



LOBBYIST REGISTRATION

L1
(12/14)

THIS SPACE FOR OFFICE USE
DATE FILED PDC
DEC 29 2016

1 Lobbyist Name
Miller Malone & Tellefson

Permanent Business Address
3110 Ruston Way, Suite F

City State Zip
Tacoma WA 98402

Business Telephone Numbers
Permanent (**253**) **759-9595**
Temporary ()

Cell Phone (**253**) **576-9908**
or Pager

2 Temporary Thurston County address during legislative session
E-Mail Address
carrie@mmtlawfirm.com

3 Employer's name and address (person or group for which you lobby)
**Veritec Solutions, Inc
9428 Baymeadows Road, Suite 600, Jacksonville FL 32256**
Employer's occupation, business or description of purpose of organization
Financial/banking regulatory solutions

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.)
**John Barnes, Government Affairs Manager
9428 Baymeadows Road, Suite 600, Jacksonville FL 32256**
E-Mail Address
j.barnes@veritecs.com

5 What is your pay (compensation) for lobbying?
\$ 2000 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
 Unsalaned 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
 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 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 WAC 390-20-143 and 144 for instructions)

Carrie Tellefson, Matt Miller

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 type="checkbox"/>	Agriculture	09 <input type="checkbox"/>	Health Care
02 <input type="checkbox"/>	Business and consumer affairs	10 <input type="checkbox"/>	Higher education
03 <input type="checkbox"/>	Constitutions and elections	11 <input type="checkbox"/>	Human services
04 <input 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 checked="" 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:

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

Carrie Tellefson
DATE
December 12, 2016

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

John Barnes, Government Affairs Manager
DATE
12/15/16

NOT VALID UNLESS SIGNED BY BOTH