

DEC 27 2016



December 26, 2016

Washington State Public Disclosure Commission

711 Capitol Way Room 206

PO Box 40908

Olympia, WA 98504-0908

On behalf of Chairman Dr. Michael Marchand and the Colville Business Committee please accept this PDC L-1 Form as confirmation of my representing the Confederated Tribes of the Colville Reservation for the upcoming 2017-18 Legislative Session.

While I am organized as an LLC, the Colville Tribe still pays me as Michael Moran. You may please advise if you wish for me to file as an individual or lobbying firm. I will proceed with electronic filing, but if there are any issues, please let me know.

Again, thank you for your consideration in advance.



Michael M. Moran

# LOBBYIST REGISTRATION

L1

(1/14)

THIS SPACE FOR OFFICE USE  
**DATE FILED PDC**  
  
**DEC 27 2016**

1. Lobbyist Name  
**MICHAEL M. MORAN**

Permanent Business Address  
**MORAN PUBLIC AFFAIRS LLC**  
**120 State Avenue #259**  
**Olympia WA 98501**

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Business Telephone Numbers  
 Permanent ( 360 ) 481-1733  
 Temporary ( )  
 Cell Phone ( )  
 or Pager

2. Temporary Thurston County address during legislative session

E-Mail Address  
 moranpublicaffairs@gmail.com

3. Employer's name and address (person or group for which you lobby)  
**Confederated Tribes of the Colville Reservation PO Box 150 Nespleum WA 98155**

Employer's occupation, business or description of purpose of organization  
**Tribal Government**

4. Name and address of person having custody of accounts, receipts, books or other documents which substantiate lobbyist reports. (Person responsible for producing the lobbyist employer's annual L-3 report.)  
**Alice Kosekla, Office of Reservation Attorney CCT PO Box 150 Nespleum WA 98155**

E-Mail Address  
 Alice.Kosekla@colvilletribes.com

5. What is your pay (compensation) for lobbying?  
 \$ 6,500.00 per month  
 (hour, day, month, year)  
 Other: Explain:

Description of employment (check one or more boxes)

<input type="checkbox"/> Full time employee	<input type="checkbox"/> Sole duty is lobbying
<input type="checkbox"/> Part time or temporary employee	<input type="checkbox"/> Lobbying is only a part of other duties
<input checked="" type="checkbox"/> Contractor, retainer or similar agreement	
<input type="checkbox"/> Unsalariated officer or member of group	

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 organization which lobbies on behalf of its members or a representative entity which lobbies on behalf of businesses, groups, associations, or organizations? If "yes," attach a list showing the name and address of each member or funder (excluding individuals) who has paid 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 or funder has paid, pays, or is expected to pay over \$500.  
 Yes. The list is 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 390-20-143 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 checked="" type="checkbox"/> Agriculture	09 <input checked="" type="checkbox"/> Health Care
02 <input checked="" type="checkbox"/> Business and consumer affairs	10 <input checked="" type="checkbox"/> Higher education
03 <input checked="" type="checkbox"/> Constitutions and elections	11 <input checked="" type="checkbox"/> Human services
04 <input checked="" type="checkbox"/> Education	12 <input type="checkbox"/> Labor
05 <input checked="" type="checkbox"/> Energy and utilities	13 <input checked="" type="checkbox"/> Law and justice
06 <input checked="" type="checkbox"/> Environmental affairs - natural resources - parks	14 <input checked="" type="checkbox"/> Local government
07 <input type="checkbox"/> Financial institutions and insurance	15 <input checked="" type="checkbox"/> State government
08 <input checked="" type="checkbox"/> Fiscal	16 <input type="checkbox"/> Technology
	17 <input checked="" type="checkbox"/> Transportation
	18 <input checked="" type="checkbox"/> Other - Specify:

Remarks:  
 "Other" includes Economic Development and Gaming

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      DATE  
  
 Michael M. Moran for Moran Public Affairs LLC      12/21/2016

EMPLOYER'S SIGNATURE, NAME TYPED OR PRINTED, AND TITLE      DATE  
 **CHAIRMAN** 12/22/2016