

**LOBBYIST REGISTRATION**

**L1**  
(1/14)

THIS SPACE FOR OFFICE USE  
**DATE FILED PDC**  
**FEB 27 2017**

1. Lobbyist Name  
**Pierce Consulting Services, LLC**

Permanent Business Address  
**PO Box 4410**  
 City: **Olympia** State: **WA** Zip: **98501**

Business Telephone Numbers  
 Permanent (360) 870-2729  
 Temporary ( )  
 Cell Phone ( ) or Pager

2. Temporary Thurston County address during legislative session

E-Mail Address  
cindi@cindiholmstrom.com

3. Employer's name and address (person or group for which you lobby)  
**Washington State Opportunity Scholarship**  
**1414 31st Ave South, Suite 302**  
**Seattle, WA 98144**

Employer's occupation, business or description of purpose of organization  
**Assists low- and middle-income WA state residents earn their bachelor's degrees in the high-demand fields of science, technology, engineering, math and health 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.)  
**Naria Santa Lucia**

E-Mail Address  
nsantalucia@waopportunitiescholarship.org

5. What is your pay (compensation) for lobbying?  
**\$ 2,000.00 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  
 Unsalared 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: See below in remarks

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 (excluding individuals) who has paid fees, dues or other payments over \$500 during either of the past two years or is expected to pay over \$500 this year.  
 No  
 Yes. However, no member or funder has paid, pays, or is expected to pay over \$500.  
 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.)  
**Cindi Holmstrom**

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 checked="" 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 type="checkbox"/> Financial Institutions and insurance              | 15 <input type="checkbox"/> State government            |
| 08 <input checked="" 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 *Cindi Holmstrom* DATE **2/24/17**

EMPLOYER'S SIGNATURE NAME/TYPED OR PRINTED, AND TITLE DATE  
*Naria Santa Lucia, Executive Director* **2-24-17**