

**LOBBYIST REGISTRATION**

**RECEIVED**  
 THIS SPACE TO BE USED  
**DEC 15 2014**

**L1**  
 (12/03)

1. Lobbyist Name  
**Carolyn Logue, CA Logue Public Affairs**

Business Telephone  
 Permanent ( 360 ) **789-3491**  
 Temporary (  )   
 Cell Phone ( 360 ) **789-3491**  
 or Pager

Permanent Business Address  
**6514 78th Ave NE**

City Olympia State WA Zip 98516

E-Mail Address  
**Carolyn.logue@comcast.net**

2. Temporary Thurston County address during legislative session  
**same**

Employer's occupation, business or description of purpose of organization  
**Representing the interest of teacher-librarians in schools across Washington state.**

3. Employer's name and address (person or group for which you lobby)  
**Washington Library Media Association**  
**4122 58th Place SW, No 3 Seattle WA 98116**

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)  
**Merrilyn Tucker**  
**4122 58th Place SW, No 3 Seattle WA 98116**

E-Mail Address  
**wlmatreasurer@gmail.com**

5. What is your pay (compensation) for lobbying?  
 \$ 1100 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. Extraordinary expenses only  
 No: I am not reimbursed for expenses.

Does employer pay any of your lobbying expenses directly? If yes, explain which ones.  
**NO**

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.)

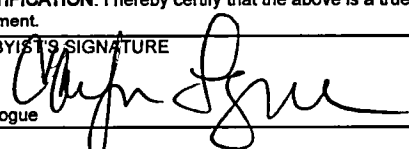
11. Areas of interest. Lobbying is most frequent before legislative committee members or state agencies concerned with following subjects:

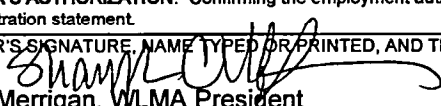
|  |   |  |   |
|--|---|--|---|
| CODE                                   | SUBJECT   | CODE                                   | SUBJECT                                   |
| 01 <input checked="" type="checkbox"/> | Agriculture                                       | 09 <input checked="" type="checkbox"/> | 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 checked="" 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 type="checkbox"/>            | Transportation                            |
| 08 <input checked="" type="checkbox"/> | Fiscal  | 16 <input type="checkbox"/>            | Other - Specify: <input type="checkbox"/> |

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  
  
 Carolyn Logue

EMPLOYER'S SIGNATURE, NAME TYPED OR PRINTED, AND TITLE  
  
 Sharyn Merrigan, WLMA President

DATE  
**12/15/14**

DATE  
**12/15/14**