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PUBLIC DISCLOS	T11 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 TOLL: FREE 1-877-601-2929	LOBBYIST	REGISTRATION	L1	DATE TILED PDC
1. Lobbyist Name	• •		•		JAN 31,2019
T K Bentler/Pub	lic Affairs Associates		•		•
Permanent Business	· · · · · · · · · · · · · · · · · · ·			- Business To	elephone Numbers
5838 Athens Be	ach Drive, N.W.		· ·	Permanent	•
City		State	Zip	1	(306) 789-1176
Olympia		WA	98502	or Pager	
	County address during legislative		30302	E-Mail Add	
				tkbentler@comcast.net	
3. Employer's name and address (person or group for which you lobby) Motor Vehicle Software Corporation				Employer's occupation, business or description of purpose of organization	
29901 Agoura Road Agoura Hills, CA 91301				Business	
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.) Index Description Object Ob				jb@mvscusa.com	
John Brueggeman, Chief Strategy Officer					ber (406270-6699
5. What is your pay (compensation) for lobbying? Solution of employment (checks) Description of employment (checks) Description of employment (checks)				ne or more baxe	_
four, day, month, year)			☐ Full time employee ☐ Sole duty is lobbying ☐ Part time or temporary employee ☐ Lobbying is only a part		
Other: Explain:			Contractor, retainer or similar agreement of other duties Unsalaried officer or member of group		
6. Are you reimbursed for lobbying expenses? Explain which expenses. Yes: \$ per Yes: I am reimbursed for expenses.			Does employer pay any of your lobby if yes, explain which ones.	ring expenses di	rectly?
☑ No: Iam no	ot reimbursed for expenses.				
	pect to lobby for this organization?				
Permanent lobb	byist Only du	ring legislative session	Other, Explain:		
associations, or organiza	ousiness or trade association or org ations? If "yes," attach a list showin expected to pay over \$1,450 this ye	g the name and address of e	ehalf of its members or a representative each member or funder who has paid fe	e entity which lo ses, dues or oth	bbies on behalf of businesses, groups, er payments over \$1,450 during either of
☑ No ☐ Yes. The list is	=-	no member or funder has pa	id, pays, or is expected to pay over \$1,	450.	
	r have a connected, related or close if so, list the name of that political a		ommittee which will provide funds for yo	ou to make politi	cal contributions including purchase tickets
☑ No ☐ Yes, Name of	the committee le-				
10. If lobbyist is a comp	eany, partnership or similar busines:	s entity which employs others	s to perform actual lobbying duties, list	name of each pe	erson who will lobby. (See WAC 390-20-
143 and 144 for instructi	ions.)				
TK Bentler 11. Areas of interest. L	obbying is most frequent before leg	Islative committee members	Remarks:		
	med with following subjects:	SUBJECT			
01 Agriculture	09 🖸	Health Care			
	and consumer affairs 10 🔲 ns and elections 11 🗍				
04 🔲 Education	12 🔲	Labor			
05 Energy and 06 Environme	d utilities 13 🗌 ental affairs - natural 14 🔲				

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.

in this registration statement.

EMPLOYER'S SIGNATURE, NAME TYPED OR PRINTED, AND TITLE

DATE

12. LOBBYIST'S SIGNATURE

DATE

han Daniel Delice Delic

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