PUBLIC DISCLOSURE COMMISSION
711 CAPITOL WAY RM 206
PO ROX 40908
OLYMPIA WA 98504-0908
(360) 753-1111

DC Form L-1 (rev 12/14)

## LOBBYIST REGISTRATION

L1

THIS SPACE FOR OFFICE USE

## DATE FILED PDC

TOLL FREE 1-877-601-2929				(12/14)	1	
Lobbyist Name  Mark O. Brown (dba Connections Public Affiars)					DEC 13 2018	
Permanent Business Addross					,	
4627 Prestwick Lane SE				Business Telephone Numbers		
AUCT LIESTMICK FRIIS OC				Permanent (360 )491-0938		
			Temporary (	<b>)</b>		
City St Lacey	ile		Zip		( 360)790-4427	
·	WA		98513	or Pager		
Temporary Thurston County address during legislative session			E-Mail Address			
Employer's name and address (person or group for which you lobby)				Employer's o	ccupation, business or description of	
City of Vancouver Washington, City Hall, Vancouver, WA				purpose of organization  Municipal Government		
				wiumicipal Go	vemment	
Name and address of person having custody of accounts, receipts, books or other documents which substantiate     Inhibits reports (Recommendate).				E-Mail Addres	**	
issorbiat reports. (if a soft responsible for producing the lobbyist employer's annual L-3 report.)						
Kerry Peck City Hall, C	mo, van	WA	98468	Kerry.peck@d	cityofvancouver.us	
5. What is your pay (compensation) for tobbying?		Description of	employment (check one	Of more boxes)		
\$ _8500.00 per month	·	☐ Full time e		,	Sole duty is lobbying	
Other: Explain:		Part time	or temporary employee		Lobbying is only a part	
			Contractor, retainer or similar agreement of other duties  Unsalaried officer or member of group			
6. Are you reimbursed for lobbying expenses? Explain which exp	Does employe	r pay any of your lobbying		atly?		
☐ Yes: \$ per ☐, Yes: I am reImbursed for expenses.			which ones.		•	
No: \ 1 am not reimbursed for expenses.						
7. How long do you expect to lobby for this organization?						
Permanent lobbyist   Only during legislative session  Other, Explain:						
8. Is your employer a hysiness patrode second in						
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 this year, the past two years or is expected to pay over \$1,450 this year.						
No Yes. However, no member or funder has paid own as in approved the						
The first 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:						
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-						
Brian Enslow CdbA Arbuhus LLC)						
11. Areas of interpet Lobbing is market	CUEA	IN DUT				
<ol> <li>Areas of interest. Lobbying is most frequent before legislative or state agencies concerned with following subjects:</li> </ol>	ommittee members	Remarks:				
CODE SUBJECT CODE SUBJI						
02 Business and consumer affairs 10 Dipher	Care education					
04 Education 1307 Labor	n services					
US LI Energy and utilities 13 2 Law ar	nd justice					
resources - parks 15 State government						
Insurance 47/7 Tarrens						
(IRV) Fiero)	Specify:			3		
CERTIFICATION: I hereby certify that the above is a true, complete and correct						
statement.  12. LOBOYIST'S SIGNATURE  12. LOBOYIST'S SIGNATURE  13. LOBOYIST'S SIGNATURE  14. LOBOYIST'S SIGNATURE  15. LOBOYIST'S SIGNATURE  16. LOBOYIST'S SIGNATURE  17. LOBOYIST'S SIGNATURE  17. LOBOYIST'S SIGNATURE  18. LOBOYIST'S SIGNATURE  19. LO			EMPLOYER'S AUTHORIZATION: Confirming the employment authority to lobby described in this registration statement.			
	DATE		SIGNATURE, NAME TY	PED OR PRINT	ED, AND TITLE DATE	
1 1 V W 10/WMU 12/3	110 I	Vais	THE MA	FM I IV	11 1-1-110	