



LOBBYIST REGISTRATION

L1

(12/14)

THIS SPACE FOR OFFICE USE

DATE FILED PDC

JAN 05 2017

1. Lobbyist Name

Heather Villanueva

Permanent Business Address

215 Columbia Street

Business Telephone Numbers

Permanent (206) 538-5735

Temporary ()

City State Zip

Seattle WA 98104

Cell Phone () or Pager

2. Temporary Thurston County address during legislative session

E-Mail Address

Heather.villanueva@seiu775.org

3. Employer's name and address (person or group for which you lobby)

SEIU 775
215 Columbia Street, Seattle, WA 98104

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

Labor Union
Long Term Care

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.)

Holly Elliott
215 Columbia Street, Seattle, WA 98104

E-Mail Address

5. What is your pay (compensation) for lobbying?

\$ 73,317 per - YR
(hour, day, month, year)

Other: Explain:

Description of employment (check one or more boxes)

Full time employee Sole duty is lobbying

Part time or temporary employee Lobbying is only a part of other duties

Contractor, retainer or similar agreement

Unsalaries officer or member of group

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.

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: SEIU 775 Quality Care Committee

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:

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

[Signature]

DATE 1/4/17

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

[Signature] Adam Glickman Sec-Treas

DATE 1/4/17