

LOBBYIST REGISTRATION

THIS SPACE FOR OFFICE USE
L1
DATE FILED PDC
JAN 16 2019

1. Lobbyist Name
T.K. Bentler/Public Affairs Associates

Permanent Business Address
5838 Athens Beach Drive, N.W.

City **Olympia** State **WA** Zip **98502**

Business Telephone Numbers
 Permanent ()
 Temporary ()
 Cell Phone (360) **789-1176**
 or Pager
 E-Mail Address
tkbentler@comcast.net

2. Temporary Thurston County address during legislative session

3. Employer's name and address (person or group for which you lobby)
Metro Parks of Tacoma
4702 South 19th Street, Tacoma, WA 98405

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

4. Name and address of person having custody of accounts, receipts, books or other documents which substantiate lobbyist reports.
Shon Sylvia, Executive director (same address as line #3)

5. What is your pay (compensation) for lobbying?
 \$ 49,900 per year (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
 Unsalariated 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 similar organization which lobbies on behalf of its members? If "yes," attach a list showing the name and address of each member who has paid the association fees, dues or other payments over \$500 during either of the past two years or is expected to pay over \$500 this year.
 No Yes. However, no member has paid, pays, or is expected to pay over \$500.
 Yes. The list is 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 390-20-143 and 144 for instructions.)
TK Bentler

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

CODE	SUBJECT	CODE	SUBJECT
01 <input checked="" type="checkbox"/>	Agriculture	08 <input checked="" type="checkbox"/>	Fiscal
02 <input checked="" type="checkbox"/>	Business and consumer affairs	09 <input type="checkbox"/>	Higher education
03 <input checked="" type="checkbox"/>	Constitutions and elections	10 <input type="checkbox"/>	Human services
04 <input checked="" type="checkbox"/>	Education	11 <input checked="" type="checkbox"/>	Labor
05 <input checked="" type="checkbox"/>	Energy and utilities	12 <input checked="" type="checkbox"/>	Law and justice
06 <input checked="" type="checkbox"/>	Environmental affairs - natural resources - parks	13 <input checked="" type="checkbox"/>	Local government
07 <input checked="" type="checkbox"/>	Financial Institutions and Insurance	14 <input checked="" type="checkbox"/>	State government
		15 <input checked="" type="checkbox"/>	Transportation
		16 <input type="checkbox"/>	Other - Specify:

Remarks:

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

12. LOBBYIST'S SIGNATURE **TK Bentler** DATE **12/20/18**

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

EMPLOYER'S SIGNATURE, NAME TYPED OR PRINTED, AND TITLE **Shon Sylvia, Executive Director** DATE **12-20-18**