PUBLICDISCLOSU	RE COMMISSION	
	711 CAPITOL WAY RM 20 PO BOX 40908 OLYMPIA WA 98504-0908	
	(360) 753-1111	
	TOIL FREE 4-877-804-202	

I OBBYIST REGISTRATION

DATE FILED POOE

	(360) 753-1111 TOLL FREE 1-877-601-2929		TLOIO II VIII OII	(12/14)	NOV 1 4 2018	
Lobbyist Name		L			MO1	
Davor Gjurasic						
Permanent Business Address			Duringa Talaghan Numbers			
			Business Telephone Numbers			
P.O Box 12297		Permanent ()				
				Temporary ()	
City Olympia		State	Zip	Cell Phone (or Pager	360-561-1923)	
o.yp.a		WA	98508			
Temporary Thurston County address during legislative session Union Ave SE, Olympia WA 98501			E-Mail Address			
200 Official Ave SE, Olympia VVA 90501			dgjurasic@comcast net			
3 Employer's name and address (person or group for which you lobby)			Employer's occupation, business or description of			
City of Sequim 152 West Cedar St, Sequim, WA 98328			purpose of organization:			
			City Government			
4. Name and address of person having custody of accounts, receipts, books or other documents which substantiate			E-Mail Addre	SS		
lobbyist reports. (Person responsible for producing the lobbyist employer's annual L-3 report)						
Clerks Office, City of 152 West Cedar St,						
		-	ŧ			
	5. What is your pay (compensation) for lobbying? Description of employment (check one			or more boxes)		
\$ 3,000.00 per Month Full time employee (hour, day, month, year)			I		☐ Sole duty is lobbying	
Other: Explain: Part time or temporary employee X Contractor, retainer or similar agr			 Lobbying is only a part of other duties 			
6 Are you reimbursed for lobbying expenses? Explain which expenses Does employer pay any of your lobbying			· · · · · · · · · · · · · · · · · · ·	ntiv2		
Are you reimbursed for lobbying expenses? Explain which expenses Does employer pay any of your lobbyin Yes: \$ per			expenses une	suy r		
XYes: I am rei	mbursed for expenses.		No			
	t reimbursed for expenses					
□XPermanent lobbylst □ 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.						
□XNo			d, pays, or is expected to pay over \$1,450			
Yes The list is o	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						
☐ 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.) NA						
,						
11. Areas of interest. Lot	obying is most frequent before legisla	itive committee members	Remarks:			
	ed with following subjects:					
CODE SUBJECT 01	09 🗖 🕴	SUBJECT -lealth Care				
		ligher education luman services				
04 Education 05 Energy and u	12 🔲 L	abor aw and justice				
06 Environment	al affairs - natural 14 🔲 L	ocal government				
resources - 07 Financial inst	titutions and 16 🔲 T	State government Technology				
Insurance 08 Fiscal		ransportation Other - Specify:				
000000000000000000000000000000000000000		•				
CERTIFICATION, I h statement.	nereby certify that the above is a true,	, complete and correct	EMPLOYER'S AUTHORIZATION: C in this registration statement.	onfirming the e	mployment authority to lobby described	
12 LOBBYIST'S SIGNAT	URE	DATE	EMPLOYER'S SIGNATURE, NAME TY	PED OR PRIN	TED, AND TITLE DATE	
(1)		11/14/201V	-(1) (). D.	/(.	1 1/2/100	
PDC Form L-1 (rev 12/14)	\ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	2/104	I Sharest f	-)MS	<u> </u>	
55. Ulin 1-1 (104 12/14)		_	-	'NUT VAL	ID UNLESS SIGNED BY BOTH	