



PUBLIC DISCLOSURE COMMISSION

711 Capitol Way Rm. 206, PO Box 40908 • Olympia, Washington 98504-0908 • (360) 753-1111 • FAX (360) 753-1112
Toll Free 1-877-601-2828 • E-mail: pdc@pdc.wa.gov • Website: www.pdc.wa.gov

To: Members, Washington State Public Disclosure Commission
From: Lori Anderson, Communications & Training Officer
Date: November 24, 2014
Re: Rule Making – December 4, 2014 Commission Meeting
Public Hearing to Consider Adopting Rules Regarding 1) Disclosing Lobbying Expenditures for Legislative Receptions and 2) Personal Financial Affairs Disclosure

AGENDA ITEM

On December 4, 2014, the Commission will consider adopting new and amended rules that will affect 1) disclosing lobbying expenditures for legislative receptions and 2) personal financial affairs disclosure.

BACKGROUND

Disclosing Lobbying Expenditures for Legislative Receptions

In September 2014, the Commission approved draft language for new proposed **WAC 390-20-020A, L-2 Reporting Guide for Entertainment, Receptions, Travel and Educational Expenditures**. The proposed new rule modifies and converts to rule PDC Interpretation 96-03, *L-2 Reporting Guide for Entertainment, Travel and Educational Expenditures*. The modification proposes criteria that, when adhered to, will relieve a lobbyist from disclosing a per-person cost for a legislative reception.

After the approved language was filed with the Code Reviser and noted for hearing, a stakeholder questioned the instructions given for theater tickets and golf outings. The \$50 reference in the interpretation and proposed new rule refers to the annual gift limit contained in the Ethics Act. Staff has determined that the \$50 reference should be deleted in light of the Commission's inflationary adjustment increasing the >\$25 itemization threshold to >\$50, effective December 1, 2014. Instructions for these types of events are still necessary because the Ethics Act excepts from the \$50 gift limit events sponsored by or in conjunction with a civic, charitable, governmental, or community organizations. Therefore, a revision to the proposed rule that does not contain the \$50 references is attached for the Commission's consideration.

Also in September, the Commission approved draft language to amend **WAC 390-20-020 Forms for lobbyist report of expenditures**. The proposed amendment inserts instructions on the lobbyist monthly report (PDC Form L-2) explaining that a per-person cost is not required for qualifying legislative receptions.

A copy of hearing notice WSR 14-21-174, distributed November 5, is attached along with the related September meeting materials.

Personal Financial Affairs Disclosure

The proposed rules, if adopted, will:

- Convert to rule PDC Interpretation 91-01, *Who is an “Officer” for Purposes of RCW 42.17.241(1)(g) [RCW 42.17A.710(1)(g)]?*;
- Make inflationary adjustments to disclosure threshold dollar amounts; and
- Relieve office holders and state executive officers from disclosing qualifying legislative reception food and beverage exceeding \$50.

In October 2012, the Commission approved draft language to convert PDC Interpretation 91-01 to new **WAC 390-24-150, Definition – Officer**. The definition of officer is used for purposes of identifying which entities a filer must disclose on the Personal Financial Affairs Statement (PDC Form F-1).

In June 2014, the Commission voted to make inflationary adjustments to the disclosure thresholds contained in the F-1 form. With that vote, the Commission approved draft language to amend these rules:

- **WAC 390-24-010 Forms for statement of financial affairs;***
- **WAC 390-24-020 Forms for amending statement of financial affairs;***
- **WAC 390-24-202 Report of compensation from sales commissions; and**
- **WAC 390-24-301 Changes in dollar amounts of reporting thresholds and value codes.**

In July 2014, the Commission approved draft language for amendments to two additional rules that use the F-1 dollar thresholds and reporting code values:

- **WAC 390-16-071 Annual report of major contributors and persons making independent expenditures and**
- **WAC 390-20-110 Forms for lobbyist employers report.**

* In September 2014, when considering rule making that would relieve lobbyists from disclosing per-person costs for certain legislative receptions, the Commission approved draft amendatory language that instructs F-1 filers to exclude qualifying legislative reception food and beverage from the “Food, Travel, Seminars” section of the F-1 Supplement. This approved change is included in the attached proposed amendments to WACs 390-24-010 and 390-24-020.

A copy of hearing notice WSR 14-21-168, distributed November 5, is attached along with the June and July 2014 meeting materials.

COMMISSION ACTION

Barring any unanticipated comments at the public hearing, staff is requesting the Commission adopt the proposed amendments and new rules described above. Any rules adopted on December 4 will take effect 31 days after filing with the Code Reviser.

Attachments: WSR 14-21-174

Proposed new WAC 390-20-020A, approved by the Commission

Proposed new WAC 390-20-020A, revised by staff

Proposed amendment to WAC 390-20-020

Related September 2014 meeting materials

WSR 14-21-168

Proposed new WAC 390-24-150

Proposed amendments to: WACs 390-16-071, 390-20-110, 390-24-010, 390-24-020, 390-24-202, and 390-24-301

Related June and July 2014 meeting materials



PROPOSED RULE MAKING

CR-102 (June 2012)

(Implements RCW 34.05.320)

Do NOT use for expedited rule making

Agency: Public Disclosure Commission

Preproposal Statement of Inquiry was filed as WSR 14-10-062 ; or
 Expedited Rule Making--Proposed notice was filed as WSR _____; or
 Proposal is exempt under RCW 34.05.310(4) or 34.05.330(1).

Original Notice
 Supplemental Notice to WSR _____
 Continuance of WSR _____

Title of rule and other identifying information: (Describe Subject)
 WAC 390-20-020 Forms for Lobbyist Report of Expenditures
 WAC 390-20-020A L-2 Reporting Guide for Entertainment, Receptions, Travel and Educational Expenditures

Hearing location(s):

711 Capitol Way, Rm. 206
 Olympia, WA 98504

Date: December 4, 2014 Time: 9:30 AM

Submit written comments to:

Name: Lori Anderson
 Address: (mail) P. O. Box 40908, Olympia, WA 98504-0908
 (physical address) 711 Capitol Way, Rm. 206, Olympia, WA
 e-mail lori.anderson@pdc.wa.gov
 fax (360)753-1112 by (date) November 26, 2014

Assistance for persons with disabilities: Contact

Jana Greer by email at jana.greer@pdc.wa.gov or telephone
 TTY () _____ or (360) 753-1980

Date of intended adoption: December 4, 2014
 (Note: This is NOT the effective date)

Purpose of the proposal and its anticipated effects, including any changes in existing rules: Interpretive statement 96-03, L-2 Reporting Guide for Entertainment, Travel and Educational Expenditures is being converted to rule. Related instructions pertaining to disclosing costs of certain legislative receptions are being inserted on PDC Form L-2. Additionally, the instructions contained in PDC Forms F-1 and F-1 are similarly updated under separate notice published in Washington State Register Issue 14-21.*

Proposed new WAC 390-20-020A explains how typical lobbying expenditures for gifts, entertainment, travel, and educational expenses are disclosed on lobbyists' monthly reports and whether notice needs to be provided to the recipient. The proposed new rule differs from the interpretation in that it allows an alternative method for disclosing legislative receptions. The change relieves lobbyists from disclosing the per-person cost of legislative receptions, provided that the entire legislature, all members of a chamber, or any of the two largest caucuses recognized in each chamber are invited and the reception is sponsored by a person other than a lobbyist; attended by individuals other than legislators, lobbyists, and lobbyist employers; is a social event; and does not include a sit-down meal. Proposed amendment to WAC 390-20-020 inserts instructions on the monthly lobbyist expenditure report (PDC Form L-2) explaining that disclosing the per-person cost for legislative receptions as defined in [proposed] WAC 390-20-020A is not required.

* Under separate notice, a December 4, 2014 hearing is scheduled to consider amendments to WACs 390-20-010 and 390-20-020 to adjust for inflation the dollar amounts used for candidates', elected officials', and executive state officers' personal financial affairs disclosure (PDC Forms F-1 and F-1A) pursuant to RCW 42.17A.700 - .710. These forms are also used to disclose gifts of food and beverage in excess of \$50, as required by RCW 42.52.150(5). Proposed amendments to WACs 390-20-010 and 390-20-020 will insert instructions on the F-1 and F-1A forms explaining that disclosing the cost of food and beverage served at a qualifying legislative reception is not required.

Reasons supporting proposal: The interpretation has served as useful guidance for many years. Converting it to rule better informs the public of lobbyist disclosure requirements. Reception costs are currently disclosed in the same manner as entertainment, which requires disclosing a per-person cost. Stakeholders have encouraged the Commission to develop an alternative disclosure method for receptions, stating that organizers have difficulty monitoring what food and beverage attendees consume. The Commission has recently determined that receptions are not entertainment, but rather an opportunity for legislators to meet with constituents, an obligation or customary duty of holding office.. Furthermore, the proposed amendments conform to the disclosure requirements set out in the Ethics Act at RCW 42.52.150. Finally, the Commission believes the proposal will promote compliance and consistent reporting without depriving the public of significant data.

Statutory authority for adoption: RCWs 42.17A.110 and 42.17A.615(4).

Statute being implemented: RCW 42.17A.615

Is rule necessary because of a:

Federal Law? Yes No
 Federal Court Decision? Yes No
 State Court Decision? Yes No
 If yes, CITATION:

DATE
 October 22, 2014

NAME (type or print)
 LORI ANDERSON

SIGNATURE

TITLE
 Communications & Training Officer

CODE REVISER USE ONLY

OFFICE OF THE CODE REVISER
 STATE OF WASHINGTON
 FILED

DATE: October 22, 2014

TIME: 9:52 AM

WSR 14-21-174

Agency comments or recommendations, if any, as to statutory language, implementation, enforcement, and fiscal matters:

No increased costs to the agency are expected.

Name of proponent: (person or organization) Public Disclosure Commission

- Private
- Public
- Governmental

Name of agency personnel responsible for:

Name	Office Location	Phone
Drafting..... Lori Anderson	711 Capitol Way, Rm. 206, Olympia, WA 98504	(360) 664-2737
Implementation....Lori Anderson	711 Capitol Way, Rm. 206, Olympia, WA 98504	(360) 664-2737
Enforcement.....Andrea Doyle	711 Capitol Way, Rm. 206, Olympia, WA 98504	(360) 664-2735

Has a small business economic impact statement been prepared under chapter 19.85 RCW or has a school district fiscal impact statement been prepared under section 1, chapter 210, Laws of 2012?

Yes. Attach copy of small business economic impact statement or school district fiscal impact statement.

A copy of the statement may be obtained by contacting:

Name:

Address:

phone () _____

fax () _____

e-mail _____

No. Explain why no statement was prepared.

The implementation of these rule amendments has minimal impact on small business. The PDC is not subject to the requirement to prepare a school district fiscal impact statement, per RCWs 28A.305.135 and 34.05.320.

Is a cost-benefit analysis required under RCW 34.05.328?

Yes A preliminary cost-benefit analysis may be obtained by contacting:

Name:

Address:

phone () _____

fax () _____

e-mail _____

No: Please explain: A cost-benefit analysis is not required under RCW 34.05.328. The PDC is not an agency listed in subsection (5)(a)(i) of RCW 34.05.328. Further, the PDC does not voluntarily make the section applicable to the adoption of these rules pursuant to subsection (5)(a)(ii) and, to date, the joint administrative rules review committee has not made the section applicable to the adoption of these rules.

NEW SECTION

**WAC 390-20-020A L-2 Reporting guide.
For Entertainment, Receptions, Travel and Educational Expenditures**

Typical Expenditures* (Only permitted if receipt could not reasonably be expected to influence the performance of the officer's or employee's official duties.)	Expense Included on Line 5	Expense Included on Line 15	Give Copy of L-2 or Memo Report to Elected Official
Entertaining State Officials, Employees or Their Families:			
<input type="checkbox"/> Any type of entertainment occasion costing \$50 or less	Yes	No	No
<input type="checkbox"/> Breakfast, lunch or dinner for legislator or other state official or employee (singly, or in conjunction with family member(s)) and total cost for occasion is:			
<input type="checkbox"/> \$50 or less	Yes	No	No
<input type="checkbox"/> More than \$50, and amount attributable to legislator/family is more than \$50	Yes	Yes	Yes
<input type="checkbox"/> Tickets to theater, sporting events, etc., costing \$50 or less	Yes	Yes	No
<input type="checkbox"/> Golf outing at which no more than \$50 was spent on each official, including any member(s) of the official's family	Yes	Yes	No
Receptions:			
<input type="checkbox"/> Reception to which the entire legislature, all members of a chamber, or any of the two largest caucuses recognized in each chamber are invited and is:	Yes	Yes, except that a per-person cost is not required	No
<input type="checkbox"/> Sponsored by a person other than a lobbyist;			
<input type="checkbox"/> Attended by individuals other than legislators, lobbyists, and lobbyist employers;			
<input type="checkbox"/> A social event; and			
<input type="checkbox"/> Does not include a sit-down meal.			
<input type="checkbox"/> All other receptions	Yes	Yes	Yes, if the food and beverage cost for the legislator and family members exceeds \$50
Travel-Related Expenditures for Officials, Employees:			
<input type="checkbox"/> Travel, lodging, meals for office-related appearance or speech at lobbyist employer's annual conference	Yes	Yes	Yes
<input type="checkbox"/> Travel, lodging, meals for office-related tour of lobbyist employer's manufacturing plant or other facility	Yes	Yes	Yes
Educational Expenditures for Officials, Employees:			
<input type="checkbox"/> Travel, lodging, meals, tuition to attend seminar sponsored by nonprofit organization	Yes	Yes	Yes
Other Lobbying-Related Items:			
<input type="checkbox"/> Flowers costing any amount to officials, staff and/or family	Yes	No	No
<input type="checkbox"/> Candy costing \$50 or less per official or employee	Yes	No	No
<input type="checkbox"/> Golf balls, coffee cups or other promotional items	Yes	No	No
<input type="checkbox"/> Fruit baskets costing \$50 or less per official or employee	Yes	No	No

Note: References to employees or staff do not constitute authority to provide impermissible items to regulatory, contracting or purchasing employees.

REVISED POST COMMISSION APPROVAL

NEW SECTION

WAC 390-20-020A L-2 Reporting guide.

For Entertainment, Receptions, Travel and Educational Expenditures

Typical Expenditures* (Only permitted if receipt could not reasonably be expected to influence the performance of the officer's or employee's official duties.)	Expense Included on Line 5	Expense Included on Line 15	Give Copy of L-2 or Memo Report to Elected Official
Entertaining State Officials, Employees or Their Families:			
<input type="checkbox"/> Any type of entertainment occasion costing \$50 or less	Yes	No	No
<input type="checkbox"/> Breakfast, lunch or dinner for legislator or other state official or employee (singly, or in conjunction with family member(s)) and total cost for occasion is:			
<input type="checkbox"/> \$50 or less	Yes	No	No
<input type="checkbox"/> More than \$50, and amount attributable to legislator/family is more than \$50	Yes	Yes	Yes
<input type="checkbox"/> Tickets to theater, sporting events, etc.	Yes	Yes	No
<input type="checkbox"/> Golf outing	Yes	Yes	No
Receptions:			
<input type="checkbox"/> Reception to which the entire legislature, all members of a chamber, or any of the two largest caucuses recognized in each chamber are invited and is:	Yes	Yes, except that a per-person cost is not required	No
<input type="checkbox"/> Sponsored by a person other than a lobbyist;			
<input type="checkbox"/> Attended by individuals other than legislators, lobbyists, and lobbyist employers;			
<input type="checkbox"/> A social event; and			
<input type="checkbox"/> Does not include a sit-down meal.			
<input type="checkbox"/> All other receptions	Yes	Yes	Yes, if the food and beverage cost for the legislator and family members exceeds \$50
Travel-Related Expenditures for Officials, Employees:			
<input type="checkbox"/> Travel, lodging, meals for office-related appearance or speech at lobbyist employer's annual conference	Yes	Yes	Yes
<input type="checkbox"/> Travel, lodging, meals for office-related tour of lobbyist employer's manufacturing plant or other facility	Yes	Yes	Yes
Educational Expenditures for Officials, Employees:			
<input type="checkbox"/> Travel, lodging, meals, tuition to attend seminar sponsored by nonprofit organization	Yes	Yes	Yes
Other Lobbying-Related Items:			
<input type="checkbox"/> Flowers costing any amount to officials, staff and/or family	Yes	No	No
<input type="checkbox"/> Candy costing \$50 or less per official or employee	Yes	No	No
<input type="checkbox"/> Golf balls, coffee cups or other promotional items	Yes	No	No
<input type="checkbox"/> Fruit baskets costing \$50 or less per official or employee	Yes	No	No

Note: References to employees or staff do not constitute authority to provide impermissible items to regulatory, contracting or purchasing employees.

AMENDATORY SECTION (Amending WSR 14-15-015, filed 7/3/14, effective 12/1/14)

WAC 390-20-020 Forms for lobbyist report of expenditures. The official form for the lobbyist report of expenditures is designated "L-2," revised ((12/14)) 1/15 which includes the L-2 Memo Report, dated ((1/02)) 1/15. Copies of this form are available on the commission's web site, www.pdc.wa.gov, and at the Commission Office, Room 206, Evergreen Plaza Building, Olympia, Washington 98504. Any attachments shall be on 8-1/2" x 11" white paper.

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

1. Lobbyist Name _____
 Mailing Address _____
 City _____ State _____ Zip + 4 _____
 New Address? Yes No

2. This report is for the period _____ (Month) _____ (Year)
 This report corrects or amends the report for _____ (Month) _____ (Year)
 Business Telephone () - _____

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. ____ Column B	Employer No. ____ 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		\$			
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	\$	\$	\$	\$	\$

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

11. EMPLOYERS' NAMES
 No. ____ (B)
 No. ____ (C)
 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 _____
 Employer Represented _____

Continued on attached pages

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

CONTINUE ON REVERSE

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

1. Lobbyist Name _____
 Mailing Address _____
 City _____ State _____ Zip + 4 _____

New Address? Yes No

2. This report is for the period _____ (Month) _____ (Year) This report corrects or amends the report for _____ (Month) _____ (Year) Business Telephone () - _____

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. ____ Column B	Employer No. ____ 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		\$ _____			
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	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____

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

11. EMPLOYERS' NAMES
 No. ____ (B)
 No. ____ (C)
 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 _____ Employer Represented _____

Continued on attached pages

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

CONTINUE ON REVERSE

Lobbyist Name _____

Reporting Period _____ (Month) _____ (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. When reporting a reception or similar event, show the amount fairly attributed to each individual.

- Entertainment expenditures exceeding \$50 per occasion (including lobbyist's expense) for meals, beverages, tickets, passes, or for other forms of entertainment.
- 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 mm/dd/yyyy	Names of all Persons Entertained or Provided Travel, etc. Include actual amounts spent for entertainment Example: Sen Bow (\$32), Rep Arrow (\$28), and J. D. Lobbyist (\$36) tax & gratuity (\$25.41)	Description, Place, etc. Dinner at Anthony's, Olympia	Sponsoring Employer XYZ Corporation	Total Amount \$121.41
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: _____

17. 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.

18. 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 \$
Continued on attached page.			

Continued on attached page.

Lobbyist Name _____

Reporting Period _____ (Month) _____ (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 <i>mm/dd/year</i>	Names of all Persons Entertained or Provided Travel, etc. Include actual amounts spent for entertainment <i>Example: Sen Bow (\$32), Rep Arrow (\$28), and J. D. Lobbyist (\$36) tax & gratuity (\$25.41)</i>	Description, Place, etc. <i>Dinner at Anthony's, Olympia</i>	Sponsoring Employer <i>XYZ Corporation</i>	Total Amount <i>\$121.41</i>
				\$
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: _____

17. 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.

18. 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
			\$
N/A	Total payments itemized on attached Memo Reports →		

Continued on attached page.

INFORMATION CONTINUED

(Use this page if you need additional space for Items 12, 15 or 16)

L2

Lobbyist Name

Reporting
Period

(Month)

(Year)

12. **Subject Matter, Issue or Bill No.**

Legislative Committee or State Agency Considering Matter

Employer Represented

15. Date	Names of all Persons Entertained or Provided Travel, etc.	Description, Place, etc.	Sponsoring Employer	Amount
				\$

16. Date	Name of Individual or Committee Receiving Contribution	Source of Contribution	Amount
			\$

INFORMATION CONTINUED

(Use this page if you need additional space for Items 17 or 18)

L2

Lobbyist Name

Reporting
Period
(Month) (Year)

17. Date	Names of Vendor or Person Receiving Payment	Description, Place, etc.	Sponsoring Employer	Amount
				\$
18. Date	Recipient's Name and Address	Employer for Whom Expense was Incurred		Amount
				\$

L-2 Memo Report
1/02

Instructions: This Memo Report may be used by a lobbyist to notify a state elected official or other recipient of contributions, meals, travel expenses or educational benefits that have been provided during the preceding calendar month. The specific list of persons to whom a copy of this report must be delivered is shown below in the "Contributions" and "Meals, Travel, Seminars" sections. If the expenditures disclosed on this Memo Report do not also appear on the lobbyist's L-2 Report, a copy of this Memo Report must accompany the L-2 filing. See L-2 instruction manual for further details.

	PDC OFFICE USE
TO:	Recipient's Name*
FROM:	Lobbyist's Name
	Mailing Address
	City State Zip + 4

This report is for the period	This report corrects or amends the report for	Business Telephone
(Month) (Year)	(Month) (Year)	() -

CONTRIBUTIONS to state or local candidate, elected official, or employee, legislative staff person or ballot issue committee.

Date Made	Amount or Value	Description (if in-kind)	Source of Contribution (Employer's Name or Own Funds)
	\$		

MEALS, TRAVEL, SEMINARS to a state elected official, including a legislator, or members of the official's immediate family. Disclose: a) expenditures totaling over \$50 on one occasion for food or beverages for the official and/or the official's family; or b) expenditures for providing permissible travel, lodging, subsistence expenses or enrollment or course fees for the official and the official's family.

Date Given	Amount or Value	Description	Source of Gift (Employer's Name or Own Funds)	Recipient (if family member)
	\$			

Lobbyist's Signature _____ Date _____

*Recipients of Contributions will report receipt of a cash donation on a C-3 report or in-kind on a Schedule B to the C-4 report; recipients of meals, travel and seminars will report receipt of these items on their annual F-1 statement.

L-2 Memo Report

1/15

Instructions: This Memo Report may be used by a lobbyist to notify a state elected official or other recipient of contributions, meals, travel expenses or educational benefits that have been provided during the preceding calendar month. The specific list of persons to whom a copy of this report must be delivered is shown below in the "Contributions" and "Meals, Travel, Seminars" sections. If the expenditures disclosed on this Memo Report do not also appear on the lobbyist's L-2 Report, a copy of this Memo Report must accompany the L-2 filing. See L-2 instruction manual for further details.

	PDC OFFICE USE
TO:	_____
	Recipient's Name*
FROM:	_____
	Lobbyist's Name

	Mailing Address

	City State Zip + 4

This report is for the period _____ (Month) _____ (Year)	This report corrects or amends the report for _____ (Month) _____ (Year)	Business Telephone () - _____
--	--	--------------------------------

CONTRIBUTIONS to state or local candidate, elected official, or employee, legislative staff person or ballot issue committee.

Date Made	Amount or Value	Description (if in-kind)	Source of Contribution (Employer's Name or Own Funds)
	\$		

MEALS, TRAVEL, SEMINARS to a state elected official, including a legislator, or members of the official's immediate family. Disclose: a) expenditures totaling over \$50 on one occasion for food or beverages for the official and/or the official's family, excluding certain receptions as defined in WAC 390-20-020A, L-2 Reporting Guide; or b) expenditures for providing permissible travel, lodging, subsistence expenses or enrollment or course fees for the official and the official's family.

Date Given	Amount or Value	Description	Source of Gift (Employer's Name or Own Funds)	Recipient (if family member)
	\$			

Lobbyist's Signature

Date

*Recipients of Contributions will report receipt of a cash donation on a C-3 report or in-kind on a Schedule B to the C-4 report; recipients of meals, travel and seminars will report receipt of these items on their annual F-1 statement.



PUBLIC DISCLOSURE COMMISSION

711 Capitol Way Rm. 206, PO Box 40908 • Olympia, Washington 98504-0908 • (360) 753-1111 • FAX (360) 753-1112
Toll Free 1-877-601-2828 • E-mail: pdc@pdc.wa.gov • Website: www.pdc.wa.gov

To: Members, Washington State Public Disclosure Commission
From: Lori Anderson, Communications & Training Officer
Date: September 18, 2014
Re: September 2014 Commission Meeting – Continued Discussion Regarding Disclosing Lobbying Expenditures Pertaining to Receptions and Possible Approval of Draft Language for Proposed New WAC 390-20-020A and Proposed Amendments to WACs 390-20-020 and 390-24-010

At its September 25 meeting, the Commission will resume discussing possible alternatives for disclosing lobbying expenditures made in connection with legislative receptions. Included in this memo are staff's recommendations for the Commission's consideration. Draft language for potential rule making is also included for consideration and possible approval.

BACKGROUND

PDC Interpretation 96-03 and the current lobbyist reporting instructions call for receptions to be disclosed as a type of entertainment. RCW 42.17A.615 provides that an entertainment expenditure of more than \$25 must be itemized by date, place, amount, and the names of all persons taking part in the entertainment, along with the dollar amount attributable to each person. RCW 42.17A.615(2)(a).

In December 2013, the Commission, at the request of stakeholders, began work to develop an alternative method for reporting receptions.

Progress

Staff's work to date has included:

- Facilitating a November 2013 stakeholder meeting;
- Discussions with Legislative Ethics Board staff;
- Researching other states' practices;
- Monitoring the Legislative Ethics Board rule making related to the Ethics Act's "infrequent meals" allowance; and
- Periodic progress reports to the Commission.

The Commission recently described its view that a reception is *an opportunity for legislators to meet with constituents, an obligation or customary duty of holding office* rather than entertainment. Furthermore, the Commission expressed its view that the role of a single

legislator at a reception is minor considering the scale of the event and the number of participants.

During the May and July 2014 meetings, the Commission began to define the criteria for a reception that may qualify for alternative disclosure requirements. The criteria set so far are:

- The sponsor/host is not a lobbyist, but may be a lobbyist employer,
- Individuals other than legislators, lobbyists, and lobbyist employers attend,
- The event is social in nature, and
- Food and beverage may be served, but not a sit-down meal.

Additional criteria identified by the Commission as necessary, but not yet determined are:

- The minimum number of legislators that must attend the reception; and
- An identifiable group or body must be invited.

The Commission has also determined that once the criteria are finalized, lobbyists will be required to disclose the following information for qualifying receptions: total cost, date held, sponsor's name, and attendees' names. No per-person attribution will be required.

COMMISSION ACTION

◆ **The Commission must finalize its definition of “reception” for disclosure purposes.**

◇ **Staff Recommendations.**

In addition to the criteria already selected by the Commission, staff recommends the Commission add the following two requirements:

- **Twenty (20) legislators or their representatives must attend the event.** Staff believes 20 is a fitting number, considering the Commission's previous comments about the size and scale of a reception in contrast to other types of food and beverage events. Twenty is a relatively high bar, though, so staff recommends counting legislators *or* their representatives, since it is customary for a legislator to ask staff or a family member to stand in for him or her when scheduling conflicts prevent the legislator from personally attending.
- **Invitations must be extended to the entire legislature, all members of a chamber, or any of the two largest caucuses recognized in each chamber.** Public comments have included examples of events staged for legislative committees, particular committee members, and other legislative bodies. Staff believes, however, that limiting subsets to a chamber or any of the two largest caucuses recognized in each chamber is in keeping with the Commission's opinion that a reception is a social event and not intended to be an opportunity for in-depth discussion between a lobbyist and legislator about a particular issue.

These recommendations are based on the Commission's discussion and comments received. The Commission may wish to make revisions, such as identifying other groups or identifiable bodies. The Commission may also wish to make revisions to allow executive branch receptions to be disclosed in the same manner as legislative receptions.

◆ **Rule Making.**

In order to implement the Commission's chosen alternative disclosure method for disclosing expenditures for receptions, the Commission will need to amend both its forms and its rules.

◇ **Staff Recommendations.**

Form Changes:

- Amend WAC 390-20-020 Forms for lobbyist report of expenditures (L-2 form), to include instructions for disclosing receptions.
- Amend WAC 390-24-010 Forms for statement of financial affairs (F-1 form) to instruct filers to exclude qualifying receptions from the "Food, Travel, Seminars" section of the F-1 Supplement. Currently, the F-1 form requires filers to disclose each occasion when food and beverage exceeding \$50 was received from a source other than their own agency. Both the Ethics Act and RCW 42.17A require state officers and state employees to disclose "gifts in the form of food and beverage that exceed \$50 on a single occasion" as allowed by the Ethics Act. This requirement is intended to capture infrequent meals, not food and beverage served at a reception.¹ Furthermore, the Commission has heard a significant amount of public comment regarding food and beverage offered at a reception compared to what is actually consumed. Those comments support the recommended form revision. Finally, staff believes relieving qualifying reception attendees of this disclosure requirement will not deprive the public of any significant data.

¹ The Ethics Act provides:

(2) [T]he following items are presumed not to influence under [RCW 42.52.140](#) and may be accepted without regard to the [\$50 per calendar year] limit established by subsection (1) of this section: . . .

(f) Food and beverages consumed at hosted receptions where attendance is related to the state officer's or state employee's official duties; . . .

(5) A state officer or state employee may accept gifts in the form of food and beverage on infrequent occasions in the ordinary course of meals where attendance by the officer or employee is related to the performance of official duties. Gifts in the form of food and beverage that exceed fifty dollars on a single occasion shall be reported as provided in chapter RCW 42.17A RCW.

[RCW 42.52.150.](#)

The Public Disclosure law provides:

(1) The statement of financial affairs required by RCW 42.17A.700 shall disclose the following information for the reporting individual and each member of his or her immediate family:

(l) A list of each occasion, specifying date, donor, and amount, at which food and beverage in excess of fifty dollars was accepted under RCW 42.52.150(5).

[RCW 42.17A.710.](#)

NOTE: In June, the Commission approved draft language to adjust for inflation the dollar codes used to disclose monetary values on the F-1 report. The public hearing to consider those proposed amendments was planned for the September meeting, but has been postponed so that the Commission may consider these additional changes.

Additional Rule Making.

- Convert PDC Interpretation 96-03 to rule. The L-2 form has such limited room that adding instructions and describing the reception criteria would be difficult. Staff suggests that the Commission adopt a companion rule, WAC 390-20-020A, in which the reception criteria would be described. Staff also recommends that the Commission revise the guidance offered in PDC Interpretation 96-03, *L-2 Reporting Guide for Entertainment, Travel and Educational Expenses*. The interpretation has served as useful guidance for many years. In light of the Commission's decision to exclude certain receptions from the type of "entertainment" for which the law requires per person attribution of costs, Interpretation 96-03 will need to be amended. Staff believes it would be appropriate to adopt the revised interpretation as a rule given the long-standing nature of the guidance and the extensive stakeholder involvement that has gone into the development of the new approach to receptions. Alternatively, the Commission could simply amend Interpretation 96-03 and adopt a stand-alone definition of "receptions" for the purpose of excluding them from the per-person attribution reporting requirements for "entertainment" under RCW 42.17A.615(2).

◆ **Draft rule language.**

Draft language for proposed new WAC 390-20-020A and proposed amendments to WACs 390-20-020 and 390-24-010 is attached for the Commission's consideration. The staff requests that the Commission approve the draft language for the proposed rules.

Rule Making Timeline.

In order for any form revisions to be in place by February 2015 (when reports of January 2015 lobbying expenditures are due) and holding to the Commission's regular meeting schedule, the hearing to consider possible adoption should be held December 4. This would require adhering to the following timeline:

September 25, 2014	Commission approves draft language for rules.
October 21, 2014	State Register deadline for filing hearing notice.
December 4, 2014	Public hearing to consider possible adoption.
December 31, 2014	State Register deadline for filing adopted rules.
February 1, 2015	Proposed rules take effect.

Attachments: Draft language for proposed amendments to WACs 390-20-020 and 390-24-010 and proposed new WAC 390-20-020A

L2
2/15

Lobbyist Monthly Expense Report

(as required by Chapter 397, 1995 Session Laws)

1. Lobbyist Name					
Mailing Address					
City	State	Zip + 4			
2. This report is for the period _____ (Month) _____ (Year)			This report corrects or amends the report for _____ (Month) _____ (Year)		New Address? <input type="checkbox"/> Yes <input type="checkbox"/> No
			Business Telephone () -		

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. ____ Column B	Employer No. ____ 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		\$			
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	\$	\$	\$	\$	\$

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

11. EMPLOYERS' NAMES
- No. ____ (B)
- No. ____ (C)
- 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
Employer Represented

Continued on attached pages

13. Of the time spent lobbying, what percentage was devoted to lobbying: the Legislature _____% 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.	<table style="width: 100%; border: none;"> <tr> <td style="border: none; width: 60%;">LOBBYIST SIGNATURE</td> <td style="border: none; width: 40%;">DATE</td> </tr> </table>	LOBBYIST SIGNATURE	DATE
LOBBYIST SIGNATURE	DATE		

CONTINUE ON REVERSE

Lobbyist Name _____

Reporting Period _____ (Month) _____ (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. ((When reporting a reception or similar event, show the amount fairly attributed to each individual.))**

- 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 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 mm/dd/year	Names of all Persons Entertained or Provided Travel, etc. Include actual amounts spent for entertainment <i>Example: Sen Bow (\$32), Rep Arrow (\$28), and J. D. Lobbyist (\$36) tax & gratuity (\$25.41)</i>	Description, Place, etc. <i>Dinner at Anthony's, Olympia</i>	Sponsoring Employer <i>XYZ Corporation</i>	Total Amount \$121.41
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: _____

17. 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.

18. 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 \$

Continued on attached page.

PROVIDE INFORMATION FOR YOURSELF, SPOUSE, REGISTERED DOMESTIC PARTNER, DEPENDENT CHILDREN AND OTHER DEPENDENTS IN YOUR HOUSEHOLD

Last Name	First	Middle Initial	DATE
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A OFFICE HELD, BUSINESS INTERESTS: Provide the following information if, during the reporting period, you, your spouse, registered domestic partner or dependents

- (1) were an officer, director, general partner, trustee, or 10 percent or more owner of a corporation, non-profit organization, union, partnership, joint venture or other entity; and/or
- (2) were a partner or member of a limited partnership, limited liability partnership, limited liability company or similar entity, including but not limited to a professional limited liability company.

- Legal Name: Report name used on legal documents establishing the entity.
- Trade or Operating Name: Report name used for business purposes if different from the legal name.
- Position or Percent of Ownership: The office, title and/or percent of ownership held.
- Brief Description of the Business/Organization: Report the purpose, product(s), and/or the service(s) rendered.
- Payments from Governmental Unit: If the governmental unit in which you hold or seek office made payments to the business entity concerning which you're reporting, show the purpose of each payment and the actual amount received.
- Payments from Business Customers and Other Government Agencies: List each corporation, partnership, joint venture, sole proprietorship, union, association, business or other commercial entity and each government agency (other than the one you seek/hold office) which paid compensation of \$12,000 or more during the period to the entity. Briefly say what property, goods, services or other consideration was given or performed for the compensation.
- Washington Real Estate: Identify real estate owned by the business entity if the qualifications referenced below are met.

ENTITY NO. 1 Reporting For: Self Spouse

Registered Domestic Partner Dependent

LEGAL NAME: POSITION OR PERCENT OF OWNERSHIP

TRADE OR OPERATING NAME:

ADDRESS:

BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:

PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE:
 Purpose of payments Amount (actual dollars)
 \$

PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE:
 Agency name: Purpose of payment (amount not required)

PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE
 Customer name: Purpose of payment (amount not required)

WASHINGTON REAL ESTATE IN WHICH ENTITY HELD A DIRECT FINANCIAL INTEREST (Complete only if ownership in the ENTITY is 10% or more and assessed value of property is over \$24,000. List street address, assessor parcel number, or legal description and county for each parcel):

Check here if continued on attached sheet

CONTINUE PARTS B AND C ON NEXT PAGE

Name

ENTITY NO. 2

Reporting For: Self Spouse

Registered Domestic Partner Dependent

LEGAL NAME:

POSITION OR PERCENT OF OWNERSHIP

TRADE OR OPERATING NAME:

ADDRESS:

BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:

PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE:

Purpose of payments

Amount (actual dollars)

\$

PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE:

Agency name:

Purpose of payment (amount not required)

PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE

Customer name:

Purpose of payment (amount not required)

WASHINGTON REAL ESTATE IN WHICH ENTITY HELD A DIRECT FINANCIAL INTEREST (Complete only if ownership in the ENTITY is 10% or more and assessed value of property is over \$24,000. List street address, assessor parcel number, or legal description and county for each parcel):

Check here if continued on attached sheet

B LOBBYING: List persons for whom you, or any immediate family member, including registered domestic partner, lobbied or prepared state legislation or state rules, rates, or standards for compensation or deferred compensation. Do not list pay from government body in which you are an elected official or professional staff member.

Person to Whom Services Rendered	Description of Legislation, Rules, Etc.	Compensation (Use Code)
Check here <input type="checkbox"/> if continued on attached sheet		

C FOOD TRAVEL SEMINARS Complete this section if a source other than your own governmental agency paid for or otherwise provided all or a portion of the following items to you, your spouse, registered domestic partner or dependents, or a combination thereof: 1) Food and beverages costing over \$50 per occasion, excluding certain receptions as defined in WAC 390-20-020A; 2) Travel occasions; or 3) Seminars, educational programs or other training.

Date Received	Donor's Name, City and State	Brief Description	Actual Dollar Amount	Value (Use Code)
			\$	
Check here <input type="checkbox"/> if continued on attached sheet				

NEW

WAC 390-20-020A

L-2 Reporting Guide

For Entertainment, Receptions, Travel and Educational Expenditures

Typical Expenditures* (Only permitted if receipt could not reasonably be expected to influence the performance of the officer's or employee's official duties.)	Expense Included on Line 5	Expense Included on Line 15	Give Copy of L-2 or Memo Report to Elected Official
Entertaining State Officials, Employees or Their Families:			
<input type="checkbox"/> Any type of entertainment occasion costing \$50 or less	Yes	No	No
<input type="checkbox"/> Breakfast, lunch or dinner for legislator or other state official or employee [singly, or in conjunction with family member(s)] and total cost for occasion is: <ul style="list-style-type: none"> o \$50 or less o More than \$50, and amount attributable to legislator/family is more than \$50 	Yes Yes	No Yes	No Yes
<input type="checkbox"/> Tickets to theater, sporting events, etc. costing \$50 or less	Yes	Yes	No
<input type="checkbox"/> Golf outing at which no more than \$50 was spent on each official, including any member(s) of the official's family	Yes	Yes	No
Receptions:			
<input type="checkbox"/> Reception to which the entire legislature, all members of a chamber, or any of the two largest caucuses recognized in each chamber are invited and is: <ul style="list-style-type: none"> o Sponsored by a person other than a lobbyist; o Attended by individuals other than legislators, lobbyists, and lobbyist employers; o A social event; o Does not include a sit-down meal; and o Attended by at least 20 legislators or their representatives. 	Yes	Yes, except that a per-person cost is not required	No
<input type="checkbox"/> All other receptions	Yes	Yes	Yes, if the food and beverage cost for the legislator and family members exceeds \$50
Travel-Related Expenditures for Officials, Employees:			
<input type="checkbox"/> Travel, lodging, meals for office-related appearance or speech at lobbyist employer's annual conference	Yes	Yes	Yes
<input type="checkbox"/> Travel, lodging, meals for office-related tour of lobbyist employer's manufacturing plant or other facility	Yes	Yes	Yes

Educational Expenditures for Officials, Employees:			
<input type="checkbox"/> Travel, lodging, meals, tuition to attend seminar sponsored by non-profit organization	Yes	Yes	Yes
Other Lobbying-Related Items:			
<input type="checkbox"/> Flowers costing any amount to officials, staff and/or family	Yes	No	No
<input type="checkbox"/> Candy costing \$50 or less per official or employee	Yes	No	No
<input type="checkbox"/> Golf balls, coffee cups or other promotional Items	Yes	No	No
<input type="checkbox"/> Fruit baskets costing \$50 or less per official or employee	Yes	No	No
Note: References to employees or staff do not constitute authority to provide impermissible items to regulatory, contracting or purchasing employees.			



PROPOSED RULE MAKING

CR-102 (June 2012)

(Implements RCW 34.05.320)

Do NOT use for expedited rule making

Agency: Public Disclosure Commission

Preproposal Statement of Inquiry was filed as WSR 14-14-001 ; or
 Expedited Rule Making--Proposed notice was filed as WSR _____; or
 Proposal is exempt under RCW 34.05.310(4) or 34.05.330(1).

Original Notice
 Supplemental Notice to WSR _____
 Continuance of WSR _____

Title of rule and other identifying information: (Describe Subject)
WAC 390-16-071 Annual report of major contributors and persons making independent expenditures
WAC 390-20-110 Forms for lobbyist employers report
WAC 390-24-010 Forms for statement of financial affairs
WAC 390-24-020 Forms for amending statement of financial affairs
WAC 390-24-202 Report of compensation from sales commission
WAC 390-24-301 Changes in dollar amounts of reporting thresholds and value codes

Hearing location(s):

711 Capitol Way, Rm. 206
Olympia, WA 98504

Date: December 4, 2014 Time: 9:30 AM

Submit written comments to:

Name: Lori Anderson
Address (mail) P O Box 40908, Olympia, WA 98504-0908
(physical address) 711 Capitol Way, Rm. 206, Olympia, WA
e-mail lori.anderson@pdc.wa.gov
fax (360)753-1112 by (date) November 26, 2014

Assistance for persons with disabilities: Contact

Jana Greer by email at jana.greer@pdc.wa.gov or telephone

TTY () _____ or (360) 753-1980

Date of intended adoption: December 4, 2014
(Note: This is NOT the effective date)

Purpose of the proposal and its anticipated effects, including any changes in existing rules: The dollar amounts used for disclosing financial affairs of candidates, elected officials, and executive state officers are being adjusted for inflation. Proposed amendments to WACs 390-16-071, 390-20-110, 390-24-010, 390-24-020, 390-24-202, and 390-24-301 adjust dollar amounts as directed by RCW 42.17A.125(2). Additionally, instructions pertaining to disclosure of legislative reception food and beverage are inserted in WACs 390-20-010 and 390-20-020 (PDC Forms F-1 and F-1A, respectively).*

* Under separate notice, the Commission has scheduled a December 4, 2014 hearing to consider rules relating to lobbyist disclosure. That rule making necessitates a proposed "housekeeping" amendment to WACs 390-24-010 and 390-24-020 to insert instructions on the F-1 and F-1A forms explaining that disclosing the cost of food and beverage served at a qualifying legislative reception is not required.

Reasons supporting proposal: RCW 42.17A.125(2) authorizes the Commission to make inflationary adjustments to these dollar amounts at least once every five years. Stakeholders have encouraged the Commission to make the proposed adjustments, since it has been six years since the Commission's last adjustments.

Statutory authority for adoption: RCWs 42.17A.110 and 42.17A.125(2)

Statute being implemented: RCW 42.17A.710

Is rule necessary because of a:

Federal Law? Yes No
Federal Court Decision? Yes No
State Court Decision? Yes No
If yes, CITATION:

CODE REVISER USE ONLY

OFFICE OF THE CODE REVISER
STATE OF WASHINGTON
FILED

DATE: October 22, 2014

TIME: 8:44 AM

WSR 14-21-168

DATE
October 22, 2014

NAME (type or print)
Lori Anderson

SIGNATURE
Lori Anderson

TITLE
Communications & Training Officer

Agency comments or recommendations, if any, as to statutory language, implementation, enforcement, and fiscal matters:

No increased costs to the agency are expected.

Name of proponent: (person or organization) Public Disclosure Commission

- Private
- Public
- Governmental

Name of agency personnel responsible for:

Name	Office Location	Phone
Drafting..... Lori Anderson	711 Capitol Way, Rm. 206, Olympia, WA 98504	(360) 664-2737
Implementation....Lori Anderson	711 Capitol Way, Rm. 206, Olympia, WA 98504	(360) 664-2737
Enforcement..... Andrea Doyle	711 Capitol Way, Rm. 206, Olympia, WA 98504	(360) 664-2735

Has a small business economic impact statement been prepared under chapter 19.85 RCW or has a school district fiscal impact statement been prepared under section 1, chapter 210, Laws of 2012?

Yes. Attach copy of small business economic impact statement or school district fiscal impact statement.

A copy of the statement may be obtained by contacting:

Name:

Address:

phone () _____

fax () _____

e-mail _____

No. Explain why no statement was prepared.

The implementation of these rule amendments has minimal impact on small business. The PDC is not subject to the requirement to prepare a school district fiscal impact statement, per RCWs 28A.305.135 and 34.05.320.

Is a cost-benefit analysis required under RCW 34.05.328?

Yes A preliminary cost-benefit analysis may be obtained by contacting:

Name:

Address:

phone () _____

fax () _____

e-mail _____

No: Please explain: A cost-benefit analysis is not required under RCW 34.05.328. The PDC is not an agency listed in subsection (5)(a)(i) of RCW 34.05.328. Further, the PDC does not voluntarily make the section applicable to the adoption of these rules pursuant to subsection (5)(a)(ii) and, to date, the joint administrative rules review committee has not made the section applicable to the adoption of these rules.

NEW SECTION

WAC 390-24-150 Definition--Officer. (1) For the purposes of RCW 42.17A.710 (1)(g) and WAC 390-24-010, the term "officer" means and includes:

(a) President, vice-president, secretary, treasurer, or some derivation thereof;

(b) One who holds a corporate office; or

(c) An individual who holds a position described as an officer in a corporation's bylaws or who is appointed by the board of directors in accordance with the bylaws.

(2) An individual who has been given the title of "officer" to denote a managerial job classification is not an officer for the purposes of RCW 42.17A.710 (1)(g) and WAC 390-24-010.

AMENDATORY SECTION (Amending WSR 12-03-002, filed 1/4/12, effective 2/4/12)

WAC 390-16-071 Annual report of major contributors and persons making independent expenditures. (1) Any person, other than an individual (a) who made contributions to state office candidates and statewide ballot proposition committees totaling more than the aggregate amount during the preceding calendar year for contributions referenced in WAC 390-05-400, code section .180(1), or (b) who made independent expenditures regarding state office candidates and statewide ballot propositions totaling more than the aggregate amount during the preceding calendar year for independent expenditures referenced in WAC 390-05-400, code section .180(1), shall file with the commission an annual report required pursuant to RCW 42.17A.630. This report shall not be required of a lobbyist employer filing an annual L-3 report pursuant to RCW 42.17A.630 or of a candidate's authorized committee or a political committee provided the information has been properly reported pursuant to RCW 42.17A.235 and 42.17A.240.

(2) The report is entitled "Special Political Expenditures" and is designated "C-7" revised ((12/08)) 11/14. Copies of this form are available on the commission's web site, www.pdc.wa.gov, and at the Commission Office, Room 206, Evergreen Plaza Building, Olympia, Washington 98504. Any attachments shall be on 8-1/2" x 11" white paper.

Special Political Expenditures

C7
12/08

PDC OFFICE USE

1. Name (Use complete company, association, union or entity name.) _____

Attention (Identify person to whom inquiries about the information below should be directed.) _____

Mailing Address _____ Telephone _____
 () - _____

City _____ State _____ Zip + 4 _____

THIS REPORT MUST BE FILED BY THE LAST DAY OF FEBRUARY. Disclose all payments or expenditures the reporting entity made and accrued during the previous calendar year for the types of activities described below. Complete all sections. Use "none" or "0" when applicable. Follow the directions on the attached instructions.

<u>Summary of Expenditures</u>	Amount
2. Political contributions to candidates for legislative or statewide executive office, committees supporting or opposing these candidates, or committees supporting or opposing statewide ballot measures. Also complete Item 8.	
a. Aggregate contributions made by the filer.	_____
b. If contributions were made by a political committee associated, affiliated or sponsored by the employer, show the PAC name below. (Information reported by the PAC on C-4 reports need not be again included as part of this report.) Name of PAC _____	_____
3. Independent expenditures supporting or opposing a candidate for legislative or statewide executive office or a statewide ballot measure. Show aggregate amount. Also complete Item 9.	_____
4. Expenditures for entertainment, gifts, tickets, passes, transportation and travel expenses (including meals, lodging and related expenses) provided to legislators, state officials, state employees and members of their immediate families. Show aggregate amount. Also complete Item 10.	_____
5. Expenditures to or on behalf of legislators, state officials, their spouses and dependents for the purpose of influencing, honoring or benefiting the legislator or official. Show aggregate amount. Also complete Item 13.	_____
6. Other expenditures related to lobbying state officials, whether payment is made to, through or on behalf of a registered lobbyist. Attach list itemizing each expense. Show date, recipient, purpose and amount.	_____
7. Total Reportable Expenses (Items 2 thru 6)	=====

Itemized Expenditures

8. Contributions totaling over \$25 to a legislative or statewide executive office candidate, a committee formed to support or oppose one of these candidates or a committee supporting or opposing a statewide ballot measure.

Name of Recipient	Amount	Date
	\$	

Information continued on attached pages

Special Political Expenditures

C7
11/14

PDC OFFICE USE

1. Name (Use complete company, association, union or entity name.)

Attention (Identify person to whom inquiries about the information below should be directed.)

Mailing Address	Telephone
	() -
City	State Zip + 4

THIS REPORT MUST BE FILED BY THE LAST DAY OF FEBRUARY. Disclose all payments or expenditures the reporting entity made and accrued during the previous calendar year for the types of activities described below. Complete all sections. Use "none" or "0" when applicable. Follow the directions on the attached instructions.

<u>Summary of Expenditures</u>	<u>Amount</u>
2. Political contributions to candidates for legislative or statewide executive office, committees supporting or opposing these candidates, or committees supporting or opposing statewide ballot measures. Also complete Item 8.	_____
a. Aggregate contributions made by the filer.	_____
b. If contributions were made by a political committee associated, affiliated or sponsored by the employer, show the PAC name below. (Information reported by the PAC on C-4 reports need not be again included as part of this report.) Name of PAC _____	_____
3. Independent expenditures supporting or opposing a candidate for legislative or statewide executive office or a statewide ballot measure. Show aggregate amount. Also complete Item 9.	_____
4. Expenditures for entertainment, gifts, tickets, passes, transportation and travel expenses (including meals, lodging and related expenses) provided to legislators, state officials, state employees and members of their immediate families. Show aggregate amount. Also complete Item 10.	_____
5. Expenditures to or on behalf of legislators, state officials, their spouses and dependents for the purpose of influencing, honoring or benefiting the legislator or official. Show aggregate amount. Also complete Item 13.	_____
6. Other expenditures related to lobbying state officials, whether payment is made to, through or on behalf of a registered lobbyist. Attach list itemizing each expense. Show date, recipient, purpose and amount.	_____
7. Total Reportable Expenses (Items 2 thru 6)	=====

Itemized Expenditures

8. Contributions totaling over \$25 to a legislative or statewide executive office candidate, a committee formed to support or oppose one of these candidates or a committee supporting or opposing a statewide ballot measure.

Name of Recipient	Amount	Date
	\$	

Information continued on attached pages

((

9. Independent expenditures in support of or opposition to a) a legislative or statewide executive office candidate or b) a statewide ballot measure. See instructions for definition of "independent expenditure."

Candidate's Name, Office Sought & Party or Ballot Measure & Brief Description	Amount \$	Date and Description of Expense (Note if Support or Oppose)
<input type="checkbox"/> Information continued on attached pages		

10. Entertainment, gifts, tickets, passes, transportation and travel expenses (including meals, lodging and related expenses) provided to legislators, state officials, state employees and members of their immediate families.

Name and Title	Cost or Value \$	Date and Description of Entertainment, Gift or Travel
<input type="checkbox"/> Information continued on attached pages		

11. Compensation of \$2,000 or more during the preceding calendar year for employment or professional services paid to state elected officials, successful candidates for state office and each member of their immediate family.

Name	Relationship to Candidate or Official, if Family Member	Amount (Code)	Description of Consideration or Services Exchanged for Compensation
<input type="checkbox"/> Information continued on attached pages			

12. Compensation of \$2,000 or more during the preceding calendar year for professional services paid to any corporation, partnership, joint venture, association or other entity in which state elected official, successful state candidate or member of their immediate family hold office, partnership, directorship or ownership interest of 10% or more.

Firm Name	Person's Name	Amount (Code)	Description of Consideration or Services Exchanged for Compensation
<input type="checkbox"/> Information continued on attached pages			

13. Any expenditure, not otherwise reported, made directly or indirectly to a state elected official, successful candidate for state office or member of their immediate family, if made to honor, influence or benefit the person because of his or her official position.

Name	Amount \$	Date and Description of Expense
<input type="checkbox"/> Information continued on attached pages		

14. This report must be certified by the president, secretary-treasurer or similar officer of reporting entity.

Certification: I certify that this report is true, complete and correct to the best of my knowledge.	Signature of Officer	Date
Printed Name and Title of Officer:		

))

9. Independent expenditures in support of or opposition to a) a legislative or statewide executive office candidate or b) a statewide ballot measure. See instructions for definition of "independent expenditure."

Candidate's Name, Office Sought & Party or Ballot Measure & Brief Description	Amount \$	Date and Description of Expense (Note if Support or Oppose)
<input type="checkbox"/> Information continued on attached pages		

10. Entertainment, gifts, tickets, passes, transportation and travel expenses (including meals, lodging and related expenses) provided to legislators, state officials, state employees and members of their immediate families.

Name and Title	Cost or Value \$	Date and Description of Entertainment, Gift or Travel
<input type="checkbox"/> Information continued on attached pages		

11. Compensation of \$2,400 or more during the preceding calendar year for employment or professional services paid to state elected officials, successful candidates for state office and each member of their immediate family.

Name	Relationship to Candidate or Official, if Family Member	Amount (Code)	Description of Consideration or Services Exchanged for Compensation
<input type="checkbox"/> Information continued on attached pages			

12. Compensation of \$2,400 or more during the preceding calendar year for professional services paid to any corporation, partnership, joint venture, association or other entity in which state elected official, successful state candidate or member of their immediate family hold office, partnership, directorship or ownership interest of 10% or more.

Firm Name	Person's Name	Amount (Code)	Description of Consideration or Services Exchanged for Compensation
<input type="checkbox"/> Information continued on attached pages			

13. Any expenditure, not otherwise reported, made directly or indirectly to a state elected official, successful candidate for state office or member of their immediate family, if made to honor, influence or benefit the person because of his or her official position.

Name	Amount \$	Date and Description of Expense
<input type="checkbox"/> Information continued on attached pages		

14. This report must be certified by the president, secretary-treasurer or similar officer of reporting entity.		
Certification: I certify that this report is true, complete and correct to the best of my knowledge.	Signature of Officer	Date
Printed Name and Title of Officer:		

AMENDATORY SECTION (Amending WSR 09-01-063, filed 12/11/08, effective 1/11/09)

WAC 390-20-110 Forms for lobbyist employers report. The official form for statement by employers of registered lobbyists as required by RCW 42.17.180 is designated "L-3," revised ((1/09)) 11/14. Copies of this form are available on the commission's web site, www.pdc.wa.gov, and at the Commission Office, 711 Capitol Way, Room 206, Evergreen Plaza Building, P.O. Box 40908, Olympia, Washington, 98504-0908. Any paper attachments shall be on 8-1/2" x 11" white paper.

**Employer's
Lobbying Expenses**

L3

1/09

THIS SPACE FOR OFFICE USE

1. Employer's Name (Use complete company, association, union or entity name.)

Attention (Identify person to whom inquiries about the information below should be directed; NOT the lobbyist.)

Mailing Address Telephone

City State Zip + 4 E-Mail Address Year Report Covers

THIS REPORT MUST BE FILED BY THE LAST DAY OF FEBRUARY. Include expenditures made and accrued during the previous calendar year for lobbying the Washington State Legislature and/or any state agency. Complete all sections. Use "none" or "0" when applicable.

2. Identify each of your lobbyists/lobbying firms below. In column 1, show the full amount of salary or fee each earned for lobbying. In column 2, show the full amount paid (plus obligated) for other lobbying related expenses that were made by or through the lobbyist and reported by the lobbyist on the monthly L-2 report (e.g., contributions to legislative candidates, reimbursement for entertainment expenses, etc.). Compute the subtotals across and down the columns; put the grand total of expenses incurred by or through lobbyists in the space designated.

Names of Registered Lobbyists (if payments were to lobbying firm, list firm name)	Col 1-Salary	Col 2-Other	Total Amount
	\$	\$	\$
Total From Attached Page			

Information continued on attached pages

Total Expenses By or Through Lobbyists

\$

DO NOT INCLUDE EXPENDITURES ALREADY ACCOUNTED FOR IN ITEM 2 ABOVE when completing Items 3 through 7 below.

3. Other expenditures made by the employer for lobbying purposes. Show total expenditures made/accrued:

a. to vendors on behalf of or in support of registered lobbyists (e.g., entertainment credit card purchases); \$

b. to or on behalf of expert witnesses or others retained to provide lobbying services who offer specialized knowledge or expertise that assists the employer's lobbying effort;

c. for entertainment, tickets, passes, travel expenses (e.g., transportation, meals, lodging, etc.) and enrollment or course fees provided to legislators, state officials, state employees and members of their immediate families; (Also complete Item 9.)

d. for composing, designing, producing and distributing informational materials for use primarily to influence legislation; and

e. for grass roots lobbying expenses, including those previously reported by employer on Form L-6, and payments for lobbying communications to clients/customers (other than to corporate stockholders and members of an organization or union).

4. Political contributions to candidates for legislative or statewide executive office, committees supporting or opposing these candidates, or committees supporting or opposing statewide ballot measures. (Also complete Item 10.)

a. Contributions made directly by the employer, including those previously reported on PDC Form L-3c.

b. If contributions were made by a political committee associated, affiliated or sponsored by the employer, show the PAC name below. (Information reported by the PAC on C-4 reports need not be again included as part of this L-3 report.)

Name of PAC _____

5. Independent expenditures supporting or opposing a candidate for legislative or statewide executive office or a statewide ballot measure. (Also complete Item 11.)

6. Expenditures to or on behalf of legislators, state officials, or their spouse, registered domestic partner and dependents for the purpose of influencing, honoring or benefiting the legislator or official. (Normal course of business payments are not reportable.) (Also complete Item 14.)

7. Other lobbying-related expenditures, whether through or on behalf of a registered lobbyist. Attach list itemizing each expense (i.e., show date, recipient, purpose and amount). Do not include payments accounted for above.

Total Lobbying Expenses \$

(Items 2 thru 7)

8. This report must be certified by the president, secretary-treasurer or similar office of lobbying employer.

Certification: I certify that this report is true, complete and correct to the best of my knowledge.

Signature of Employer Officer Date

Printed Name and Title of Officer:

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	<h2 style="margin:0;">Employer's Lobbying Expenses</h2>	<h1 style="margin:0;">L3</h1>	THIS SPACE FOR OFFICE USE
1. Employer's Name (Use complete company, association, union or entity name.)			
Attention (Identify person to whom inquiries about the information below should be directed; NOT the lobbyist.)			
Mailing Address		Telephone () -	
City	State	Zip + 4	E-Mail Address
			Year Report Covers
THIS REPORT MUST BE FILED BY THE LAST DAY OF FEBRUARY. Include expenditures made and accrued during the previous calendar year for lobbying the Washington State Legislature and/or any state agency. Complete all sections. Use "none" or "0" when applicable.			
2. Identify each of your lobbyists/lobbying firms below. In column 1, show the full amount of salary or fee each earned for lobbying. In column 2, show the full amount paid (plus obligated) for other lobbying related expenses that were made by or through the lobbyist and reported by the lobbyist on the monthly L-2 report (e.g., contributions to legislative candidates, reimbursement for entertainment expenses, etc.). Compute the subtotals across and down the columns; put the grand total of expenses incurred by or through lobbyists in the space designated.			
Names of Registered Lobbyists (if payments were to lobbying firm, list firm name)	Col 1-Salary	Col 2-Other	Total Amount
	\$	\$	\$
Total From Attached Page			
<input type="checkbox"/> Information continued on attached pages			Total Expenses By or Through Lobbyists
			\$
DO NOT INCLUDE EXPENDITURES ALREADY ACCOUNTED FOR IN ITEM 2 ABOVE when completing Items 3 through 7 below.			
3. Other expenditures made by the employer for lobbying purposes. Show total expenditures made/accrued:			
a. to vendors on behalf of or in support of registered lobbyists (e.g., entertainment credit card purchases);			\$
b. to or on behalf of expert witnesses or others retained to provide lobbying services who offer specialized knowledge or expertise that assists the employer's lobbying effort;			_____
c. for entertainment, tickets, passes, travel expenses (e.g., transportation, meals, lodging, etc.) and enrollment or course fees provided to legislators, state officials, state employees and members of their immediate families; (Also complete Item 9.)			_____
d. for composing, designing, producing and distributing informational materials for use primarily to influence legislation; and			_____
e. for grass roots lobbying expenses, including those previously reported by employer on Form L-6, and payments for lobbying communications to clients/customers (other than to corporate stockholders and members of an organization or union).			_____
4. Political contributions to candidates for legislative or statewide executive office, committees supporting or opposing these candidates, or committees supporting or opposing statewide ballot measures. (Also complete Item 10.)			
a. Contributions made directly by the employer, including those previously reported on PDC Form L-3c.			_____
b. If contributions were made by a political committee associated, affiliated or sponsored by the employer, show the PAC name below. (Information reported by the PAC on C-4 reports need not be again included as part of this L-3 report.)			_____
Name of PAC _____			_____
5. Independent expenditures supporting or opposing a candidate for legislative or statewide executive office or a statewide ballot measure. (Also complete Item 11.)			
6. Expenditures to or on behalf of legislators, state officials, or their spouse, registered domestic partner and dependents for the purpose of influencing, honoring or benefiting the legislator or official. (Normal course of business payments are not reportable.) (Also complete Item 14.)			_____
7. Other lobbying-related expenditures, whether through or on behalf of a registered lobbyist. Attach list itemizing each expense (i.e., show date, recipient, purpose and amount). Do not include payments accounted for above.			_____
Total Lobbying Expenses			\$
			(Items 2 thru 7)
8. This report must be certified by the president, secretary-treasurer or similar office of lobbying employer.			
Certification: I certify that this report is true, complete and correct to the best of my knowledge.		Signature of Employer Officer	Date
Printed Name and Title of Officer:			

CONTINUE ON REVERSE

Employer's Name	Year report covers:
-----------------	---------------------

9. Entertainment, tickets, passes, travel expenses (including transportation, meals, lodging, etc.) and enrollment or course fees provided to legislators, state officials, state employees and members of their immediate families. See instruction manual for details.

Name and Title	Cost or Value	Date and Description of Expense
	\$	

Information continued on attached pages

10. Contributions (not reported by the lobbyist) totaling over \$25 to a legislative or statewide executive office candidate, a committee formed to support or oppose one of these candidates or a committee supporting or opposing a statewide ballot measure. Do not list employer-affiliated PAC contributions.

Name of Recipient	Amount	Date (and, if In-Kind, Description)
	\$	

Information continued on attached pages

11. Independent expenditures in support of or opposition to a legislative or statewide executive office candidate or b) a statewide ballot proposition.
See instruction manual for definition of "independent expenditure."

Candidate's Name, Office Sought & Party or Ballot Proposition Number & Brief Description	Amount	Date and Description of Expense (Note if Support or Oppose)
	\$	

Information continued on attached pages

12. Compensation of \$2,000 or more during the preceding calendar year for employment or professional services paid to state elected officials, successful candidates for state office and each member of their immediate family.

Name	Relationship to Candidate or Elected Official if Member of Family	Amount (Code)**	Description of Consideration or Services Exchanged for Compensation

Information continued on attached pages

13. Compensation of \$2,000 or more during the preceding calendar year for professional services paid to any corporation, partnership, joint venture, association or other entity in which state elected official, successful state candidate or member of their immediate family hold office, partnership, directorship or ownership interest of 10% or more.

Firm Name	Person's Name	Amount (Code)**	Description of Consideration or Services Exchanged for Compensation

Information continued on attached pages

14. Any expenditure, not otherwise reported, made directly or indirectly to a state elected official, successful candidate for state office or member of their immediate family, if made to honor, influence or benefit the person because of his or her official position.

Name	Amount	Date and Purpose
	\$	

Information continued on attached pages

****DOLLAR CODE AMOUNT**
 A - \$1 to \$3,999
 B - \$4,000 to \$19,999
 C - \$20,000 to \$39,999

****DOLLAR CODE AMOUNT**
 D - \$40,000 to \$99,999
 E - \$100,000 or more

Employer's Name	Year report covers:
-----------------	---------------------

9. Entertainment, tickets, passes, travel expenses (including transportation, meals, lodging, etc.) and enrollment or course fees provided to legislators, state officials, state employees and members of their immediate families. See instruction manual for details.

Name and Title	Cost or Value	Date and Description of Expense
	\$	

Information continued on attached pages

10. Contributions (not reported by the lobbyist) totaling over \$25 to a legislative or statewide executive office candidate, a committee formed to support or oppose one of these candidates or a committee supporting or opposing a statewide ballot measure. Do not list employer-affiliated PAC contributions.

Name of Recipient	Amount	Date (and, if In-Kind, Description)
	\$	

Information continued on attached pages

11. Independent expenditures in support of or opposition to a) a legislative or statewide executive office candidate or b) a statewide ballot proposition.
See instruction manual for definition of "independent expenditure."

Candidate's Name, Office Sought & Party or Ballot Proposition Number & Brief Description	Amount	Date and Description of Expense (Note if Support or Oppose)
	\$	

Information continued on attached pages

12. Compensation of \$2,400 or more during the preceding calendar year for employment or professional services paid to state elected officials, successful candidates for state office and each member of their immediate family.

Name	Relationship to Candidate or Elected Official if Member of Family	Amount (Code)**	Description of Consideration or Services Exchanged for Compensation

Information continued on attached pages

13. Compensation of \$2,400 or more during the preceding calendar year for professional services paid to any corporation, partnership, joint venture, association or other entity in which state elected official, successful state candidate or member of their immediate family hold office, partnership, directorship or ownership interest of 10% or more.

Firm Name	Person's Name	Amount (Code)**	Description of Consideration or Services Exchanged for Compensation

Information continued on attached pages

14. Any expenditure, not otherwise reported, made directly or indirectly to a state elected official, successful candidate for state office or member of their immediate family, if made to honor, influence or benefit the person because of his or her official position.

Name	Amount	Date and Purpose
	\$	

Information continued on attached pages

****DOLLAR**
CODE AMOUNT
 A - \$1 to \$4,499
 B - \$4,500 to \$23,999
 C - \$24,000 to \$47,999

****DOLLAR**
CODE AMOUNT
 D - \$48,000 to \$119,999
 E - \$120,000 or more

INFORMATION CONTINUED

(Use this page if you need additional space for Items 2 or 9)

L3

Employer's Name	Year report covers:
-----------------	---------------------

2. Names of Registered Lobbyists	Col 1-Salary \$	Col 2-Other \$	Total Amount \$
Total From This Page			

9. Entertainment, etc.	Cost or Value \$	Date and Description of Expense
Name and Title		

INFORMATION CONTINUED

(Use this page if you need additional space for Items 10 or 11)

L3

Employer's Name		Year report covers:
10. Contributions		
Name of Recipient	Amount \$	Date (and, if In-Kind, Description)
11. Independent expenditures		
Candidate's Name, Office Sought & Party or Ballot Proposition Number & Brief Description	Amount \$	Date and Description of Expense (Note if Support or Oppose)

INFORMATION CONTINUED

L3

(Use this page if you need additional space for Items 12 thru 14)

Employer's Name		Year report covers:					
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:35%; vertical-align: top;"> <p>12. Compensation of \$2,400 or more for employment, etc.</p> <p style="text-align: center;">Name</p> </td> <td style="width:20%; vertical-align: top;"> <p style="text-align: center;">Relationship to Candidate or Elected Official if Member of Family</p> </td> <td style="width:15%; vertical-align: top;"> <p style="text-align: center;">Amount (Code)**</p> </td> <td style="width:30%; vertical-align: top;"> <p style="text-align: center;">Description of Consideration or Services Exchanged for Compensation</p> </td> </tr> </table>				<p>12. Compensation of \$2,400 or more for employment, etc.</p> <p style="text-align: center;">Name</p>	<p style="text-align: center;">Relationship to Candidate or Elected Official if Member of Family</p>	<p style="text-align: center;">Amount (Code)**</p>	<p style="text-align: center;">Description of Consideration or Services Exchanged for Compensation</p>
<p>12. Compensation of \$2,400 or more for employment, etc.</p> <p style="text-align: center;">Name</p>	<p style="text-align: center;">Relationship to Candidate or Elected Official if Member of Family</p>	<p style="text-align: center;">Amount (Code)**</p>	<p style="text-align: center;">Description of Consideration or Services Exchanged for Compensation</p>				
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:35%; vertical-align: top;"> <p>13. Compensation of \$2,400 or more for professional services</p> <p style="text-align: center;">Firm Name</p> </td> <td style="width:20%; vertical-align: top;"> <p style="text-align: center;">Person's Name</p> </td> <td style="width:15%; vertical-align: top;"> <p style="text-align: center;">Amount (Code)**</p> </td> <td style="width:30%; vertical-align: top;"> <p style="text-align: center;">Description of Consideration or Services Exchanged for Compensation</p> </td> </tr> </table>				<p>13. Compensation of \$2,400 or more for professional services</p> <p style="text-align: center;">Firm Name</p>	<p style="text-align: center;">Person's Name</p>	<p style="text-align: center;">Amount (Code)**</p>	<p style="text-align: center;">Description of Consideration or Services Exchanged for Compensation</p>
<p>13. Compensation of \$2,400 or more for professional services</p> <p style="text-align: center;">Firm Name</p>	<p style="text-align: center;">Person's Name</p>	<p style="text-align: center;">Amount (Code)**</p>	<p style="text-align: center;">Description of Consideration or Services Exchanged for Compensation</p>				
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2" style="width:50%; vertical-align: top;"> <p>14. Any expenditure not otherwise reported</p> <p style="text-align: center;">Name</p> </td> <td style="width:15%; vertical-align: top;"> <p style="text-align: center;">Amount</p> <p style="text-align: center;">\$</p> </td> <td style="width:30%; vertical-align: top;"> <p style="text-align: center;">Date and Purpose</p> </td> </tr> </table>				<p>14. Any expenditure not otherwise reported</p> <p style="text-align: center;">Name</p>		<p style="text-align: center;">Amount</p> <p style="text-align: center;">\$</p>	<p style="text-align: center;">Date and Purpose</p>
<p>14. Any expenditure not otherwise reported</p> <p style="text-align: center;">Name</p>		<p style="text-align: center;">Amount</p> <p style="text-align: center;">\$</p>	<p style="text-align: center;">Date and Purpose</p>				


****DOLLAR
CODE AMOUNT**
 A - \$1 to \$4,499
 B - \$4,500 to \$23,999
 C - \$24,000 to \$47,999

****DOLLAR
CODE AMOUNT**
 D - \$48,000 to \$119,999
 E - \$120,000 or more

AMENDATORY SECTION (Amending WSR 12-03-002, filed 1/4/12, effective 2/4/12)

WAC 390-24-010 Forms for statement of financial affairs. The official form for statements of financial affairs as required by RCW 42.17A.700 is designated "F-1," revised ((1/12)) 1/15. Copies of this form are available on the commission's web site, www.pdc.wa.gov, and at the Commission Office, 711 Capitol Way, Room 206, Evergreen Plaza Building, P.O. Box 40908, Olympia, Washington 98504-0908. Any paper attachments must be on 8-1/2" x 11" white paper.

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PUBLIC DISCLOSURE COMMISSION  711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 TOLL FREE 1-877-601-2828		PDC FORM F-1 (1/12)	PERSONAL FINANCIAL AFFAIRS STATEMENT	P M PDC OFFICE USE O A R S R K R E C E I V E D
Refer to instruction manual for detailed assistance and examples. Deadlines: Incumbent elected and appointed officials -- by April 15. Candidates and others -- within two weeks of becoming a candidate or being newly appointed to a position. SEND REPORT TO PUBLIC DISCLOSURE COMMISSION		DOLLAR CODE A \$1 to \$3,999 B \$4,000 to \$19,999 C \$20,000 to \$39,999 D \$40,000 to \$99,999 E \$100,000 or more		
Last Name First Middle Initial		Names of immediate family members, including registered domestic partner. If there is no reportable information to disclose for dependent children, or other dependents living in your household, do not identify them. Do identify your spouse or registered domestic partner. See F-1 manual for details.		
Mailing Address (Use PO Box or Work Address) *				
City County Zip + 4				
Filing Status (Check only one box.) <input type="checkbox"/> An elected or state appointed official filing annual report <input type="checkbox"/> Final report as an elected official. Term expired: _____ year _____ <input type="checkbox"/> Candidate running in an election: month _____ year _____ <input type="checkbox"/> Newly appointed to an elective office <input type="checkbox"/> Newly appointed to a state appointive office <input type="checkbox"/> Professional staff of the Governor's Office and the Legislature		Office Held or Sought Office title: _____ County, city, district or agency of the office, name and number: _____ Position number: _____ Term begins: _____ ends: _____		
1 INCOME		List each employer, or other source of income (pension, social security, legal judgment, etc.) from which you or a family member, including registered domestic partner, received \$2,000 or more during the period. Include stock options received during the reporting period that had a value of \$2,000 or more. (Report interest and dividends in Item 3.)		
Show Self (S) Spouse (SP/DP) Dependent (D)		Name and Address of Employer or Source of Compensation Occupation or How Compensation Was Earned Amount: (Use Code)		
		Check Here <input type="checkbox"/> if continued on attached sheet		
2 REAL ESTATE		List street address, assessor's parcel number, or legal description AND county for each parcel of Washington real estate with value of over \$10,000 in which you or a family member, including registered domestic partner, held a personal financial interest during the reporting period. (Show partnership, company, etc. real estate on F-1 supplement.)		
Property Sold or Interest Divested	Assessed Value (Use Code)	Name and Address of Purchaser		Nature and Amount (Use Code) of Payment or Consideration Received
Property Purchased or Interest Acquired		Creditor's Name/Address	Payment Terms	Security Given Mortgage Amount - (Use Code) Original Current
All Other Property Entirely or Partially Owned				
Check here <input type="checkbox"/> if continued on attached sheet				

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Refer to instruction manual for detailed assistance and examples.

Deadlines: Incumbent elected and appointed officials -- by April 15.
 Candidates and others -- within two weeks of becoming a candidate or being newly appointed to a position.

SEND REPORT TO PUBLIC DISCLOSURE COMMISSION

DOLLAR CODE	AMOUNT
A	\$1 to \$4,499
B	\$4,500 to \$23,999
C	\$24,000 to \$47,999
D	\$48,000 to \$119,999
E	\$120,000 or more

Last Name	First	Middle Initial	Names of immediate family members, including registered domestic partner. If there is no reportable information to disclose for dependent children, or other dependents living in your household, do not identify them. Do identify your spouse or registered domestic partner. See F-1 manual for details.
Mailing Address (Use PO Box or Work Address) *			
City	County	Zip + 4	

Filing Status (Check only one box.) <input type="checkbox"/> An elected or state appointed official filing annual report <input type="checkbox"/> Final report as an elected official. Term expired: _____ year _____ <input type="checkbox"/> Candidate running in an election: month _____ year _____ <input type="checkbox"/> Newly appointed to an elective office <input type="checkbox"/> Newly appointed to a state appointive office <input type="checkbox"/> Professional staff of the Governor's Office and the Legislature	Office Held or Sought Office title: _____ County, city, district or agency of the office, name and number: _____ Position number: _____ Term begins: _____ ends: _____
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1 INCOME List each employer, or other source of income (pension, social security, legal judgment, etc.) from which you or a family member, including registered domestic partner, received \$2,400 or more during the period. Include stock options received during the reporting period that had a value of \$2,400 or more. (Report interest and dividends in Item 3.)

Show Self (S) Spouse (SP/DP) Dependent (D)	Name and Address of Employer or Source of Compensation	Occupation or How Compensation Was Earned	Amount: (Use Code)

Check Here if continued on attached sheet

2 REAL ESTATE List street address, assessor's parcel number, or legal description AND county for each parcel of Washington real estate with value of over \$12,000 in which you or a family member, including registered domestic partner, held a personal financial interest during the reporting period. (Show partnership, company, etc. real estate on F-1 supplement.)

Property Sold or Interest Divested	Assessed Value (Use Code)	Name and Address of Purchaser	Nature and Amount (Use Code) of Payment or Consideration Received		
Property Purchased or Interest Acquired		Creditor's Name/Address	Payment Terms	Security Given	Mortgage Amount - (Use Code) Original Current
All Other Property Entirely or Partially Owned					

Check here if continued on attached sheet

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3 ASSETS / INVESTMENTS - INTEREST / DIVIDENDS		List bank and savings accounts, insurance policies, stock, bonds and other intangible property (including but not limited to stock options) held during the reporting period.		
A. Name and address of each bank or financial institution in which you, a family member, including registered domestic partner, had an account over \$20,000 any time during the report period.	Type of Account or Description of Asset	Asset Value (Use Code)	Income Amount (Use Code)	
B. Name and address of each insurance company where you, a family member, including registered domestic partner, had a policy with a cash or loan value over \$20,000 during the period.				
C. Name and address of each company, association, government agency, etc. in which you, a family member, including registered domestic partner, owned or had a financial interest worth over \$2,000. Include stocks, bonds, ownership, retirement plan, IRA, notes, stock options, and other intangible property. If you, your spouse, registered domestic partner and/or dependents had decision making authority regarding individual assets/investments list each asset or investment, the value and any income amount. EXAMPLE: If you self-directed an investment account identify each stock or other asset in that account.				
Check here <input type="checkbox"/> if continued on attached sheet.				
4 CREDITORS		List each creditor you or a family member, including registered domestic partner, owed \$2,000 or more any time during the period. Don't include retail charge accounts, credit cards, or mortgages or real estate reported in Item 2.		AMOUNT (USE CODE)
Creditor's Name and Address		Terms of Payment	Security Given	Original Present
Check here <input type="checkbox"/> if continued on attached sheet.				
5 All filers answer questions A thru D below. If the answer is YES to any of these questions, the F-1 Supplement must also be completed as part of this report. If all answers are NO and you are a candidate for state or local office, an appointee to a vacant elective office, or a state executive officer filing your initial report, no F-1 Supplement is required.				
Incumbent elected officials and state executive officers filing an annual financial affairs report also must answer question E. An F-1 Supplement is required of these officeholders unless all answers to questions A thru E are NO.				
A. At any time during the reporting period were you, your spouse, registered domestic partner or dependents (1) an officer, director, general partner or trustee of any corporation, company, union, association, joint venture or other entity or (2) a partner or member of any limited partnership, limited liability partnership, limited liability company or similar entity including but not limited to a professional limited liability company? ____ If yes, complete Supplement, Part A.				
B. Did you, your spouse, registered domestic partner or dependents have an ownership of 10% or more in any company, corporation, partnership, joint venture or other business at any time during the reporting period? ____ If yes, complete Supplement, Part A.				
C. Did you, your spouse, registered domestic partner or dependents own a business at any time during the reporting period? ____ If yes, complete Supplement, Part A.				
D. Did you, your spouse, registered domestic partner or dependents prepare, promote or oppose state legislation, rules, rates or standards for compensation or deferred compensation (other than pay for a currently-held public office) at any time during the reporting period? ____ If yes, complete Supplement, Part B.				
E. Only for Persons Filing Annual Report. Regarding the receipt of items not provided or paid for by your governmental agency during the previous calendar year: 1) Did you, your spouse, registered domestic partner or dependents (or any combination thereof) accept a gift of food or beverages costing over \$50 per occasion? ____ or 2) Did any source other than your governmental agency provide or pay in whole or in part for you, your spouse, registered domestic partner and/or dependents to travel or to attend a seminar or other training? ____ If yes to either or both questions, complete Supplement, Part C.				
ALL FILERS EXCEPT CANDIDATES. Check the appropriate box.		CERTIFICATION: I certify under penalty of perjury that the information contained in this report is true and correct to the best of my knowledge.		
<input type="checkbox"/> I hold a state elected office, am an executive state officer or professional staff. I have read and am familiar with RCW 42.52.180 regarding the use of public resources in campaigns.		Signature _____ Date _____		
<input type="checkbox"/> I hold a local elected office. I have read and am familiar with RCW 42.17A.555 regarding the use of public facilities in campaigns.		Contact Telephone: () *		
*CANDIDATES: Do not use public agency addresses or telephone numbers for contact information.		Email: _____ (work) *		
		Email: _____ (Home) Optional		

REPORT NOT ACCEPTABLE WITHOUT FILER'S SIGNATURE

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3	ASSETS / INVESTMENTS - INTEREST / DIVIDENDS	List bank and savings accounts, insurance policies, stock, bonds and other intangible property (including but not limited to stock options) held during the reporting period.			
<p>A. Name and address of each bank or financial institution in which you, a family member, including registered domestic partner, had an account over \$24,000 any time during the report period.</p> <p>B. Name and address of each insurance company where you, a family member, including registered domestic partner, had a policy with a cash or loan value over \$24,000 during the period.</p> <p>C. Name and address of each company, association, government agency, etc. in which you, a family member, including registered domestic partner, owned or had a financial interest worth over \$2,400. Include stocks, bonds, ownership, retirement plan, IRA, notes, stock options, and other intangible property. If you, your spouse, registered domestic partner and/or dependents had decision making authority regarding individual assets/investments list each asset or investment, the value and any income amount. EXAMPLE: If you self-directed an investment account identify each stock or other asset in that account.</p>	Type of Account or Description of Asset	Asset Value (Use Code)	Income Amount (Use Code)		
Check here <input type="checkbox"/> if continued on attached sheet.					
4	CREDITORS	List each creditor you or a family member, including registered domestic partner, owed \$2,400 or more any time during the period. Don't include retail charge accounts, credit cards, or mortgages or real estate reported in Item 2.			AMOUNT (USE CODE)
Creditor's Name and Address		Terms of Payment	Security Given	Original	Present
Check here <input type="checkbox"/> if continued on attached sheet.					
<p>5 All filers answer questions A thru D below. If the answer is YES to any of these questions, the F-1 Supplement must also be completed as part of this report. If all answers are NO and you are a candidate for state or local office, an appointee to a vacant elective office, or a state executive officer filing your initial report, no F-1 Supplement is required.</p> <p>Incumbent elected officials and state executive officers filing an annual financial affairs report also must answer question E. An F-1 Supplement is required of these officeholders unless all answers to questions A thru E are NO.</p> <p>A. At any time during the reporting period were you, your spouse, registered domestic partner or dependents (1) an officer, director, general partner or trustee of any corporation, company, union, association, joint venture or other entity or (2) a partner or member of any limited partnership, limited liability partnership, limited liability company or similar entity including but not limited to a professional limited liability company? ____ If yes, complete Supplement, Part A.</p> <p>B. Did you, your spouse, registered domestic partner or dependents have an ownership of 10% or more in any company, corporation, partnership, joint venture or other business at any time during the reporting period? ____ If yes, complete Supplement, Part A.</p> <p>C. Did you, your spouse, registered domestic partner or dependents own a business at any time during the reporting period? ____ If yes, complete Supplement, Part A.</p> <p>D. Did you, your spouse, registered domestic partner or dependents prepare, promote or oppose state legislation, rules, rates or standards for compensation or deferred compensation (other than pay for a currently-held public office) at any time during the reporting period? ____ If yes, complete Supplement, Part B.</p> <p>E. Only for Persons Filing Annual Report. Regarding the receipt of items not provided or paid for by your governmental agency during the previous calendar year: 1) Did you, your spouse, registered domestic partner or dependents (or any combination thereof) accept a gift of food or beverages costing over \$50 per occasion? ____ or 2) Did any source other than your governmental agency provide or pay in whole or in part for you, your spouse, registered domestic partner and/or dependents to travel or to attend a seminar or other training? ____ If yes to either or both questions, complete Supplement, Part C.</p>					
<p>ALL FILERS EXCEPT CANDIDATES. Check the appropriate box.</p> <p><input type="checkbox"/> I hold a state elected office, am an executive state officer or professional staff. I have read and am familiar with RCW 42.52.180 regarding the use of public resources in campaigns.</p> <p><input type="checkbox"/> I hold a local elected office. I have read and am familiar with RCW 42.17A.555 regarding the use of public facilities in campaigns.</p> <p>*CANDIDATES: Do not use public agency addresses or telephone numbers for contact information.</p>		<p>CERTIFICATION: I certify under penalty of perjury that the information contained in this report is true and correct to the best of my knowledge.</p> <p>Signature _____ Date _____</p> <p>Contact Telephone: () *</p> <p>Email: _____(work) *</p> <p>Email: _____(Home) Optional</p>			
REPORT NOT ACCEPTABLE WITHOUT FILER'S SIGNATURE					

 PUBLIC DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 TOLL FREE 1-877-601-2828 EMAIL: pdc@pdc.wa.gov	PDC FORM F-1 SUPPLEMENT (1/12)	SUPPLEMENT PAGE PERSONAL FINANCIAL AFFAIRS STATEMENT
	PROVIDE INFORMATION FOR YOURSELF, SPOUSE, REGISTERED DOMESTIC PARTNER, DEPENDENT CHILDREN AND OTHER DEPENDENTS IN YOUR HOUSEHOLD	

PROVIDE INFORMATION FOR YOURSELF, SPOUSE, REGISTERED DOMESTIC PARTNER, DEPENDENT CHILDREN AND OTHER DEPENDENTS IN YOUR HOUSEHOLD

Last Name	First	Middle Initial	DATE
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A OFFICE HELD, BUSINESS INTERESTS: Provide the following information if, during the reporting period, you, your spouse, registered domestic partner or dependents

- (1) were an officer, director, general partner, trustee, or 10 percent or more owner of a corporation, non-profit organization, union, partnership, joint venture or other entity; and/or
- (2) were a partner or member of a limited partnership, limited liability partnership, limited liability company or similar entity, including but not limited to a professional limited liability company.

- Legal Name: Report name used on legal documents establishing the entity.
- Trade or Operating Name: Report name used for business purposes if different from the legal name.
- Position or Percent of Ownership: The office, title and/or percent of ownership held.
- Brief Description of the Business/Organization: Report the purpose, product(s), and/or the service(s) rendered.
- Payments from Governmental Unit: If the governmental unit in which you hold or seek office made payments to the business entity concerning which you're reporting, show the purpose of each payment and the actual amount received.
- Payments from Business Customers and Other Government Agencies: List each corporation, partnership, joint venture, sole proprietorship, union, association, business or other commercial entity and each government agency (other than the one you seek/hold office) which paid compensation of \$10,000 or more during the period to the entity. Briefly say what property, goods, services or other consideration was given or performed for the compensation.
- Washington Real Estate: Identify real estate owned by the business entity if the qualifications referenced below are met.

ENTITY NO. 1 Reporting For: Self Spouse
 Registered Domestic Partner Dependent

LEGAL NAME: POSITION OR PERCENT OF OWNERSHIP

TRADE OR OPERATING NAME:

ADDRESS:

BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:

PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE:

Purpose of payments	Amount (actual dollars)
	\$

PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$10,000 OR MORE:

Agency name:	Purpose of payment (amount not required)
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PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$10,000 OR MORE

Customer name:	Purpose of payment (amount not required)
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WASHINGTON REAL ESTATE IN WHICH ENTITY HELD A DIRECT FINANCIAL INTEREST (Complete only if ownership in the ENTITY is 10% or more and assessed value of property is over \$20,000. List street address, assessor parcel number, or legal description and county for each parcel):

Check here if continued on attached sheet

CONTINUE PARTS B AND C ON NEXT PAGE

 <p>PUBLIC DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 TOLL FREE 1-877-601-2828 EMAIL: pdc@pdc.wa.gov</p>	PDC FORM F-1 SUPPLEMENT (1/15)	SUPPLEMENT PAGE PERSONAL FINANCIAL AFFAIRS STATEMENT	
PROVIDE INFORMATION FOR YOURSELF, SPOUSE, REGISTERED DOMESTIC PARTNER, DEPENDENT CHILDREN AND OTHER DEPENDENTS IN YOUR HOUSEHOLD			
Last Name	First	Middle Initial	DATE
<p>A OFFICE HELD, BUSINESS INTERESTS: Provide the following information if, during the reporting period, you, your spouse, registered domestic partner or dependents</p> <p>(1) were an officer, director, general partner, trustee, or 10 percent or more owner of a corporation, non-profit organization, union, partnership, joint venture or other entity; and/or</p> <p>(2) were a partner or member of a limited partnership, limited liability partnership, limited liability company or similar entity, including but not limited to a professional limited liability company.</p> <ul style="list-style-type: none"> • Legal Name: Report name used on legal documents establishing the entity. • Trade or Operating Name: Report name used for business purposes if different from the legal name. • Position or Percent of Ownership: The office, title and/or percent of ownership held. • Brief Description of the Business/Organization: Report the purpose, product(s), and/or the service(s) rendered. • Payments from Governmental Unit: If the governmental unit in which you hold or seek office made payments to the business entity concerning which you're reporting, show the purpose of each payment and the actual amount received. • Payments from Business Customers and Other Government Agencies: List each corporation, partnership, joint venture, sole proprietorship, union, association, business or other commercial entity and each government agency (other than the one you seek/hold office) which paid compensation of \$12,000 or more during the period to the entity. Briefly say what property, goods, services or other consideration was given or performed for the compensation. • Washington Real Estate: Identify real estate owned by the business entity if the qualifications referenced below are met. 			
ENTITY NO. 1		Reporting For: Self <input type="checkbox"/> Spouse <input type="checkbox"/> Registered Domestic Partner <input type="checkbox"/> Dependent <input type="checkbox"/>	
LEGAL NAME:		POSITION OR PERCENT OF OWNERSHIP	
TRADE OR OPERATING NAME:			
ADDRESS:			
BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:			
PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE:			
Purpose of payments		Amount (actual dollars)	
		\$	
PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE:			
Agency name:		Purpose of payment (amount not required)	
PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE:			
Customer name:		Purpose of payment (amount not required)	
WASHINGTON REAL ESTATE IN WHICH ENTITY HELD A DIRECT FINANCIAL INTEREST (Complete only if ownership in the ENTITY is 10% or more and assessed value of property is over \$24,000. List street address, assessor parcel number, or legal description and county for each parcel):			
Check here <input type="checkbox"/> if continued on attached sheet			
CONTINUE PARTS B AND C ON NEXT PAGE			

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Name

ENTITY NO. 2 Reporting For: Self Spouse

Registered Domestic Partner Dependent

LEGAL NAME: POSITION OR PERCENT OF OWNERSHIP

TRADE OR OPERATING NAME:

ADDRESS:

BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:

PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE:

Purpose of payments Amount (actual dollars)

\$

PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$10,000 OR MORE:

Agency name: Purpose of payment (amount not required)

PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$10,000 OR MORE

Customer name: Purpose of payment (amount not required)

WASHINGTON REAL ESTATE IN WHICH ENTITY HELD A DIRECT FINANCIAL INTEREST (Complete only if ownership in the ENTITY is 10% or more and assessed value of property is over \$20,000. List street address, assessor parcel number, or legal description and county for each parcel):

Check here if continued on attached sheet

B LOBBYING: List persons for whom you, or any immediate family member, including registered domestic partner, lobbied or prepared state legislation or state rules, rates, or standards for compensation or deferred compensation. Do not list pay from government body in which you are an elected official or professional staff member.

Person to Whom Services Rendered	Description of Legislation, Rules, Etc.	Compensation (Use Code)

Check here if continued on attached sheet

C FOOD TRAVEL SEMINARS Complete this section if a source other than your own governmental agency paid for or otherwise provided all or a portion of the following items to you, your spouse, registered domestic partner or dependents, or a combination thereof: 1) Food and beverages costing over \$50 per occasion; 2) Travel occasions; or 3) Seminars, educational programs or other training.

Date Received	Donor's Name, City and State	Brief Description	Actual Dollar Amount	Value (Use Code)
			\$	

Check here if continued on attached sheet

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Name

ENTITY NO. 2 Reporting For: Self Spouse
Registered Domestic Partner Dependent

LEGAL NAME: POSITION OR PERCENT OF OWNERSHIP

TRADE OR OPERATING NAME:

ADDRESS:

BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:

PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE:
Purpose of payments Amount (actual dollars)
\$

PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE:
Agency name: Purpose of payment (amount not required)

PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE
Customer name: Purpose of payment (amount not required)

WASHINGTON REAL ESTATE IN WHICH ENTITY HELD A DIRECT FINANCIAL INTEREST (Complete only if ownership in the ENTITY is 10% or more and assessed value of property is over \$24,000. List street address, assessor parcel number, or legal description and county for each parcel):

Check here if continued on attached sheet

B LOBBYING: List persons for whom you, or any immediate family member, including registered domestic partner, lobbied or prepared state legislation or state rules, rates, or standards for compensation or deferred compensation. Do not list pay from government body in which you are an elected official or professional staff member.

Person to Whom Services Rendered	Description of Legislation, Rules, Etc.	Compensation (Use Code)
Check here <input type="checkbox"/> if continued on attached sheet		

C FOOD TRAVEL SEMINARS Complete this section if a source other than your own governmental agency paid for or otherwise provided all or a portion of the following items to you, your spouse, registered domestic partner or dependents, or a combination thereof: 1) Food and beverages costing over \$50 per occasion, excluding certain receptions as defined in WAC 390-20-020A, L-2 Reporting Guide; 2) Travel occasions; or 3) Seminars, educational programs or other training.

Date Received	Donor's Name, City and State	Brief Description	Actual Dollar Amount	Value (Use Code)
Check here <input type="checkbox"/> if continued on attached sheet				

Information Continued

F-1 Supplement

Name

ENTITY NO. Reporting For: Self Spouse
Registered Domestic Partner Dependent

LEGAL NAME: POSITION OR PERCENT OF OWNERSHIP

TRADE OR OPERATING NAME:

ADDRESS:

BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:

PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE:
Purpose of payments Amount (actual dollars)
\$

PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE:
Agency name: Purpose of payment (amount not required)

PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE
Customer name: Purpose of payment (amount not required)

WASHINGTON REAL ESTATE IN WHICH ENTITY HELD A DIRECT FINANCIAL INTEREST (Complete only if ownership in the ENTITY is 10% or more and assessed value of property is over \$24,000. List street address, assessor parcel number, or legal description and county for each parcel):

B LOBBYING: (Continued)

Person to Whom Services Rendered	Description of Legislation, Rules, Etc.	Compensation (Use Code)

C FOOD TRAVEL SEMINARS (continued)

Date Received	Donor's Name, City and State	Brief Description	Actual Dollar Amount \$	Value (Use Code)

AMENDATORY SECTION (Amending WSR 12-03-002, filed 1/4/12, effective 2/4/12)


WAC 390-24-020 Forms for amending statement of financial affairs. (1) The official form for amending statements of financial affairs as required by RCW 42.17A.700 for all persons who have previously filed the Form F-1 is designated Form "F-1A," revised ((1/12)) 1/15.

(2) No more than three F-1A forms may be filed to amend a previously submitted statement of financial affairs (Form F-1). The form can be used only to update information required on an F-1.

(3) The commission reserves the right to reject amendatory forms and require a new statement of financial affairs (Form F-1) at any time the amendments are confusing or create misunderstandings. Authority is delegated to the commission's executive director to make this determination.


(4) Copies of Form F-1A are available on the commission's web site, www.pdc.wa.gov and at the Commission Office, 711 Capitol Way, Room 206, Evergreen Plaza Building, P.O. Box 40908, Olympia, Washington 98504-0908. Any paper attachments must be on 8-1/2" x 11" white paper.

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 PUBLIC DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 TOLL FREE 1-877-601-2828		PDC FORM F-1A (1/12)	PERSONAL FINANCIAL AFFAIRS STATEMENT Short Form	P M PDC OFFICE USE O A R S A K T R R E C E I V E D
The F-1A form is designed to simplify reporting for persons who have no changes or only minor changes to an F-1 report previously filed. A complete F-1 form must be filed at least every four years; an F-1A form may be used for no more than three consecutive reports. Deadlines: Incumbent elected and appointed officials -- by April 15. Candidates and others -- within two weeks of becoming a candidate or being newly appointed to a position.		DOLLAR CODE AMOUNT A \$1 to \$3,999 B \$4,000 to \$19,999 C \$20,000 to \$39,999 D \$40,000 to \$99,999 E \$100,000 or more		
Last Name First Middle Initial Mailing Address (Use PO Box or Work Address) * City County Zip + 4		Names of immediate family members, including registered domestic partner. If there is no reportable information to disclose for dependent children, or other dependents living in your household, do not identify them. Do identify your spouse or registered domestic partner. See F-1 manual for details.		
Filing Status (Check only one box.) <input type="checkbox"/> An elected or state appointed official filing annual report <input type="checkbox"/> Final report as an elected official. Term expired: _____ <input type="checkbox"/> Candidate running in an election: month _____ year _____ <input type="checkbox"/> Newly appointed to an elective office <input type="checkbox"/> Newly appointed to a state appointive office <input type="checkbox"/> Professional staff of the Governor's Office and the Legislature		Office Held or Sought Office title: _____ County, city, district or agency of the office, name and number: _____ Position number: _____ Term begins: _____ ends: _____		
Select either "No Change Report" or "Minor Change Report," whichever reflects your situation. Supply all the requested information.				
<input type="checkbox"/> NO CHANGE REPORT. I have reviewed my last complete F-1 report dated _____ and F-1A reports (if any) dated (1) _____ and (2) _____. The information disclosed on those reports is accurate for the current reporting period.				
<input type="checkbox"/> MINOR CHANGES REPORT. I have reviewed my last complete F-1 report dated _____. The changes listed below have occurred during the reporting period. Specify F-1 Form Item numbers and describe changes. Provide all information required on F-1 report.				
Check here <input type="checkbox"/> if continued on attached sheet				
FOOD TRAVEL SEMINARS Complete this section if a source other than your own governmental agency paid for or otherwise provided all or a portion of the following items to you, your spouse, registered domestic partner or dependents, or a combination thereof: 1) Food and beverages costing over \$50 per occasion; 2) Travel occasions; or 3) Seminars, educational programs or other training.				
Date Received	Donor's Name, City and State	Brief Description	Actual Dollar Amount	Value (Use Code)
Check here <input type="checkbox"/> if continued on attached sheet				
ALL FILERS EXCEPT CANDIDATES. Check the appropriate box. <input type="checkbox"/> I hold a state elected office, am an executive state officer or professional staff. I have read and am familiar with RCW 42.52.180 regarding the use of public resources in campaigns. <input type="checkbox"/> I hold a local elected office. I have read and am familiar with RCW 42.17A.555 regarding the use of public facilities in campaigns. *CANDIDATES: Do not use public agency addresses or telephone numbers for contact information		CERTIFICATION: I certify under penalty of perjury that the information contained in this report is true and correct to the best of my knowledge. Signature _____ Date _____ Contact Telephone: () * Email: _____ (work) * Email: _____ (Home) Optional		

Report Not Acceptable Without Filer's Signature

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 PUBLIC DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 TOLL FREE 1-877-601-2828	PDC FORM F-1A (1/15)	PERSONAL FINANCIAL AFFAIRS STATEMENT Short Form	P M PDC OFFICE USE O A S R T K												
The F-1A form is designed to simplify reporting for persons who have no changes or only minor changes to an F-1 report previously filed. A complete F-1 form must be filed at least every four years; an F-1A form may be used for no more than three consecutive reports. Deadlines: Incumbent elected and appointed officials -- by April 15. Candidates and others -- within two weeks of becoming a candidate or being newly appointed to a position.		<table border="1"> <thead> <tr> <th>DOLLAR CODE</th> <th>AMOUNT</th> </tr> </thead> <tbody> <tr> <td>A</td> <td>\$1 to \$4,499</td> </tr> <tr> <td>B</td> <td>\$4,500 to \$23,999</td> </tr> <tr> <td>C</td> <td>\$24,000 to \$47,999</td> </tr> <tr> <td>D</td> <td>\$48,000 to \$119,999</td> </tr> <tr> <td>E</td> <td>\$120,000 or more</td> </tr> </tbody> </table>	DOLLAR CODE	AMOUNT	A	\$1 to \$4,499	B	\$4,500 to \$23,999	C	\$24,000 to \$47,999	D	\$48,000 to \$119,999	E	\$120,000 or more	R E C E I V E D
DOLLAR CODE	AMOUNT														
A	\$1 to \$4,499														
B	\$4,500 to \$23,999														
C	\$24,000 to \$47,999														
D	\$48,000 to \$119,999														
E	\$120,000 or more														
Last Name _____ First _____ Middle Initial _____ Mailing Address (Use PO Box or Work Address) * _____ City _____ County _____ Zip + 4 _____	Names of immediate family members, including registered domestic partner. If there is no reportable information to disclose for dependent children, or other dependents living in your household, do not identify them. Do identify your spouse or registered domestic partner. See F-1 manual for details.														
Filing Status (Check only one box.) <input type="checkbox"/> An elected or state appointed official filing annual report <input type="checkbox"/> Final report as an elected official. Term expired: _____ <input type="checkbox"/> Candidate running in an election: month _____ year _____ <input type="checkbox"/> Newly appointed to an elective office <input type="checkbox"/> Newly appointed to a state appointive office <input type="checkbox"/> Professional staff of the Governor's Office and the Legislature	Office Held or Sought Office title: _____ County, city, district or agency of the office, name and number: _____ Position number: _____ Term begins: _____ ends: _____														
Select either "No Change Report" or "Minor Change Report," whichever reflects your situation. Supply all the requested information. <input type="checkbox"/> NO CHANGE REPORT. I have reviewed my last complete F-1 report dated _____ and F-1A reports (if any) dated (1) _____ and (2) _____. The information disclosed on those reports is accurate for the current reporting period. <input type="checkbox"/> MINOR CHANGES REPORT. I have reviewed my last complete F-1 report dated _____. The changes listed below have occurred during the reporting period. Specify F-1 Form Item numbers and describe changes. Provide all information required on F-1 report. Check here <input type="checkbox"/> if continued on attached sheet															
FOOD TRAVEL SEMINARS Complete this section if a source other than your own governmental agency paid for or otherwise provided all or a portion of the following items to you, your spouse, registered domestic partner or dependents, or a combination thereof: 1) Food and beverages costing over \$50 per occasion, excluding certain receptions as defined in WAC 390-20-020A, L-2 Reporting Guide; 2) Travel occasions; or 3) Seminars, educational programs or other training.															
Date Received	Donor's Name, City and State	Brief Description	Actual Dollar Amount	Value (Use Code)											
Check here <input type="checkbox"/> if continued on attached sheet															
ALL FILERS EXCEPT CANDIDATES. Check the appropriate box. <input type="checkbox"/> I hold a state elected office, am an executive state officer or professional staff. I have read and am familiar with RCW 42.52.180 regarding the use of public resources in campaigns. <input type="checkbox"/> I hold a local elected office. I have read and am familiar with RCW 42.17A.555 regarding the use of public facilities in campaigns. *CANDIDATES: Do not use public agency addresses or telephone numbers for contact information		CERTIFICATION: I certify under penalty of perjury that the information contained in this report is true and correct to the best of my knowledge. _____ Signature Date Contact Telephone: () * Email: _____(work) * Email: _____(Home) Optional													
Report Not Acceptable Without Filer's Signature															

Information Continued

F-1A

Name _____

Select either "No Change Report" or "Minor Change Report," whichever reflects your situation. Supply all the requested information.

- NO CHANGE REPORT.** I have reviewed my last complete F-1 report dated _____ and F-1A reports (if any) dated (1) _____ and (2) _____. The information disclosed on those reports is accurate for the current reporting period.
- MINOR CHANGES REPORT.** I have reviewed my last complete F-1 report dated _____. The changes listed below have occurred during the reporting period. Specify F-1 Form Item numbers and describe changes. Provide all information required on F-1 report.

**FOOD
TRAVEL
SEMINARS** (Continued)

Date Received	Donor's Name, City and State	Brief Description	Actual Dollar Amount \$	Value (Use Code)

Information Continued

F-1A

Name _____

Select either "No Change Report" or "Minor Change Report," whichever reflects your situation. Supply all the requested information.

NO CHANGE REPORT. I have reviewed my last complete F-1 report dated _____ and F-1A reports (if any) dated (1) _____ and (2) _____. The information disclosed on those reports is accurate for the current reporting period.

MINOR CHANGES REPORT. I have reviewed my last complete F-1 report dated _____. The changes listed below have occurred during the reporting period. Specify F-1 Form Item numbers and describe changes. Provide all information required on F-1 report.

**FOOD
TRAVEL
SEMINARS** (Continued)

Date Received	Donor's Name, City and State	Brief Description	Actual Dollar Amount \$	Value (Use Code)

AMENDATORY SECTION (Amending WSR 12-03-002, filed 1/4/12, effective 2/4/12)

WAC 390-24-202 Report of compensation from sales commissions.

When a person receives compensation in the form of a commission on sales, the reporting of the compensation, required in RCW 42.17A.710, shall include:

(1) The name and address of the person or persons through whom a commission was paid;

(2) For purposes of RCW 42.17A.710 (1)(f), the name and address of each person (other than an individual) for whom a service was rendered or to whom a product was sold that resulted in a commission of \$ (~~2,000~~) 2,400 or more in the aggregate;

(3) For purposes of RCW 42.17A.710 (1)(g)(i), the name and address of each governmental unit for whom a service was rendered or to whom a product was sold that resulted in a commission;

(4) For purposes of RCW 42.17A.710 (1)(g)(ii), the name and address of each person (other than an individual) for whom a service was rendered or to whom a product was sold that resulted in a commission of \$ (~~10,000~~) 12,000 or more in the aggregate.

AMENDATORY SECTION (Amending WSR 12-03-002, filed 1/4/12, effective 2/4/12)

WAC 390-24-301 Changes in dollar amounts of reporting thresholds and code values. Pursuant to the commission's authority in RCW 42.17A.125(2) to revise the monetary reporting thresholds and code values found in chapter 42.17A RCW to reflect changes in economic conditions, the following revisions are made:

Statutory Section	Subject Matter	Amount Enacted or Last Revised	Revision Effective January (1, 2008) 12, 2015
.710 (1)(b)	Bank Accounts	\$((15,000)) <u>20,000</u>	\$((20,000)) <u>24,000</u>
.710 (1)(b)	Other Intangibles	\$((1,500)) <u>2,000</u>	\$((2,000)) <u>2,400</u>
.710 (1)(c)	Creditors	\$((1,500)) <u>2,000</u>	\$((2,000)) <u>2,400</u>
.710 (1)(f)	Compensation	\$((1,500)) <u>2,000</u>	\$((2,000)) <u>2,400</u>
.710 (1)(g)(ii)	Compensation to Business Entity	\$((7,500)) <u>10,000</u>	\$((10,000)) <u>12,000</u>
.710 (1)(g)	Bank Interest Paid	\$((1,800)) <u>2,400</u>	\$((2,400)) <u>2,900</u>
.710 (1)(h)	Real Property-Acquired	\$((7,500)) <u>10,000</u>	\$((10,000)) <u>12,000</u>
.710 (1)(i)	Real Property-Divested	\$((7,500)) <u>10,000</u>	\$((10,000)) <u>12,000</u>
.710 (1)(j)	Real Property-Held	\$((7,500)) <u>10,000</u>	\$((10,000)) <u>12,000</u>
.710 (1)(k)	Real Property-Business	\$((15,000)) <u>20,000</u>	\$((20,000)) <u>24,000</u>
.710 (1)(l)	Food and Beverages	\$50	
.710 (2)	Dollar Code A	Up to \$((2,999)) <u>3,999</u>	Up to \$((3,999)) <u>4,499</u>
	Dollar Code B	\$((3,000-\$14,999)) <u>4,000-\$19,999</u>	\$((4,000-\$19,999)) <u>4,500-\$23,999</u>
	Dollar Code C	\$((15,000-\$29,999)) <u>20,000-\$39,999</u>	\$((20,000-\$39,999)) <u>24,000-\$47,999</u>
	Dollar Code D	\$((30,000-\$74,999)) <u>40,000-\$99,999</u>	\$((40,000-\$99,999)) <u>48,000-\$119,999</u>
	Dollar Code E	\$((75,000)) <u>100,000</u> and up	\$((100,000)) <u>120,000</u> and up



PUBLIC DISCLOSURE COMMISSION

711 Capitol Way Rm. 206, PO Box 40908 • Olympia, Washington 98504-0908 • (360) 753-1111 • FAX (360) 753-1112

Toll Free 1-877-601-2828 • E-mail: pdc@pdc.wa.gov • Website: www.pdc.wa.gov

To: Members, Washington State Public Disclosure Commission
From: Lori Anderson, Communications & Training Officer
Date: June 19, 2014
Re: Rule Making – Discussion and Possible Approval of Draft Language – Adjusting Dollar Amounts for Personal Financial Affairs Disclosure

AGENDA ITEM

At the June 26, 2014 meeting, the Commission will discuss and possibly approve draft language to adjust the personal financial disclosure dollar amounts (reporting thresholds and Codes A – E values), as allowed by RCW 42.17A.125(2). The draft language proposes amendments to:

WAC 390-24-010 Forms for statement of financial affairs [F-1],
WAC 390-24-020 Forms for amending statement of financial affairs [F-1A],
WAC 390-24-202 Report of compensation from sales commissions, and
WAC 390-24-301 Changes in dollar amounts of reporting thresholds and code values.

BACKGROUND

Consistent with its strategic plan, the Commission has been reviewing Personal Financial Affairs (F-1) disclosure requirements. At the June 2014 meeting, the Commission will consider stakeholders' and staff recommendations for statutory and rule amendments that would change the F-1 disclosure requirements. Both stakeholders and staff are recommending that the Commission make inflationary adjustments to the F-1 dollar thresholds and reporting code values. Discussion and possible approval of draft language is included in the June 26 meeting agenda, in the event the Commission wishes to begin the process of making inflationary adjustments.

The Commission may make adjustments for the purpose of recognizing economic changes at least once every five years but no more often than every two years. The F-1 thresholds and reporting value codes were last adjusted in 2008. Any adjustments the Commission makes must equally affect all thresholds within the personal financial disclosure category. RCW 42.17A.125(2).

DRAFT PROPOSED AMENDMENTS

The adjustments offered for consideration and possible approval were calculated using the Implicit Price Deflater index, as directed by RCW 42.17A.125(2).

- The attached draft proposal to amend WAC 390-24-301 summarizes the current amounts and draft proposed adjustments.

- All dollar amounts contained in the attached draft proposed amendments to the F-1, F-1 Supplement, and F-1A forms are adjusted consistent with the draft proposed amendments to WAC 390-24-301.
- Finally, draft language to amend WAC 390-24-202, is attached. The rule clarifies how commission proceeds are disclosed, referencing the disclosure thresholds for compensation and payments from governmental and business customers. The proposed draft adjustments to those amounts are also consistent with the draft proposed amendments to WAC 390-24-301.

If the Commission approves the language for the proposed amendments, it will be filed with the Code Reviser along with notice of a public hearing that would likely be scheduled for the September 2014 meeting.

COMMISSION ACTION

Staff is requesting that the Commission approve the proposed draft language to amend WACs 390-24-010, 390-24-020, 390-24-202, and 390-24-301.

Attachments: Draft proposed amendments to WACs 390-24-301,
390-24-010,
390-24-020, and
390-24-202

WAC 390-24-301 Changes in dollar amounts of reporting thresholds

and code values. Pursuant to the commission's authority in RCW 42.17A.125(2) to revise the monetary reporting thresholds and code values found in chapter 42.17A RCW to reflect changes in economic conditions, the following revisions are made:

Statutory Section	Subject Matter	Amount Enacted or Last Revised	Revision Effective (0) November 1, 2014
.710 (1)(b)	Bank Accounts	\$(15,000) 20,000	\$(20,000) 24,000
.710 (1)(b)	Other Intangibles	\$(1,500) <u>2,000</u>	\$(2,000) 2,400
.710 (1)(c)	Creditors	\$(1,500) <u>2,000</u>	\$(2,000) 2,400
.710 (1)(f)	Compensation	\$(1,500) <u>2,000</u>	\$(2,000) 2,400
.710 (1)(g)(ii)	Compensation to Business Entity	\$(7,500) <u>10,000</u>	\$(10,000) 12,000
.710 (1)(g)	Bank Interest Paid	\$(1,800) <u>2,400</u>	\$(2,400) 2,900
.710 (1)(h)	Real Property-Acquired	\$(7,500) <u>10,000</u>	\$(10,000) 12,000
.710 (1)(i)	Real Property-Divested	\$(7,500) <u>10,000</u>	\$(10,000) 12,000
.710 (1)(j)	Real Property-Held	\$(7,500) <u>10,000</u>	\$(10,000) 12,000
.710 (1)(k)	Real Property-Business	\$(15,000) <u>20,000</u>	\$(20,000) 24,000
.710 (1)(l)	Food and Beverages	\$50	
.710 (2)	Dollar Code A	Up to \$(2,999) <u>3,999</u>	Up to \$(3,999) 4,499
	Dollar Code B	(\$3,000-\$14,999) \$4,000-\$19,999	(\$4,000-\$19,999) \$4,500-\$23,999
	Dollar Code C	(\$15,000-\$29,999) \$20,000-\$39,999	(\$20,000-\$39,999) \$24,000-\$47,999
	Dollar Code D	(\$30,000-\$74,999) \$40,000-\$99,999	(\$40,000-\$99,999) \$48,000-\$119,999
	Dollar Code E	(\$75,000) \$100,000 and up	(\$100,000) \$120,000 and up

[Statutory Authority: RCW 42.17A.110. WSR 12-03-002, § 390-24-301, filed 1/4/12, effective 2/4/12. Statutory Authority: RCW 42.17.370(1). WSR 08-01-070, § 390-24-301, filed 12/14/07, effective 1/14/08. Statutory Authority: RCW 42.17.370 (1) and (11) and 42.17.241 (1)(n). WSR 97-23-020, § 390-24-301, filed 11/10/97, effective 1/1/98.]

Refer to instruction manual for detailed assistance and examples.

Deadlines: Incumbent elected and appointed officials -- by April 15.
Candidates and others -- within two weeks of becoming a candidate or being newly appointed to a position.

SEND REPORT TO PUBLIC DISCLOSURE COMMISSION

DOLLAR CODE	AMOUNT
A	\$1 to \$4,499
B	\$4,500 to \$23,999
C	\$24,000 to \$47,999
D	\$48,000 to \$119,999
E	\$120,000 or more

R
E
C
E
I
V
E
D

Last Name	First	Middle Initial
Mailing Address (Use PO Box or Work Address) *		
City	County	Zip + 4

Names of immediate family members, including registered domestic partner. If there is no reportable information to disclose for dependent children, or other dependents living in your household, do not identify them. Do identify your spouse or registered domestic partner. See F-1 manual for details.

Filing Status (Check only one box.)

An elected or state appointed official filing annual report

Final report as an elected official. Term expired: _____

Candidate running in an election: month _____ year _____

Newly appointed to an elective office

Newly appointed to a state appointive office

Professional staff of the Governor's Office and the Legislature

Office Held or Sought

Office title: _____

County, city, district or agency of the office, name and number: _____

Position number: _____

Term begins: _____ ends: _____

1 INCOME List each employer, or other source of income (pension, social security, legal judgment, etc.) from which you or a family member, including registered domestic partner, received \$2,400 or more during the period. Include stock options received during the reporting period that had a value of \$2,400 or more. (Report interest and dividends in Item 3.)

Show Self (S) Spouse (SP/DP) Dependent (D)	Name and Address of Employer or Source of Compensation	Occupation or How Compensation Was Earned	Amount: (Use Code)

Check Here if continued on attached sheet

2 REAL ESTATE List street address, assessor's parcel number, or legal description AND county for each parcel of Washington real estate with value of over \$12,000 in which you or a family member, including registered domestic partner, held a personal financial interest during the reporting period. (Show partnership, company, etc. real estate on F-1 supplement.)

Property Sold or Interest Divested	Assessed Value (Use Code)	Name and Address of Purchaser	Nature and Amount (Use Code) of Payment or Consideration Received		
Property Purchased or Interest Acquired		Creditor's Name/Address	Payment Terms	Security Given	Mortgage Amount - (Use Code) Original Current
All Other Property Entirely or Partially Owned					

Check here if continued on attached sheet

3 ASSETS / INVESTMENTS - INTEREST / DIVIDENDS

List bank and savings accounts, insurance policies, stock, bonds and other intangible property (including but not limited to stock options) held during the reporting period.

A. Name and address of each bank or financial institution in which you, a family member, including registered domestic partner, had an account over \$24,000 any time during the report period.	Type of Account or Description of Asset	Asset Value (Use Code)	Income Amount (Use Code)
B. Name and address of each insurance company where you, a family member, including registered domestic partner, had a policy with a cash or loan value over \$24,000 during the period.			
C. Name and address of each company, association, government agency, etc. in which you, a family member, including registered domestic partner, owned or had a financial interest worth over \$2,400. Include stocks, bonds, ownership, retirement plan, IRA, notes, stock options, and other intangible property. If you, your spouse, registered domestic partner and/or dependents had decision making authority regarding individual assets/investments list each asset or investment, the value and any income amount. EXAMPLE: If you self-directed an investment account identify each stock or other asset in that account.			

Check here if continued on attached sheet.

4 CREDITORS

List each creditor you or a family member, including registered domestic partner, owed \$2,400 or more any time during the period. Don't include retail charge accounts, credit cards, or mortgages or real estate reported in Item 2.

Creditor's Name and Address	Terms of Payment	Security Given	AMOUNT (USE CODE)	
			Original	Present
Check here <input type="checkbox"/> if continued on attached sheet.				

5 All filers answer questions A thru D below. If the answer is YES to any of these questions, the F-1 Supplement must also be completed as part of this report. If all answers are NO and you are a candidate for state or local office, an appointee to a vacant elective office, or a state executive officer filing your initial report, no F-1 Supplement is required.

Incumbent elected officials and state executive officers filing an annual financial affairs report also must answer question E. An F-1 Supplement is required of these officeholders unless all answers to questions A thru E are NO.

- A. At any time during the reporting period were you, your spouse, registered domestic partner or dependents (1) an officer, director, general partner or trustee of any corporation, company, union, association, joint venture or other entity or (2) a partner or member of any limited partnership, limited liability partnership, limited liability company or similar entity including but not limited to a professional limited liability company? ____ If yes, complete Supplement, Part A.
- B. Did you, your spouse, registered domestic partner or dependents have an ownership of 10% or more in any company, corporation, partnership, joint venture or other business at any time during the reporting period? ____ If yes, complete Supplement, Part A.
- C. Did you, your spouse, registered domestic partner or dependents own a business at any time during the reporting period? ____ If yes, complete Supplement, Part A.
- D. Did you, your spouse, registered domestic partner or dependents prepare, promote or oppose state legislation, rules, rates or standards for compensation or deferred compensation (other than pay for a currently-held public office) at any time during the reporting period? ____ If yes, complete Supplement, Part B.
- E. **Only for Persons Filing Annual Report.** Regarding the receipt of items not provided or paid for by your governmental agency during the previous calendar year: 1) Did you, your spouse, registered domestic partner or dependents (or any combination thereof) accept a gift of food or beverages costing over \$50 per occasion? ____ or 2) Did any source other than your governmental agency provide or pay in whole or in part for you, your spouse, registered domestic partner and/or dependents to travel or to attend a seminar or other training? ____ If yes to either or both questions, complete Supplement, Part C.

ALL FILERS EXCEPT CANDIDATES. Check the appropriate box.

I hold a state elected office, am an executive state officer or professional staff. I have read and am familiar with RCW 42.52.180 regarding the use of public resources in campaigns.

I hold a local elected office. I have read and am familiar with RCW 42.17A.555 regarding the use of public facilities in campaigns.

***CANDIDATES:** Do not use public agency addresses or telephone numbers for contact information.

CERTIFICATION: I certify under penalty of perjury that the information contained in this report is true and correct to the best of my knowledge.

Signature _____ Date _____

Contact Telephone: () *

Email: _____ (work) *

Email: _____ (Home) Optional

PROVIDE INFORMATION FOR YOURSELF, SPOUSE, REGISTERED DOMESTIC PARTNER, DEPENDENT CHILDREN AND OTHER DEPENDENTS IN YOUR HOUSEHOLD

Last Name	First	Middle Initial	DATE
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- A OFFICE HELD, BUSINESS INTERESTS:** Provide the following information if, during the reporting period, you, your spouse, registered domestic partner or dependents
- (1) were an officer, director, general partner, trustee, or 10 percent or more owner of a corporation, non-profit organization, union, partnership, joint venture or other entity; and/or
 - (2) were a partner or member of a limited partnership, limited liability partnership, limited liability company or similar entity, including but not limited to a professional limited liability company.
- Legal Name: Report name used on legal documents establishing the entity.
 - Trade or Operating Name: Report name used for business purposes if different from the legal name.
 - Position or Percent of Ownership: The office, title and/or percent of ownership held.
 - Brief Description of the Business/Organization: Report the purpose, product(s), and/or the service(s) rendered.
 - Payments from Governmental Unit: If the governmental unit in which you hold or seek office made payments to the business entity concerning which you're reporting, show the purpose of each payment and the actual amount received.
 - Payments from Business Customers and Other Government Agencies: List each corporation, partnership, joint venture, sole proprietorship, union, association, business or other commercial entity and each government agency (other than the one you seek/hold office) which paid compensation of **\$12,000** or more during the period to the entity. Briefly say what property, goods, services or other consideration was given or performed for the compensation.
 - Washington Real Estate: Identify real estate owned by the business entity if the qualifications referenced below are met.

ENTITY NO. 1 Reporting For: Self Spouse
 Registered Domestic Partner Dependent

LEGAL NAME: POSITION OR PERCENT OF OWNERSHIP

TRADE OR OPERATING NAME:

ADDRESS:

BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:

PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE:
 Purpose of payments Amount (actual dollars)
 \$

PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF **\$12,000** OR MORE:
 Agency name: Purpose of payment (amount not required)

PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF **\$12,000** OR MORE
 Customer name: Purpose of payment (amount not required)

WASHINGTON REAL ESTATE IN WHICH ENTITY HELD A DIRECT FINANCIAL INTEREST (Complete only if ownership in the ENTITY is 10% or more and assessed value of property is over **\$24,000**. List street address, assessor parcel number, or legal description and county for each parcel):

Check here if continued on attached sheet

CONTINUE PARTS B AND C ON NEXT PAGE

Name

ENTITY NO. 2

Reporting For: Self Spouse

Registered Domestic Partner Dependent

LEGAL NAME:

POSITION OR PERCENT OF OWNERSHIP

TRADE OR OPERATING NAME:

ADDRESS:

BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:

PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE:

Purpose of payments

Amount (actual dollars)

\$

PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE:

Agency name:

Purpose of payment (amount not required)

PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE

Customer name:

Purpose of payment (amount not required)

WASHINGTON REAL ESTATE IN WHICH ENTITY HELD A DIRECT FINANCIAL INTEREST (Complete only if ownership in the ENTITY is 10% or more and assessed value of property is over \$24,000. List street address, assessor parcel number, or legal description and county for each parcel):

Check here if continued on attached sheet

B LOBBYING: List persons for whom you, or any immediate family member, including registered domestic partner, lobbied or prepared state legislation or state rules, rates, or standards for compensation or deferred compensation. Do not list pay from government body in which you are an elected official or professional staff member.

Person to Whom Services Rendered	Description of Legislation, Rules, Etc.	Compensation (Use Code)
Check here <input type="checkbox"/> if continued on attached sheet		

C FOOD TRAVEL SEMINARS Complete this section if a source other than your own governmental agency paid for or otherwise provided all or a portion of the following items to you, your spouse, registered domestic partner or dependents, or a combination thereof: 1) Food and beverages costing over \$50 per occasion; 2) Travel occasions; or 3) Seminars, educational programs or other training.

Date Received	Donor's Name, City and State	Brief Description	Actual Dollar Amount	Value (Use Code)
			\$	
Check here <input type="checkbox"/> if continued on attached sheet				

Information Continued

F-1 Supplement

Name

ENTITY NO.

Reporting For: Self Spouse

Registered Domestic Partner Dependent

LEGAL NAME:

POSITION OR PERCENT OF OWNERSHIP

TRADE OR OPERATING NAME:

ADDRESS:

BRIEF DESCRIPTION OF THE BUSINESS/ORGANIZATION:

PAYMENTS ENTITY RECEIVED FROM GOVERNMENTAL UNIT IN WHICH YOU SEEK/HOLD OFFICE:

Purpose of payments

Amount (actual dollars)

\$

PAYMENTS ENTITY RECEIVED FROM OTHER GOVERNMENT AGENCIES OF \$12,000 OR MORE:

Agency name:

Purpose of payment (amount not required)

PAYMENTS ENTITY RECEIVED FROM BUSINESS CUSTOMERS OF \$12,000 OR MORE

Customer name:

Purpose of payment (amount not required)

WASHINGTON REAL ESTATE IN WHICH ENTITY HELD A DIRECT FINANCIAL INTEREST (Complete only if ownership in the ENTITY is 10% or more and assessed value of property is over \$24,000. List street address, assessor parcel number, or legal description and county for each parcel):

B LOBBYING: (Continued)

Person to Whom Services Rendered	Description of Legislation, Rules, Etc.	Compensation (Use Code)

C FOOD TRAVEL SEMINARS (continued)

Date Received	Donor's Name, City and State	Brief Description	Actual Dollar Amount	Value (Use Code)
			\$	

PUBLIC DISCLOSURE COMMISSION

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

PDC FORM
F-1A
 (11/14)

PERSONAL FINANCIAL AFFAIRS STATEMENT
 Short Form

P M PDC OFFICE USE
 O A
 S R
 T K

The F-1A form is designed to simplify reporting for persons who have no changes or only minor changes to an F-1 report previously filed.
A complete F-1 form must be filed at least every four years; an F-1A form may be used for no more than three consecutive reports.
Deadlines: Incumbent elected and appointed officials -- by April 15.
 Candidates and others -- within two weeks of becoming a candidate or being newly appointed to a position.

DOLLAR CODE	AMOUNT
A	\$1 to \$4,499
B	\$4,500 to \$23,999
C	\$24,000 to \$47,999
D	\$48,000 to \$119,999
E	\$120,000 or more

R
E
C
E
I
V
E
D

Last Name _____ First _____ Middle Initial _____

Mailing Address (Use PO Box or Work Address) * _____

City _____ County _____ Zip + 4 _____

Names of immediate family members, including registered domestic partner. If there is no reportable information to disclose for dependent children, or other dependents living in your household, do not identify them. Do identify your spouse or registered domestic partner. See F-1 manual for details.

Filing Status (Check only one box.)

An elected or state appointed official filing annual report

Final report as an elected official. Term expired: _____

Candidate running in an election: month _____ year _____

Newly appointed to an elective office

Newly appointed to a state appointive office

Professional staff of the Governor's Office and the Legislature

Office Held or Sought

Office title: _____

County, city, district or agency of the office, name and number: _____

Position number: _____

Term begins: _____ ends: _____

Select either "No Change Report" or "Minor Change Report," whichever reflects your situation. Supply all the requested information.

NO CHANGE REPORT. I have reviewed my last complete F-1 report dated _____ and F-1A reports (if any) dated (1) _____ and (2) _____. The information disclosed on those reports is accurate for the current reporting period.

MINOR CHANGES REPORT. I have reviewed my last complete F-1 report dated _____. The changes listed below have occurred during the reporting period. Specify F-1 Form Item numbers and describe changes. Provide all information required on F-1 report.

Check here if continued on attached sheet

FOOD TRAVEL SEMINARS Complete this section if a source other than your own governmental agency paid for or otherwise provided all or a portion of the following items to you, your spouse, registered domestic partner or dependents, or a combination thereof: 1) Food and beverages costing over \$50 per occasion; 2) Travel occasions; or 3) Seminars, educational programs or other training.

Date Received	Donor's Name, City and State	Brief Description	Actual Dollar Amount	Value (Use Code)
Check here <input type="checkbox"/> if continued on attached sheet				

ALL FILERS EXCEPT CANDIDATES. Check the appropriate box.

I hold a state elected office, am an executive state officer or professional staff. I have read and am familiar with RCW 42.52.180 regarding the use of public resources in campaigns.

I hold a local elected office. I have read and am familiar with RCW 42.17A.555 regarding the use of public facilities in campaigns.

***CANDIDATES:** Do not use public agency addresses or telephone numbers for contact information

CERTIFICATION: I certify under penalty of perjury that the information contained in this report is true and correct to the best of my knowledge.

Signature _____ Date _____

Contact Telephone: () * _____

Email: _____ (work) *

Email: _____ (Home) Optional

Information Continued

F-1A

Name

Select either "No Change Report" or "Minor Change Report," whichever reflects your situation. Supply all the requested information.

- NO CHANGE REPORT.** I have reviewed my last complete F-1 report dated _____ and F-1A reports (if any) dated (1) _____ and (2) _____. The information disclosed on those reports is accurate for the current reporting period.
- MINOR CHANGES REPORT.** I have reviewed my last complete F-1 report dated _____. The changes listed below have occurred during the reporting period. Specify F-1 Form Item numbers and describe changes. Provide all information required on F-1 report.

**FOOD
TRAVEL
SEMINARS** (Continued)

Date Received	Donor's Name, City and State	Brief Description	Actual Dollar Amount	Value (Use Code)
			\$	

WAC 390-24-202 Report of compensation from sales commissions.

When a person receives compensation in the form of a commission on sales, the reporting of the compensation, required in RCW 42.17A.710, shall include:

(1) The name and address of the person or persons through whom a commission was paid;

(2) For purposes of RCW 42.17A.710 (1)(f), the name and address of each person (other than an individual) for whom a service was rendered or to whom a product was sold that resulted in a commission of ~~(((\$2,000))~~ \$2,400 or more in the aggregate;

(3) For purposes of RCW 42.17A.710 (1)(g)(i), the name and address of each governmental unit for whom a service was rendered or to whom a product was sold that resulted in a commission;

(4) For purposes of RCW 42.17A.710 (1)(g)(ii), the name and address of each person (other than an individual) for whom a service was rendered or to whom a product was sold that resulted in a commission of ~~(((\$10,000))~~ \$12,000 or more in the aggregate.

[Statutory Authority: RCW 42.17A.110. WSR 12-03-002, § 390-24-202, filed 1/4/12, effective 2/4/12. Statutory Authority: RCW 42.17.370(1). WSR 08-01-070, § 390-24-202, filed 12/14/07, effective 1/14/08. Statu-

tory Authority: RCW 42.17.370. WSR 92-08-105, § 390-24-202, filed
4/1/92, effective 5/2/92.]



PUBLIC DISCLOSURE COMMISSION

711 Capitol Way Rm. 206, PO Box 40908 • Olympia, Washington 98504-0908 • (360) 753-1111 • FAX (360) 753-1112
Toll Free 1-877-601-2828 • E-mail: pdc@pdc.wa.gov • Website: www.pdc.wa.gov

To: Members, Washington State Public Disclosure Commission
From: Lori Anderson, Communications & Training Officer
Date: July 17, 2014
Re: July 24, 2014 Meeting – Continued Rule Making Related to the F-1 Review

AGENDA ITEM

The Commission is scheduled to review its Personal Financial Affairs Statement (F-1)-related rule-making activity and consider approving draft language for an additional potential rule amendment.

BACKGROUND

Inflationary Adjustments

In June, the Commission began the process of making inflationary adjustments to the F-1 dollar amounts of reporting thresholds and code values as recommended by stakeholders and staff. At this point, the next step in the process is to hold a public hearing on the four rule amendments.

Adjustments to the F-1 dollar amounts have implications for certain major contributor and lobbyist employer reporting requirements. The major contributors' and lobbyist employers' disclosure requirements set out at RCWs 42.17A.630 apply the F-1 dollar ranges (Codes A through E) and current \$2,000 compensation disclosure threshold to major contributors and lobbyist employers who pay compensation to state officials and/or their immediate family members. Consequently, to fully implement the adjusted F-1 dollar amounts, additional rule making is needed to adjust these same amounts where they appear in WAC 390-16-071 Annual report of major contributors and persons making independent expenditures (PDC Form C-7) and WAC 390-20-110 Lobbyist employer's report form (PDC Form L-3).

Staff has prepared proposed draft amendments to WACs 390-16-071 and 39-20-110 for your review. The amendments import the proposed F-1 dollar amount adjustments into the relevant sections of the C-7 and L-3 forms.

Definition of "Officer"

In October 2012, the Commission approved draft language for new WAC 390-24-150 Definition – Officer. The draft language proposes converting to rule Interpretive Statement 91-01, which defines who is an "officer" for the purposes of the RCW 42.17A.710(1)(g) and WAC 390-24-010 [the F-1 Supplement]. At that time, Commissioner Degginger noted that additional

terms on the F-1 form also could be better clarified, which became the impetus for further F-1-related discussion during the Commission's 2013 retreat and the resulting F-1 review. Staff has waited to schedule a hearing for the Commission to consider adopting new WAC 390-24-150 until it was known whether other rule making would result from the review. Relevant meeting minutes and the approved draft language are attached.

COMMISSION ACTION

Staff is requesting that the Commission approve the proposed draft language to amend WAC 390-16-071 Annual report of major contributors and persons making independent expenditures and WAC 390-20-110 Forms for lobbyist employers report.

All approved drafts will be filed with the Code Reviser and noted for hearing in September. In addition to the draft language considered at the July 24, 2014 meeting, the package will include previously approved draft language for:

- proposed new WAC 390-24-150 Definition of Officer; and amendments to:
- WAC 390-24-010 Forms for statement of financial affairs [F-1];
- WAC 390-24-020 Forms for amending statement of financial affairs [F-1A];
- WAC 390-24-202 Report of compensation from sales commissions; and
- WAC 390-24-301 Changes in dollar amounts of reporting thresholds and code values.

Attachments: October 25, 2012 Commission meeting minutes excerpt and approved draft language for proposed new WAC 390-24-150
Draft language for proposed amendments to WACs 390-16-071 and 390-20-110

schedule a hearing in 2013.

Motion 12-89

Moved by Commissioner Sehlin, seconded by Commissioner Degginger that:

The Commission adopt amended emergency rule WAC 390-05-400 as proposed and move forward with permanent rule making.

The motion passed unanimously.

- Discussion and possible approval of draft language for new WAC 390-24-150 Definition – Officer

Ms. Anderson presented draft rule language to clarify the meaning and use of the term “officer” for purposes of Personal Financial Affairs (F-1) filing requirements.

The definition of officer is currently in Interpretation 91-01. As a result of review of all Interpretations as part of the recodification of RCW 42.17, and the Administrative Procedure Act encouragement to move long-standing interpretations into rules, staff recommended moving this interpretation into a rule.

Staff asked the Commission to approve the draft language as presented. A public hearing will be scheduled.

Commissioner Degginger noted that there may be some additional terms on the F-1 form that would benefit from clarification and that he would discuss those with staff at another time.

Motion 12-90

Moved by Commissioner Sehlin, seconded by Commissioner Degginger that:

The Commission approve the draft rule language as proposed by staff.

The motion passed unanimously.

- Discussion and possible approval of draft language for new enforcement rule in WAC 390-37 Factors relevant to penalty assessments, including aggravating/mitigating circumstances.

Nancy Krier continued the discussion from the September Commission meeting regarding penalty authority. The Commission continued to look at memorializing some factors used when assessing penalties.

Ms. Krier presented a list of mitigating and aggravating factors used by other agencies for comparison. She also summarized the current Commission practice for brief and full adjudicative proceedings.

Ms. Krier presented two possible approaches for a new rule for the Commission’s consideration, draft

WAC 390-24-150 Definition – Officer.

(1) For the purposes of RCW 42.17A.710(1)(g) and WAC 390-24-010, the term “officer” means and includes:

- (a) president, vice-president, secretary, treasurer, or some derivation thereof;
- (b) one who holds a corporate office, or
- (c) an individual who holds a position described as an officer in a corporation’s bylaws or who is appointed by the board of directors in accordance with the bylaws.

(2) An individual who has been given the title of “officer” to denote a managerial job classification is not an officer for the purposes of RCW 42.17A.710(1)(g) and WAC 390-24-010.

WAC 390-20-110 Forms for lobbyist employers report. The official form for statement by employers of registered lobbyists as required by RCW 42.17.180 is designated "L-3," revised ~~((1/09))~~ 11/14. Copies of this form are available on the commission's website, www.pdc.wa.gov, and at the Commission Office 711 Capitol Way, Room 206, Evergreen Plaza Building, PO Box 40908, Olympia, Washington, 98504-0908. Any paper attachments shall be on 8-1/2" x 11" white paper.

PUBLIC DISCLOSURE COMMISSION

711 CAPITOL WAY RM 206
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(360) 753-1111
TOLL FREE 1-877-601-2828

Employer's Lobbying Expenses

L3

11/14

THIS SPACE FOR OFFICE USE

1. Employer's Name (Use complete company, association, union or entity name.)

Attention (Identify person to whom inquiries about the information below should be directed; NOT the lobbyist.)

Mailing Address Telephone

() -

City State Zip + 4 E-Mail Address

THIS REPORT MUST BE FILED BY THE LAST DAY OF FEBRUARY. Include expenditures made and accrued during the previous calendar year for lobbying the Washington State Legislature and/or any state agency. Complete all sections. Use "none" or "0" when applicable.

2. Identify each of your lobbyists/lobbying firms below. **In column 1**, show the full amount of salary or fee each earned for lobbying. **In column 2**, show the full amount paid (plus obligated) for other lobbying related expenses that were made by or through the lobbyist and reported by the lobbyist on the monthly L-2 report (e.g., contributions to legislative candidates, reimbursement for entertainment expenses, etc.). Compute the subtotals across and down the columns; put the grand total of expenses incurred by or through lobbyists in the space designated.

Names of Registered Lobbyists (if payments were to lobbying firm, list firm name)	Col 1-Salary	Col 2-Other	Total Amount
	\$	\$	\$
Total From Attached Page			
Total Expenses By or Through Lobbyists			\$

Information continued on attached pages

DO NOT INCLUDE EXPENDITURES ALREADY ACCOUNTED FOR IN ITEM 2 ABOVE when completing Items 3 through 7 below.

3. Other expenditures made by the employer for lobbying purposes. **Show total expenditures made/accrued:**

- a. to vendors on behalf of or in support of registered lobbyists (e.g., entertainment credit card purchases); \$
- b. to or on behalf of expert witnesses or others retained to provide lobbying services who offer specialized knowledge or expertise that assists the employer's lobbying effort; _____
- c. for entertainment, tickets, passes, travel expenses (e.g., transportation, meals, lodging, etc.) and enrollment or course fees provided to legislators, state officials, state employees and members of their immediate families; (Also complete Item 9.) _____
- d. for composing, designing, producing and distributing informational materials for use primarily to influence legislation; and _____
- e. for grass roots lobbying expenses, including those previously reported by employer on Form L-6, and payments for lobbying communications to clients/customers (other than to corporate stockholders and members of an organization or union). _____

4. Political contributions to candidates for legislative or statewide executive office, committees supporting or opposing these candidates, or committees supporting or opposing statewide ballot measures. (Also complete Item 10.)

- a. Contributions made directly by the employer, including those previously reported on PDC Form L-3c. _____
- b. If contributions were made by a political committee associated, affiliated or sponsored by the employer, show the PAC name below. (Information reported by the PAC on C-4 reports need not be again included as part of this L-3 report.) _____

Name of PAC _____

5. Independent expenditures supporting or opposing a candidate for legislative or statewide executive office or a statewide ballot measure. (Also complete Item 11.) _____

6. Expenditures to or on behalf of legislators, state officials, or their spouse, registered domestic partner and dependents for the purpose of influencing, honoring or benefiting the legislator or official. (Normal course of business payments are not reportable.) (Also complete Item 14.) _____

7. Other lobbying-related expenditures, whether through or on behalf of a registered lobbyist. Attach list itemizing each expense (i.e., show date, recipient, purpose and amount). Do not include payments accounted for above. _____

Total Lobbying Expenses \$

(Items 2 thru 7)

8. This report must be certified by the president, secretary-treasurer or similar office of lobbying employer.

<p>Certification: I certify that this report is true, complete and correct to the best of my knowledge.</p> <p>Printed Name and Title of Officer:</p>	<p>Signature of Employer Officer Date</p>
--	--

Employer's Name	Year report covers:
-----------------	---------------------

9. Entertainment, tickets, passes, travel expenses (including transportation, meals, lodging, etc.) and enrollment or course fees provided to legislators, state officials, state employees and members of their immediate families. See instruction manual for details.

Name and Title	Cost or Value	Date and Description of Expense
	\$	

Information continued on attached pages

10. Contributions (not reported by the lobbyist) totaling over \$25 to a legislative or statewide executive office candidate, a committee formed to support or oppose one of these candidates or a committee supporting or opposing a statewide ballot measure. Do not list employer-affiliated PAC contributions.

Name of Recipient	Amount	Date (and, if In-Kind, Description)
	\$	

Information continued on attached pages

11. Independent expenditures in support of or opposition to a) a legislative or statewide executive office candidate or b) a statewide ballot proposition.
See instruction manual for definition of "independent expenditure."

Candidate's Name, Office Sought & Party or Ballot Proposition Number & Brief Description	Amount	Date and Description of Expense (Note if Support or Oppose)
	\$	

Information continued on attached pages

12. Compensation of \$2,400 or more during the preceding calendar year for employment or professional services paid to state elected officials, successful candidates for state office and each member of their immediate family.

Name	Relationship to Candidate or Elected Official if Member of Family	Amount (Code)**	Description of Consideration or Services Exchanged for Compensation

Information continued on attached pages

13. Compensation of \$2,400 or more during the preceding calendar year for professional services paid to any corporation, partnership, joint venture, association or other entity in which state elected official, successful state candidate or member of their immediate family hold office, partnership, directorship or ownership interest of 10% or more.

Firm Name	Person's Name	Amount (Code)**	Description of Consideration or Services Exchanged for Compensation

Information continued on attached pages

14. Any expenditure, not otherwise reported, made directly or indirectly to a state elected official, successful candidate for state office or member of their immediate family, if made to honor, influence or benefit the person because of his or her official position.

Name	Amount	Date and Purpose
	\$	

Information continued on attached pages

<p>**DOLLAR</p> <p>CODE AMOUNT</p> <p>A - \$1 to \$4,499</p> <p>B - \$4,500 to \$23,999</p> <p>C - \$24,000 to \$47,999</p>	<p>**DOLLAR</p> <p>CODE AMOUNT</p> <p>D - \$48,000 to \$119,999</p> <p>E - \$120,000 or more</p>
--	---

INFORMATION CONTINUED

(Use this page if you need additional space for Items 10 or 11)

L3

Employer's Name

Year report covers:

10. Contributions

Name of Recipient

Amount

Date (and, if In-Kind, Description)

\$

11. Independent expenditures

Candidate's Name, Office Sought & Party or
Ballot Proposition Number & Brief Description

Amount

Date and Description of Expense
(Note if Support or Oppose)

\$

INFORMATION CONTINUED

(Use this page if you need additional space for Items 12 thru 14)

L3

Employer's Name		Year report covers:	
12. Compensation of \$2,400 or more for employment, etc.			
Name	Relationship to Candidate or Elected Official if Member of Family	Amount (Code)**	Description of Consideration or Services Exchanged for Compensation
13. Compensation of \$2,400 or more for professional services			
Firm Name	Person's Name	Amount (Code)**	Description of Consideration or Services Exchanged for Compensation
14. Any expenditure not otherwise reported			
Name	Amount	Date and Purpose	
	\$		

****DOLLAR**
CODE AMOUNT

- A - \$1 to \$4,499
- B - \$4,500 to \$23,999
- C - \$24,000 to \$47,999

****DOLLAR**
CODE AMOUNT

- D - \$48,000 to \$119,999
- E - \$120,000 or more

WAC 390-16-071 Annual report of major contributors and persons

making independent expenditures. (1) Any person, other than an individual (a) who made contributions to state office candidates and statewide ballot proposition committees totaling more than the aggregate amount during the preceding calendar year for contributions referenced in WAC 390-05-400, code section .180(1), or (b) who made independent expenditures regarding state office candidates and statewide ballot propositions totaling more than the aggregate amount during the preceding calendar year for independent expenditures referenced in WAC 390-05-400, code section .180(1), shall file with the commission an annual report required pursuant to RCW 42.17A.630. This report shall not be required of a lobbyist employer filing an annual L-3 report pursuant to RCW 42.17A.630 or of a candidate's authorized committee or a political committee provided the information has been properly reported pursuant to RCW 42.17A.235 and 42.17A.240.

(2) The report is entitled "Special Political Expenditures" and is designated "C-7" revised ~~((12/08))~~ 11/14. Copies of this form are available on the Commission's website, www.pdc.wa.gov, and at the Commission Office, Room 206, Evergreen Plaza Building, Olympia, Washington 98504. Any attachments shall be on 8-1/2" x 11" white paper.



PUBLIC DISCLOSURE COMMISSION
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Special Political Expenditures

C7

11/14

PDC OFFICE USE

1. Name (Use complete company, association, union or entity name.)

Attention (Identify person to whom inquiries about the information below should be directed.)

Mailing Address

Telephone

() -

City

State

Zip + 4

THIS REPORT MUST BE FILED BY THE LAST DAY OF FEBRUARY. Disclose all payments or expenditures the reporting entity made and accrued during the previous calendar year for the types of activities described below. Complete all sections. Use "none" or "0" when applicable. Follow the directions on the attached instructions.

Summary of Expenditures

Amount

2. Political contributions to candidates for legislative or statewide executive office, committees supporting or opposing these candidates, or committees supporting or opposing statewide ballot measures. Also complete Item 8.

a. Aggregate contributions made by the filer.

b. If contributions were made by a political committee associated, affiliated or sponsored by the employer, show the PAC name below. (Information reported by the PAC on C-4 reports need not be again included as part of this report.)

Name of PAC _____

3. Independent expenditures supporting or opposing a candidate for legislative or statewide executive office or a statewide ballot measure. Show aggregate amount. Also complete Item 9.

4. Expenditures for entertainment, gifts, tickets, passes, transportation and travel expenses (including meals, lodging and related expenses) provided to legislators, state officials, state employees and members of their immediate families. Show aggregate amount. Also complete Item 10.

5. Expenditures to or on behalf of legislators, state officials, their spouses and dependents for the purpose of influencing, honoring or benefiting the legislator or official. Show aggregate amount. Also complete Item 13.

6. Other expenditures related to lobbying state officials, whether payment is made to, through or on behalf of a registered lobbyist. Attach list itemizing each expense. Show date, recipient, purpose and amount.

7. Total Reportable Expenses

(Items 2 thru 6)

Itemized Expenditures

8. Contributions totaling over \$25 to a legislative or statewide executive office candidate, a committee formed to support or oppose one of these candidates or a committee supporting or opposing a statewide ballot measure.

Name of Recipient

Amount

Date

\$

Information continued on attached pages

9. Independent expenditures in support of or opposition to a) a legislative or statewide executive office candidate or b) a statewide ballot measure. See instructions for definition of "independent expenditure."

Candidate's Name, Office Sought & Party or Ballot Measure & Brief Description	Amount \$	Date and Description of Expense (Note if Support or Oppose)
<input type="checkbox"/> Information continued on attached pages		

10. Entertainment, gifts, tickets, passes, transportation and travel expenses (including meals, lodging and related expenses) provided to legislators, state officials, state employees and members of their immediate families.

Name and Title	Cost or Value \$	Date and Description of Entertainment, Gift or Travel
<input type="checkbox"/> Information continued on attached pages		

11. Compensation of \$2,400 or more during the preceding calendar year for employment or professional services paid to state elected officials, successful candidates for state office and each member of their immediate family.

Name	Relationship to Candidate or Official, if Family Member	Amount (Code)	Description of Consideration or Services Exchanged for Compensation
<input type="checkbox"/> Information continued on attached pages			

12. Compensation of \$2,400 or more during the preceding calendar year for professional services paid to any corporation, partnership, joint venture, association or other entity in which state elected official, successful state candidate or member of their immediate family hold office, partnership, directorship or ownership interest of 10% or more.

Firm Name	Person's Name	Amount (Code)	Description of Consideration or Services Exchanged for Compensation
<input type="checkbox"/> Information continued on attached pages			

13. Any expenditure, not otherwise reported, made directly or indirectly to a state elected official, successful candidate for state office or member of their immediate family, if made to honor, influence or benefit the person because of his or her official position.

Name	Amount \$	Date and Description of Expense
<input type="checkbox"/> Information continued on attached pages		

14. This report must be certified by the president, secretary-treasurer or similar officer of reporting entity.

Certification: I certify that this report is true, complete and correct to the best of my knowledge.	Signature of Officer	Date
Printed Name and Title of Officer:		