PUBLIC DISCLOSURE COMMISSION
711 CAPITOL WAY RM 206
PO BOX 40908
OLYMPIA WA 98504-0908
(360) 753-1111
TOLL FREE 1-877-601-2929

LOBBYIST REGISTRATION

L1 (12/14)

THIS SPACE FOR OFFICE USE
DATE FILED PDC
SEP 27 2018

1. Lobbyist Name

David T. Ducharme

Permanent Business Address

4217 Williams Avenue North
Renton, WA 98056

City State Zip

Business Telephone Numbers

Permanent ( )

Temporary ( )

Cell Phone (206) 369-0440
or Pager

2. Temporary Thurston County address during legislative session

E-Mail Address

david@ducharmeinc.com

3. Employer's name and address (person or group for which you lobby)

Washington Oil Marketers Association

Employer's occupation, business or description of purpose of organization

Fuel Supplier Trade Association

4. Name and address of person having custody of accounts, receipts, books or other documents which substantiate lobbyist reports. (Person responsible for producing the lobbyist employer's annual L-3 report.)

Lea N. Wilson
9390 Orchard Avenue SE
Port Orchard, WA 98367

E-Mail Address

lea@waoil.org

5. What is your pay (compensation) for lobbying?

$ _5717.00_____ per ____month_____
(hour, day, month, year)

Other: Explain:

Description of employment (check one or more boxes)

- ☐ Full time employee
- ☐ Part time or temporary employee
- ☒ Contractor, retainer or similar agreement
- ☐ Unsalaried officer or member of group
- ☒ Sole duty is lobbying
- ☐ Lobbying is only a part of other duties

6. Are you reimbursed for lobbying expenses? Explain which expenses.

- ☐ Yes: $ _____ per _____
- ☒ Yes: I am reimbursed for expenses.
- ☐ No: I am not reimbursed for expenses.

Does employer pay any of your lobbying expenses directly? If yes, explain which ones.

7. How long do you expect to lobby for this organization?

☒ Permanent lobbyist ☐ Only during legislative session ☐ Other, Explain:

8. Is your employer a business or trade association or organization which lobbies on behalf of its members or a representative entity which lobbies on behalf of businesses, groups, associations, or organizations? If "yes," attach a list showing the name and address of each member or funder who has paid fees, dues or other payments over $1,450 during either of the past two years or is expected to pay over $1,450 this year.

- ☐ No
- ☑ Yes. However, no member or funder has paid, pays, or is expected to pay over $1,450.
- ☐ Yes. The list is of parties attached

9. Does your employer have a connected, related or closely affiliated political action committee which will provide funds for you to make political contributions including purchase tickets to fund raising events? If so, list the name of that political action committee.

- ☐ No
- ☒ Yes. Name of the committee is: WA Oil Marketers Assn PAC

10. If lobbyist is a company, partnership or similar business entity which employs others to perform actual lobbying duties, list name of each person who will lobby. (See WAC 390-20-143 and 144 for instructions.)

11. Areas of interest. Lobbying is most frequent before legislative committee members or state agencies concerned with following subjects:

CODE	SUBJECT	CODE	SUBJECT
01 ☐	Agriculture	09 ☐	Health Care
02 ☒	Business and consumer affairs	10 ☐	Higher education
03 ☐	Constitutions and elections	11 ☐	Human services
04 ☐	Education	12 ☐	Labor
05 ☒	Energy and utilities	13 ☐	Law and justice
06 ☒	Environmental affairs - natural resources - parks	14 ☐	Local government
		15 ☐	State government
07 ☐	Financial institutions and insurance	16 ☐	Technology
		17 ☒	Transportation
08 ☒	Fiscal	18 ☐	Other - Specify:

Remarks:

Lea N. Wilson 8/27/2018

CERTIFICATION: I hereby certify that the above is a true, complete and correct statement.

12. LOBBYIST'S SIGNATURE DATE
David T. Ducharme 8/14/18

EMPLOYER'S AUTHORIZATION: Confirming the employment authority to lobby described in this registration statement.

EMPLOYER'S SIGNATURE, NAME TYPED OR PRINTED, AND TITLE DATE
Lea N. Wilson – Executive Director