



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

THIS SPACE FOR OFFICE USE
L1
 (12/03)
RECEIVED
FEB 15 2017

1. Lobbyist Name
RON MAIN

Permanent Business Address
216 FIRST AVE SO. # 435

City State Zip
SEATTLE WA 98104

Business Telephone Numbers
 Permanent ()
 Temporary ()
 Cell Phone (**206 619 1992**)
 or Pager

2. Temporary Thurston County address during legislative session

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

E-Mail Address
RMAIN@broadbwnn.washington.gov

3. Employer's name and address (person or group for which you lobby)
City of Seattle 600 4th Ave, 5th Floor

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)

E-Mail Address
Chris Gregorich @ Seattle.Gov

5. What is your pay (compensation) for lobbying?
 \$ **2,500** 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
 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.)

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

Remarks:

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.

12. LOBBYIST'S SIGNATURE
Ronald Main DATE **2/7/2017**

EMPLOYER'S SIGNATURE, NAME TYPED OR PRINTED, AND TITLE
Chris Gregorich DATE **2/13/2017**

NOT VALID UNLESS SIGNED BY BOTH