

LOBBYIST REGISTRATION

DATE FILED PDC
 THIS SPACE FOR OFFICE USE

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(12/03)

MAR 22 2019

1. Lobbyist Name Patrick Boss, Cascade Consulting Group			Business Telephone Numbers Permanent (360) 878-7073 Cell Phone (360) 878-7073	
Permanent Business Address P.O. Box 1940				
City Moses Lake	State WA	Zip 98837	E-Mail Address Boss.Consulting2@gmail.com	
2. Temporary Thurston County address during legislative session			Employer's occupation, business or description of purpose of organization Water Supply Coalition	
3. Employer's name and address (person or group for which you lobby) North I-90 Odessa Aquifer Groundwater Replacement Project 1485 N. Hoffman Rd., Ritzville, WA 99169				

4. Name and address of person having custody of accounts, receipts, books or other documents which substantiate lobbyist reports. (Person responsible for producing the annual L3 report) John Stahl, North I-90 Odessa Aquifer Groundwater Replacement Project, 1485 N. Hoffman Rd, Ritzville, WA 99169			E-Mail Address n.i90.odessa.aquifer.project@gmail.com	
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5. What is your pay (compensation) for lobbying? \$ 1,500 per month		Description of employment (check one or more boxes) <input type="checkbox"/> Full time employee <input type="checkbox"/> Part time or temporary employee <input type="checkbox"/> Contractor, retainer or similar agreement <input type="checkbox"/> Unsalaries officer or member of group <input checked="" type="checkbox"/> Sole duty is lobbying <input type="checkbox"/> Lobbying is only a part of other duties		
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6. Are you reimbursed for lobbying expenses? Explain which expenses. <input type="checkbox"/> Yes: \$ _____ per _____ <input type="checkbox"/> Yes: I am reimbursed for expenses. <input checked="" type="checkbox"/> No: I am not reimbursed for expenses.		Does employer pay any of your lobbying expenses directly? No. If yes, explain which ones.		
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7. How long do you expect to lobby for this organization? <input type="checkbox"/> Permanent lobbyist <input checked="" type="checkbox"/> Only during legislative session <input type="checkbox"/> Other, Explain:				
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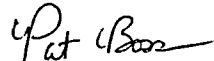
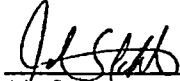
8. Is your employer a business or trade association or similar organization which lobbies on behalf of its members? If "yes," attach a list showing the name and address of each member who has paid the association fees, dues or other payments over \$500 during either of the past two years or is expected to pay over \$500 this year. <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. However, no member has paid, pays, or is expected to pay over \$500. <input type="checkbox"/> Yes. The list is attached				
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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. <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Name of the committee is:				
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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.)				
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11. Areas of interest. Lobbying is most frequent before legislative committee members or state agencies concerned with following subjects.			Remarks:	
CODE SUBJECT 01 <input checked="" type="checkbox"/> Agriculture 02 <input type="checkbox"/> Business and consumer affairs 03 <input type="checkbox"/> Constitutions and elections 04 <input type="checkbox"/> Education 05 <input type="checkbox"/> Energy and utilities 06 <input checked="" type="checkbox"/> Environmental affairs - natural resources - parks 07 <input type="checkbox"/> Financial institutions and insurance 08 <input type="checkbox"/> Fiscal	CODE SUBJECT 09 <input type="checkbox"/> Higher education 10 <input type="checkbox"/> Human services 11 <input type="checkbox"/> Labor 12 <input type="checkbox"/> Law and justice 13 <input type="checkbox"/> Local government 14 <input type="checkbox"/> State government 15 <input type="checkbox"/> Transportation 16 <input type="checkbox"/> Other - Specify:			

CERTIFICATION: I hereby certify that the above is a true, complete and correct statement.		EMPLOYER'S AUTHORIZATION: Confirming the employment authority to lobby described in this registration statement.		
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12. LOBBYIST'S SIGNATURE 		DATE 3-17-19	EMPLOYER'S SIGNATURE, NAME TYPED OR PRINTED, AND TITLE  John Stahl		DATE March 17, 2019
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Chair
NOT VALID UNLESS SIGNED BY BOTH