title | | Annual salary | % of time spent lobbying |
| THE | | 7 mildar saidry | during quarter |
| Dillana Committee Committee of labeling a strictly on the strict | | | |
| Bill/WAC number General description of lobbying activities or objectives | | | |
| | | | |
| _ | | | |
| Check if person spent more than \$15 of non-public funds in lobbying | | | |
| EXPENDITURES FOR LOBBYING THIS QUARTER Report only the separately identifiable and measurable expenditures incurred for lobbying purposes | | | |
| Salaries Of Persons Who Lobbied (Include only portion of quarterly salary attributable to lobbying) | | | \$0.00 |
| Travel (Include food, lodging, per diem payments and cost of transportation used) | | \$0.00 | |
| Brochures And Other Publications Whose Principal Purpose Is To Influence Legislation | | \$0.00 | |
| Consultants Or Other Contractual Services | | \$354.25 | |
| Total This Quarter | | \$354.25 | |
| Total To Date This Year | | \$0.00 | |
| CERTIFICATION: I certify that to the best of my knowledge the above is a true, complete and correct statement in accordance | Name of employee completing report | | |
| with RCW 42.17.190. | KATIE LASEN | | |
| Signature of agency head | Work telephone Number 509-646-3211 | | |
| VANCE WING | Work E-mail KLASEN@TUCNA.WEDNET.EDU | | |
| | | | |

SERVICES ATTACHMENT Report for calendar quarter ending Agency or Governmental Entity Name 2020 **Yea**r WASHTUCNA SD 109-43 JUN Month Date Name Amount 2020-04-01 MARIE SULLIVAN, PUBLIC AFFAIRS CORPORATION \$118.09 Purpose ADVOCACY ON BEHALF OF EWQSC PRIORITIES Name Amount 2020-05-01 MARIE SULLIVAN, PUBLIC AFFAIRS CORPORATION \$118.08 Purpose ADVOCACY ON BEHALF OF EWQSC PRIORITIES Amount Date Name 2020-06-01 MARIE SULLIVAN, PUBLIC AFFAIRS CORPORATION \$118.08 Purpose ADVOCACY ON BEHALF OF EWQSC PRIORITIES Date Name Amount Purpose Date Name Amount Purpose