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

## LOBBYIST REGISTRATION

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DATE FILE FUE

DEC 2 1 2016

		(12/03)
1. Lobbyist Name		Business Telephone Numbers
Michael Groesch		Permanent (360) 280-7187
Permanent Business Address		Temporary ( )
120 State Ave NE #294		Cell Phone (360 ) 280-7187 or Pager
City State	Zip	E-Mail Address
Olympia WA	98501	michael.groesch@comcast.net
Temporary Thurston County address during legislative session	•	Employer's occupation, business or description of purpose of organization
<ol> <li>Employer's name and address (person or group for which you lobby)</li> <li>Washington Trust for Historic Preservation</li> <li>1204 Minor Ave Seattle WA 98101</li> </ol>		Non profit historic preservation
<ol> <li>Name and address of person having custody of accounts, receipts, books or other do lobbyist reports. (Person responsible for producing the annual L3 report)</li> </ol>	ocuments which substantiate	E-Mail Address
Cathy Wickwire		cwickwire@preservewa.org
1204 Minor Ave Seattle WA 98101		
5. What is your pay (compensation) for lobbying?	Description of employment (check one	or more boxes)
\$2,000.00 perMonth (hour, day, month, year)	Full time employee	X Sole duty is lobbying
Other: Explain:	Part time or temporary employee	Lobbying is only a part
Ottor Explain.	<ul> <li>X Contractor, retainer or similar agree</li> <li>Unsalaried officer or member of gro</li> </ul>	
Are you reimbursed for lobbying expenses? Explain which expenses.	Does employer pay any of your lobbying	•
	If yes, explain which ones.	, coperious un octif .
☐ Yes: \$ per Yes: I am reimbursed for expenses.		
X No: I am not reimbursed for expenses.		,
7. How long do you expect to lobby for this organization?		
X Permanent lobbyist	Other, Explain:	•
Is your employer a business or trade association or similar organization which lobbies	on behalf of its members? If "yes," attac	h 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		
X No	or is expected to pay over \$500.	•
Does your employer have a connected, related or closely affiliated political action com	mittee 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.	inflice which will provide funds for you to	make political contributions including purchase tickers to
X 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 nam	e 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	Remarks:	
or state agencies concerned with following subjects:		
CODE SUBJECT CODE SUBJECT 01 ☐ Agriculture 09 ☐ Higher education		
02 Business and consumer affairs 10 Human services		
03 ☐ Constitutions and elections 11 ☐ Labor 04 ☐ Education 12 ☐ Law and justice		- · · · · · · · · · · · · · · · · · · ·
04 ☐ Education 12 ☐ Law and Justice 05 ☐ Energy and utilities 13 ☐ Local government		
06 ☐ Environmental affairs - natural 14 ☐ State government		
resources - parks 15 Transportation  07  Financial institutions and insurance 16  Other – Specify:		
08 X Fiscal		
CERTIFICATION: I hereby certify that the above is a true, complete and correct	EMPLOYER'S AUTHORIZATION: Confirm	ning the employment authority to lobby described in this
statement.	registration statement.	
12. LOBBYIST'S SIGNATURE DATE	EMPLOYER'S SIGNATURE, NAME T	YPED OR PRINTED, AND TITLE DATE
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