



FINANCIAL DISCLOSURE COMMISSION
 711 CAPITOL WAY RM 206
 PO BOX 40908
 OLYMPIA WA 98504-0908
 (360) 783-1111
 TOLL FREE 1-877-801-2929

LOBBYIST REGISTRATION

1. Lobbyist Name
Ed Dennis

Permanent Business Address
2920 NE Charlois Court

City: **Hillsboro** State: **Oregon**

2. Temporary Thurston County address during legislative session
2920 NE Charlois Court (Same)

3. Employer's name and address (person or group for which you lobby)
**Project Lead The Way 3939 Birch Ave
SOUTH DRIVE
INDI, IN 46290**

4. Name and address of person having custody of accounts, records, books or other documents which substantiate lobbyist reports. (Person responsible for producing the lobbyist employer's annual L-3 report.)

5. What is your pay (compensation) for lobbying?
10000 per year Other: **Exp. of**
 Full time employee
 Part time or temporary employee
 Contractor, retainer or other agreement
 Unrelated public or private affairs

6. Are you reimbursed for lobbying expenses? Explain which expenses.
 Yes: **\$ 545 per mile**
 Yes: I am reimbursed for expenses
 No: I am not reimbursed for expenses.
 Other: **Travel**

7. How long do you expect to lobby for this organization?
 Permanent lobbyist
 Only during legislative session
 Other: **organizing in multiple states**

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 who has paid fees, dues or other payments over \$1,450 during either of the past two years or is expected to pay over \$1,450 this year.
 No
 Yes. However, no member or funder has paid, pays, or is expected to pay over \$1,450.

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.)
I am the only person who will lobby in WA state

11. Areas of interest. Lobbying is most frequent before legislative committee members or state agencies concerned with following subjects:

CODE	SUBJECT	CODE	SUBJECT
<input type="checkbox"/> 01	Agriculture	<input type="checkbox"/> 06	Health Care
<input type="checkbox"/> 02	Business and consumer affairs	<input checked="" type="checkbox"/> 10	Higher education
<input type="checkbox"/> 03	Constitutions and elections	<input type="checkbox"/> 11	Human services
<input checked="" type="checkbox"/> 04	Education	<input type="checkbox"/> 12	Labor
<input type="checkbox"/> 05	Energy and utilities	<input type="checkbox"/> 13	Law and justice
<input type="checkbox"/> 06	Environmental affairs - natural resources - parks	<input type="checkbox"/> 14	Local government
<input type="checkbox"/> 07	Financial institutions and insurance	<input type="checkbox"/> 15	State government
<input type="checkbox"/> 08	Fiscal	<input type="checkbox"/> 16	Technology
		<input type="checkbox"/> 17	Transportation
		<input type="checkbox"/> 18	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.

12 LOBBYIST'S SIGNATURE
Ed Dennis
 DATE
3/8/2019

EMPLOYER'S SIGNATURE, NAME TYPED OR PRINTED, AND TITLE
Glade T. Montgomery, Chief of Staff
 DATE
4/5/19

1. Lobbyist Name
Ed Dennis

Permanent Business Address
2920 NE Charlois Court

City State Zip
Hillsboro Oregon 97124

Business Telephone Numbers
 Permanent (~~503~~) **970.4506**
 Temporary ()
 Cell Phone ()
 or Pager

2. Temporary Thurston County address during legislative session
2920 NE Charlois Court (Same)

E-Mail Address
edennis@pltw.org

3. Employer's name and address (person or group for which you lobby)
**Project Lead The Way 3939 Prichard Way
 South Drive, Suite 400
 Indy, IN 46240**

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

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.)

E-Mail Address

5. What is your pay (compensation) for lobbying?
 _____ per _____
 (hour, day, month, year)
 Other: Explain: **\$44.62 hr.**

Description of employment (check one or more boxes)
 Full time employee
 Part time or temporary employee
 Contractor, retainer or similar agreement
 Unsalairied 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: **\$.515 per mile**
 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.
Travel related expenses.

7. How long do you expect to lobby for this organization?
 Permanent lobbyist
 Only during legislative session
 Other: Explain: **ongoing in multiple states**

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 who has paid fees, dues or other payments over \$1,450 during either of the past two years or is expected to pay over \$1,450 this year.
 No
 Yes. However, no member or funder has paid, pays, or is expected to pay over \$1,450.
 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 WA 390-20-143 and 144 for instructions.)
I am the only person who will lobby in WA state

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

Remarks:
Please let me know if you have any questions.

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
Ed Dennis 3/8/2019

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