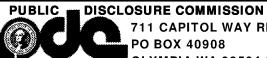
P. 1



711 CAPITOL WAY RM 206 PO BOX 40908 **OLYMPIA WA 98504-0908** (360) 753-1111

TOLL FREE 1-877-601-2828

PDC FORM (Rev 1/09)

LOBBYING BY STATE AND LOCAL GOVERNMENT AGENCIES

2020-10-05

3902

| 3902 | | | |
|---|---|------------------------------|------------------------------------|
| Agency or Governmental Entity Name and Address | Date prepared | | Report for calendar quarter ending |
| THE NORTHWEST SEAPORT ALLIANCE | 20 | 20-10-05 | |
| PO BOX 2985 | | nty | SEP 2020 |
| TACOMA WA 98401-2985 | PI | ERCE | Month Year |
| | | | |
| PERSONS WHO LOBBIED THIS QUARTER | | | |
| Name Job title | , | | |
| | ERNMENT AFFAIRS | | during quarter |
| Bill/WAC number General description of lobbying activities or objectives | ECTOR \$135,672.0 0.19% | | 0.19% |
| OTHE LOBBIED SEN DAVID FROCKT RE: CAPITAL BUDGET | | | |
| n/a OTHE LOBBIED SEN JOE NGUYEN RE: CAPITAL BUDGET n/a | | | |
| 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 | | | |
| | | | |
| | | | |
| 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 | | | |
| | | | |
| | | | |
| 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) | | \$65.23 |
| 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 | | | \$15,000.00 |
| Total This Quarter | | , | \$15,065.23 |
| Total To Date This Year | | | \$0.00 |
| CERTIFICATION: I certify that to the best of my knowledge the above is a Name of employee completing | | | |
| true, complete and correct statement in accordance with RCW 42.17.190. | SEAN EAGAN | | |
| Signature of agency head | Work telephone Number 800-657-9808 | | |
| digitative of agonoly fload | | | |
| JOHN WOLFE | · | 800-65/-9808 NWSEAPORTALL | |

SERVICES ATTACHMENT Report for calendar quarter ending Agency or Governmental Entity Name 2020 **Yea**r THE NORTHWEST SEAPORT ALLIANCE SEP Month Date Name Amount 2020-07-01 LISA THATCHER, INC. \$5,000.00 Purpose MONTHLY RETAINER Name Amount 2020-08-01 LISA THATCHER, INC. \$5,000.00 Purpose MONTHLY RETAINER Date Name Amount 2020-09-01 LISA THATCHER, INC. \$5,000.00 Purpose MONTHLY RETAINER Date Name Amount Purpose Date Name Amount Purpose