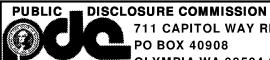
P. 1



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

PDC FORM

L-5

(Rev 1/09)

LOBBYING BY STATE AND LOCAL GOVERNMENT AGENCIES

2021-03-31

4219

Agency or Governmental Entity Name and Address	Date p	repared	Report for calendar quarter ending
CITY OF BATTLE GROUND	20:	21-03-31	quarter enamg
109 SW 1ST ST STE 221	Count		MAR 2021
BATTLE GROUND WA 98604		ARK	Month Year
DATTHE GROOND WA 50004		41/1/	
PERSONS WHO LOB	BIED THIS QUARTER		
Name Job title		Annual salary	% of time spent lobbying
ADRIAN CORTES MAYO)R	Í	during quarter
		\$13,200.00	3.00%
Bill/WAC number General description of lobbying activities or objectives HB MAYOR CORTES SPOKE ON THREE SEPARA 1069	ATE OCCASIONS FOR	1.5 HOURS EA	CH TIME
Check if person spent more than \$15 of non-public funds in lobbying		Т	
Name Job title		Annual salary	% of time spent lobbying during quarter
			3 4
Bill/WAC number General description of lobbying activities or objectives		1	
☐ Check if person spent more than \$15 of non-public funds in lobbying		Appud coloni	
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 LO Report only the separately identifiable and measure			
Salaries Of Persons Who Lobbied (Include only portion of quarterly salary	attributable to lobbying)		\$99.00
Travel (Include food, lodging, per diem payments and cost of transportation of	used)		\$0.00
Brochures And Other Publications Whose Principal Purpose Is To Influe	ence Legislation		\$0.00
Consultants Or Other Contractual Services			\$9,191.63
	Total This Quarter		\$9,290.63
	Total To Date This	Year	1 - 7
			\$0.00
CERTIFICATION: I certify that to the best of my knowledge the above is a	Name of employee completi	ng report	·
CERTIFICATION: I certify that to the best of my knowledge the above is a true, complete and correct statement in accordance with RCW 42.17.190.	Name of employee complete KAY KAMMER	ng report	·
true, complete and correct statement in accordance	KAY KAMMER	ng report 360-342-5008	\$0.00

	ATTACHMENT	1	
Agency or Governn	nental Entity Name	Report for calendar quarter endir	ng
CITY OF BAT	ILE GROUND	MAR 2021 Month Year	
Date 2021-01-08 Purpose LOBBY	Name GORDON THOMAS HONEYWELL ING	Amount \$3,000	0.00
Date 2021-02-05	Name GORDON THOMAS HONEYWELL	Amount \$3,090	0.00
Purpose LOBBY		, , , , ,	
Date 2021-03-05	Name GORDON THOMAS HONEYWELL	Amount \$3,090	0.00
Purpose LOBBY	ING		
Date 2021-02-05 Purpose CELL	Name GORDON THOMAS HONEYWELL PHONE PRO-RATED	Amount \$ 6	6.07
Date 2021-03-05	Name	Amount	
	GORDON THOMAS HONEYWELL PHONE - PRORATED	Ş:	5.56
Date	Name	Amount	
Purpose			
Date	Name	Amount	
Purpose			
Date	Name	Amount	
Purpose			
Date	Name	Amount	
Purpose			
Date	Name	Amount	
Purpose			
Date	Name	Amount	
Purpose			
Date	Name	Amount	