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AUG 25 2016

DES FINANCE

**PDC Statement of Understanding  
2016 Lobbyist L-2 Reports**

I hereby acknowledge that I, Kylie Kincaid, did not  
(Printed Name of Respondent)

file/timely file the Monthly Lobbyist Expense report (L-2 Report) for the month March 2016, which was due to be filed no later than April 15, 2016, thereby violating of RCW 42.17A.615.

I want to avoid the time and expense resulting from a brief enforcement hearing before the Commission. Therefore, I have (enclosed a signed L-2 report/already filed the L-2 report), and have completed the enclosed Statement of Understanding, and check or money order in the amount of \$150 for the late filed L-2 report, in lieu of a hearing being held.

I understand that this will resolve all issues regarding my failure to timely file the L-2 report, provided that a check or money order for \$150, this signed Statement of Understanding, and any missing L-2 reports are all received by Tuesday, August 23, 2016.

I further understand that the Commission will not hold a Hearing regarding my obligation to timely file the L-2 that was due as described above.

Kylie Kincaid  
Signature of Respondent/Lobbyist

8/15/16  
Date Signed

Be sure to make your check or money order payable to "Washington State Treasurer."

Mail or deliver this Statement of Understanding, and your payment to:

WA State Treasurer - Public Disclosure Commission  
Financial Office  
PO Box 41465  
Olympia, WA 98504-1465

**L2**  
1/15

1021390141  
PDC OFFICE USE

**Lobbyist Monthly Expense Report**  
(as required by chapter 397, 1995 Session Laws)

Lobbyist Name: Last WASHINGTON RESTAURANT ASSOCIATION First \_\_\_\_\_ Middle Initial \_\_\_\_\_

Mailing Address: 510 PLUM ST SE STE 200

City: Olympia State: WA Zip: 98501 New Address?  Yes  No

This report is for the following period: 3 2016 OR This report corrects or amends the report for \_\_\_\_\_  
Month Year Month Year

Business Phone: 360-956-7279

ALL COMPLETE THIS PART			COMPLETE IF YOU HAVE MORE THAN ONE EMPLOYER		
Expense Category	TOTAL AMOUNT THIS MONTH All employers plus own expenses (Columns a+b+c+d)	Amounts paid from lobbyist's own funds, not reimbursed or attributed to an employer.  Column A	Employer #1 Identify by name below (11) Column B	Employer #2 Column C	Employer #3 Column D
COMPENSATION earned from employer for lobbying : period (salary, wages, retainer)	\$6,174.72		\$6,174.72		
PERSONAL EXPENSES for travel, food and refreshments					
ENTERTAINMENT, GRATUITIES, TRAVEL, SEMINARS state officials, employees, their families (See #15)					
CONTRIBUTIONS to elected officials, candidates and political committees (See #16)					
ADVERTISING, PRINTING, INFORMATIONAL MATERIAL					
POLITICAL ADS, PUBLIC RELATIONS, POLLING, DEMARKETING, ETC. (See #17)					
OTHER EXPENSES AND SERVICES (See #18)					
TOTAL COMPENSATION AND EXPENSES INCURRED THIS MONTH	\$6,174.72	\$0.00	\$6,174.72	\$0.00	\$0.00

EMPLOYERS' NAMES (from above)

No. 1 (Column B) WA Lodging Assoc.

No. 2 (Column C)

No. 3 (Column D)

Subject matter of proposed legislation or other legislative activity or rulemaking the lobbyist was supporting or opposing.

Subject Matter, Issue or Bill No.	Legislative Committee or State Agency Considering Matter	Employer Represented
TOURISM	STATE AND LOCAL	WASHINGTON LODGING ASSOCIATION
TAXES	STATE AND LOCAL	WASHINGTON LODGING ASSOCIATION

Of the time spent lobbying, what percentage was devoted to lobbying : Legislature 80 % State Agencies 20 %

**TERMINATION: (COMPLETE THIS ITEM ONLY IF YOU WISH TO TERMINATE YOUR REGISTRATION)**

Date registration ends: \_\_\_\_\_ Employer's name: \_\_\_\_\_

I understand that an L-2 report is required for any month or portion thereof in which I am a registered lobbyist. I also understand that once I have terminated my registration, I must file a new registration prior to lobbying for that employer in the future. All the registrations terminate automatically on the second Monday in January of each odd numbered year.

**CERTIFICATION**

I certify that this report is true and complete to the best of my knowledge.

Certified By: Kylie Kincaid Date Filed: 06/17/2016

**Washington Restaurant Association**

510 Plum St SE, Suite 200  
 Olympia, WA 98501  
 (360) 956-7279

Heritage Bank  
 4400 Pacific Ave SE  
 Lacey, WA 98503  
 98-7083/3251

11790

PAY

\*ONE HUNDRED FIFTY AND XX / 100

DATE

AMOUNT

8/18/2016

\*\*\*\*\*150.00\*

TO THE  
 ORDER  
 OF

Washington State Treasurer  
 Financial Office  
 PO Box 41465  
 Olympia, WA 98504  
 WAS029

Not Valid 180 Days From Issue Date

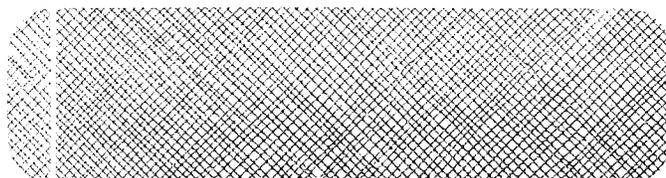
*[Handwritten Signature]*  
 AUTHORIZED SIGNATURE

⑈011790⑈ ⑆325170835⑆03050052841⑈

Washington Restaurant Association

11790

DATE	INVOICE NO.	COMMENT	AMOUNT	DISCOUNT	NET AMOUNT
8/11/2016	8.11.16	Monthly Lobbyist Expense Report Fine	150.00	0.00	150.00
RECEIVED AUG 25 2016 DES FINANCE					
Check: 011790      8/18/2016      Washington State Treasurer				<b>TOTAL</b>	150.00



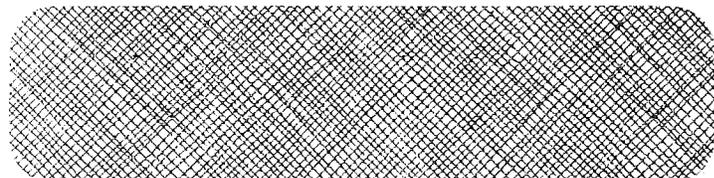
TACOMA  
 WA 985  
 22 AUG '16  
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neopost  
 08/22/2016  
**US POSTAGE**

FIRST-CLASS MAIL  
 \$00.46<sup>5</sup>



ZIP 98501  
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