PUBLIC DISCLOS	THE COMMISSION 711 CAPITOL WAY RM 200 PO BOX 40908 OLYMPIA WA 98504-0908 (350) 753-1111 TOLL FREE 1-877-801-292
1. Lobbyist Nan	ne
Miller Nash G	iraham & Dunn LLP
Dormonont D	usinose Addross

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	OLYMPIA WA 98504-0908 (350) 753-1111 TOLL FREE 1-877-501-2929	LOBBIIST		(12/14)	JAN 09 2017	
1. Lo	bbyist Name				31.11 2 2 2017	
Mil	ler Nash Graham & Dunn LLP					
Pe	rmanent Business Address			Business Telephone Numbers		
28	01 Alaskan Way, Suite 300			Permanent (206-624-8300) Temporary ( )		
Cit	у	State	Zip	Cell Phone ( or Pager	)	
Se	attle	WA	98121			
2. Temporary Thurston County address during legislative session				E-Mail Address emalia.waiton@millernash.com		
Employer's name and address (person or group for which you lobby)					ccupation, business or description of	
Salmon Beach North			purpose of organization  Homeowners Association			
<ol> <li>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.)</li> </ol>			E-Mail Address			
Zeno Martin 25 N. Salmon Beach, Tacoma WA 98407				Zeno.martin@		
5. Wha	it is your pay (compensation) for lobbying?		Description of employment (check one	or more boxes		
S Oth	270 per hour (hour, day, month, year)		☐ Full time employee ☐ Sole duty is lobbying ☐ Part time or temporary employee ☐ Lobbying is only a part ☐ Contractor, retainer or similar agreement ☐ Unsaladed officer or member of group			
6. Are you reimbursed for lobbying expenses? Explain which expenses.			Does employer pay any of your lobbying figes, explain which ones.		ectly?	
⊠	Yes: I am reimbursed for expenses.  No: I am not reimbursed for expenses.					
	long do you expect to lobby for this organization?					
	•	ing legislative session	☑ Other, Explain: For th			
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 this year.						
	<ul> <li>☑ No ☐ Yes. However, no member or funder has paid, pays, or is expected to pay over \$1,450.</li> <li>☐ Yes. The list is of parties attached</li> </ul>					
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.)						
Amalia R. Walton  11. Areas of interest. Lobbying is most frequent before legislative committee Remarks:						
	s or state agencies concerned with following subject				-	
01 [	Agriculture 09 🔲	SUBJECT Health Care				
02 [ 03 [	Constitutions and elections 11	Higher education Human services				
04 [ 05 [	Energy and utilities 13 🔲	Labor Law and justice				
06[	resources - parks 15 🖾	Local government State government				
07 [ 08 [	insurance 17 🗍	Technology Transportation Other - Specify:				
CERTIFICATION: I hereby certify that the above is a true, complete and correct statement.  12. LOBBYIST'S SIGNATURE  DATE			EMPLOYER'S AUTHORIZATION: Confirming the employment authority to lobby described in this registration statement.  EMPLOYER'S SIGNATURE, NAME TYPED OR PRINTED, AND TITLE  DATE			
A		1/9/2017	ZEA	sham or	ボル かいて (/5/2017	
PDC Form	-1 (rev. 12/14)	11-	1/5		LID UNLESS SIGNED BY BOTH	