PUBLIC DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111

LOBBYIST REGISTRATION

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THIS SPACE FOR OFFICE USE DATE FILED PDC

Peter Subkoviak Peter Subk		(360) 753-1111 TOLL FREE 1-877-601-2929		, , , , , , , , , , , , , , , , , , ,	(12/14)	JAN 052017	
Permanent Business Address 215 Columbia Street City Seattle WA 98104 Permanent (208) 538-5735 Temporary () Seattle WA 98104 2. Temporary Thurston County address during legislative assiston Pete, subkoviak@scilu775.org Peter,	1.	_obbyist Name				,	
215 Columbia Street City Seattle WA Settlo4 Permanent (206) 538-5735 Temporary Thurston County address during legislative session EMBI Address Pete, subkovilak@eelu775.org EMBI Address Labor Union Long Term Care EMBI Address White is your peg (compensation) for lookying? Sold duty is kobbying Part time employee (nour, day, morth), yea) Part time or temporany employee (nour, day, morth), yea) Part time or forgoing employee (nour, day, morth), yea) Part time or forgoing employee (nour, day, morth), yea) Part time or forgoing employee (nour, day, morth), yea) Part time or forgoing employee (nour, day, morth), yea) Part time or forgoing employee (nour, day, morth), yea) Part time or forgoing employee (nour, day, morth), yea) Part time or forgoing employee (nour, day, morth), yea) Part time or forgoing employee (nour, day, morth), yea) Part time or forgoing employee (nour, day, morth), yea) Part time or forgoing employee (nour, day, morth), yea) Part time or forgoing employee (nour, day, morth), yea) Part time or forgoing employee (nour, day, morth), yea Part time or forgoing employee (nour, day, morth), yea Part time or forgoing employee (nour, day, morth), yea Part time or forgoing employee (nour, day, morth), yea Part time or forgoing employee Part time or		Pete Subkoviak					
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7. How long do you expect to lobby for this organization? Permanent lobbyist		Yes: I am reimbursed for expenses.					
8. Is your employer a business or trade association or organization which lobbles on behalf of its members or a representative entity which lobbles 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 during either of the past two years or is expected to pay over \$1,450 during either of the past two years 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: CODE SUBJECT Or Agriculture Subjects: CODE SUBJECT Or Subjects: CODE SUBJECT Or Agriculture Subjects: CODE SUBJECT Or Agriculture Subjects: CODE SUBJECT Or Committee education Subjects: CODE SUBJECT Or Committee education Subjects: CODE SUBJECT Or Committee education Subjects: CODE SUBJECT Or Committee members Statement Subjects: CODE SUBJECT Or Committee education Subject							
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11. Areas of interest. Lobbying is most frequent before legislative committee members or state agencies concerned with following subjects: CODE SUBJECT CODE SUBJECT 01 Agriculture 09 Health Care 02 Business and consumer affairs 10 Higher education 03 Constitutions and elections 11 Human services 04 Education 12 Labor 05 Energy and utilities 13 Law and justice 06 Environmental affairs - natural 14 Local government resources - parks 15 State government 07 Financial institutions and 16 Technology insurance 17 Transportation 08 Fiscal 18 Other - Specify: CERTIFICATION: I hereby certify that the above is a true, complete and correct statement. DATE DATE PMPLOYER'S SIGNATURE NAME TYPED OR PRINTED, AND TITLE DATE DATE DATE PMPLOYER'S SIGNATURE, NAME TYPED OR PRINTED, AND TITLE DATE DATE	∑ Yes. Name of the committee is: SEIU 775 Quality Care Committee ☐ Yes. Name of the committee is: SEIU 775 Quality Care Committee ☐ Yes. Name of the committee is: SEIU 775 Quality Care Committee ☐ Yes. Name of the committee is: SEIU 775 Quality Care Committee ☐ Yes. Name of the committee is: SEIU 775 Quality Care Committee ☐ Yes. Name of the committee is: SEIU 775 Quality Care Committee ☐ Yes. Name of the committee is: SEIU 775 Quality Care Committee ☐ Yes. Name of the committee is: SEIU 775 Quality Care Committee ☐ Yes. Name of the committee is: SEIU 775 Quality Care Committee ☐ Yes. Name of the committee is: SEIU 775 Quality Care Committee ☐ Yes. Name of the committee is: SEIU 775 Quality Care Committee ☐ Yes. Name of the committee is: SEIU 775 Quality Care Committee ☐ Yes. Name of the committee is: SEIU 775 Quality Care Committee ☐ Yes. Name of the committee is: SEIU 775 Quality Care Committee ☐ Yes. Name of the committee is: SEIU 775 Quality Care Committee ☐ Yes. Name of the committee is: Yes. Yes. Name of the committee is: Yes. Yes. Yes. Yes. Yes. Yes. Yes. Yes.						
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resources - parks 15 State government 7 Financial institutions and 16 Technology		05 Energy and utilities 13 🗌	Law and justice				
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