

PUBLIC DISCLOSURE COMMISSION pdc 711 CAPITOL WAY RM 206 PO BOX 40906 OLYMPIA WA 98504-0906 (360) 753-1111 TOLL FREE 1-877-801-2828		LOBBYIST REGISTRATION		THIS SPACE FOR OFFICE USE L1 (12/14)		DATE FILED PDC JAN 13 2017																																													
1. Lobbyist Name Cascadia Law Group				Business Telephone Numbers Permanent (360) 786-5044 Temporary () Cell Phone () or Pager																																															
Permanent Business Address 606 Columbia Street NW, Suite 212				City State Zip Olympia WA 98501																																															
2. Temporary Thurston County address during legislative session N/A				E-Mail Address jturner@cascadialaw.com																																															
3. Employer's name and address (person or group for which you lobby) National organization for Women - WA state chapter				Employer's occupation, business or description of purpose of 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.) Linda Malanchuk - Finnan - 3122 28th Ave SE OLYMPIA 98501				E-Mail Address lryh@hotmail.com																																															
5. What is your pay (compensation) for lobbying? \$ 500 per month (hour, day, month, year) Other: Explain:		Description of employment (check one or more boxes) <input type="checkbox"/> Full time employee <input type="checkbox"/> Part time or temporary employee <input checked="" type="checkbox"/> Contractor, retainer or similar agreement <input type="checkbox"/> Unalarmed officer or member of group <input type="checkbox"/> Sole duty is lobbying <input checked="" type="checkbox"/> Lobbying is only a part of other duties																																																	
6. Are you reimbursed for lobbying expenses? Explain which expenses <input type="checkbox"/> Yes: \$ _____ per _____ <input type="checkbox"/> Yes: I am reimbursed for expenses <input checked="" type="checkbox"/> 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? <input type="checkbox"/> Permanent lobbyist <input checked="" type="checkbox"/> Only during legislative session <input type="checkbox"/> 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 <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes However, no member or funder has paid, pays, or is expected to pay over \$1,450 <input type="checkbox"/> 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 <input checked="" type="checkbox"/> No <input type="checkbox"/> 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 380-20-143 and 144 for instructions) Jessie Turner																																																			
11. Areas of interest. Lobbying is most frequent before legislative committee members or state agencies concerned with following subjects: <table border="0"> <tr> <td>CODE</td> <td>SUBJECT</td> <td>CODE</td> <td>SUBJECT</td> </tr> <tr> <td>01</td> <td><input type="checkbox"/> Agriculture</td> <td>09</td> <td><input checked="" type="checkbox"/> Health Care</td> </tr> <tr> <td>02</td> <td><input type="checkbox"/> Business and consumer affairs</td> <td>10</td> <td><input type="checkbox"/> Higher education</td> </tr> <tr> <td>03</td> <td><input type="checkbox"/> Constitutions and elections</td> <td>11</td> <td><input checked="" type="checkbox"/> Human services</td> </tr> <tr> <td>04</td> <td><input type="checkbox"/> Education</td> <td>12</td> <td><input type="checkbox"/> Labor</td> </tr> <tr> <td>05</td> <td><input type="checkbox"/> Energy and utilities</td> <td>13</td> <td><input checked="" type="checkbox"/> Law and justice</td> </tr> <tr> <td>06</td> <td><input type="checkbox"/> Environmental affairs - natural resources - parks</td> <td>14</td> <td><input checked="" type="checkbox"/> Local government</td> </tr> <tr> <td>07</td> <td><input type="checkbox"/> Financial institutions and insurance</td> <td>15</td> <td><input type="checkbox"/> State government</td> </tr> <tr> <td>08</td> <td><input type="checkbox"/> Fiscal</td> <td>16</td> <td><input type="checkbox"/> Technology</td> </tr> <tr> <td></td> <td></td> <td>17</td> <td><input type="checkbox"/> Transportation</td> </tr> <tr> <td></td> <td></td> <td>18</td> <td><input type="checkbox"/> Other - Specify:</td> </tr> </table>				CODE	SUBJECT	CODE	SUBJECT	01	<input type="checkbox"/> Agriculture	09	<input checked="" 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 checked="" type="checkbox"/> Human services	04	<input type="checkbox"/> Education	12	<input type="checkbox"/> Labor	05	<input type="checkbox"/> Energy and utilities	13	<input checked="" type="checkbox"/> Law and justice	06	<input type="checkbox"/> Environmental affairs - natural resources - parks	14	<input checked="" type="checkbox"/> Local government	07	<input 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:			
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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 Jessie J		DATE 12-16-16		EMPLOYER'S SIGNATURE, NAME TYPED OR PRINTED, AND TITLE Linda Malanchuk - Finnan Linda Malanchuk - Finnan, WA NOW STATE COUNCIL COORDINATOR		DATE 12-16-2016																																													