(360) 753-1111 TOLL FREE 1-877-601-2929		REGISTRATION	L1 (12/14)	JAN 19 2016	
MICHAEL PAULEY					
Permanent Business Address			1	Business Telephone Numbers Permanent (435) 641-9345	
9326 185TH DR SE				Temporary ()	
SNOHOMISH WA 98290			Cell Phone (or Pager		
2. Temporary Thurston County address during legislative session			E-Mail Address Michaelon line Lecomcast. net		
3. Employer's name and address (person or group for which you lobby) HUNAW LIFE OF WASHINGTON 14400 BEL-BED RD., SUITE 207, BELLEVUE, WASHOT			purpose of or	coupation, business or description of reganization ADN-Profit A Pights Cocy organization	
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.) HUMAN LIFE OF WASTIFN GOVE			E-Mail Addre	human life.net gmail.com	
5. What is your pay (compensation) for lobbying? \$ 2500 per		Description of employment (check on Full time employee Part time or temporary employee Contractor, retainer or similar agr Unsalaried officer or member of g	eement	☐ Sole duty is lobbying ☐ Lobbying is only a part of other duties	
6. Are you reimbursed for lobbying expenses? Explain which expenses Yes: \$ per / Ausspace / Yes: I am reimbursed for expenses. No: I am not reimbursed for expenses. 7. How long do you expect to lobby for this organization?		Does employer pay any of your lobbying the sexplain which ones.	ng expenses dire	ctly?	
☐ 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 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.					
to fund raising events? If so, list the name of that political action committee to some strength of the some strength of the committee is: to fund raising events? If so, list the name of that political action committee to some strength of the committee is: The solution 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.)					
03 Constitutions and elections 11 Human s 04 Education 12 Labor 05 Energy and utilities 13 Law and 06 Environmental affairs - natural 14 Local go	cT lare ducation services justice vernment vernment ogy rtation	Remarks:	·		
CERTIFICATION: I hereby certify that the above is a true, complete statement.	EMPLOYER'S AUTHORIZATION: Confirming the employment authority to lobby described in this registration statement.				
12. LOBBYIST'S SIGNATURE DATE DATE EMPLOYER'S SIGNATURE, NAME TYPED OR PRINTED, AND TITLE DATE UND PDC FORM L-1 (rev. 12/14) NOT VALID UNLESS SIGNED BY BOTH					