

X	LOBBYIST REGISTRATION	THIS SPACE FOR OFFICE USE L1 DATE FILED PDC (12/14) JAN 11 2019		
1. Lobbyist Name Davor Gjurasic				
Permanent Business Address P.O. Box 22297 Olympia, WA 98508		Business Telephone Numbers Permanent () Temporary ()		
City	State	Zip		
2. Temporary Thurston County address during legislative session 200 Union Ave SE, Olympia WA 98501		E-Mail Address dgjurasic@comcast.net		
3. Employer's name and address (person or group for which you lobby) Nisqually Indian Tribe, 4820 She-Na-Num Drive, Olympia WA 98515		Employer's occupation, business or description of purpose of organization Sovereign Government for the Nisqually Indian People		
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.) Leona Colegrove , 4820 She-Na-Num Drive, Olympia WA 98515 Sharlaine LaClair		E-Mail Address LaClair.Sharlaine@Nisqually-NSW.gov		
5. What is your pay (compensation) for lobbying? \$ 7,500.00 _____ 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"/> Unsalared officer or member of group <input checked="" type="checkbox"/> Sole duty is lobbying <input 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 checked="" type="checkbox"/> Yes: I am reimbursed for expenses. <input type="checkbox"/> No: I am not reimbursed for expenses.	Does employer pay any of your lobbying expenses directly? No If yes, explain which ones.			
7. How long do you expect to lobby for this organization? <input checked="" type="checkbox"/> Permanent lobbyist <input 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 390-20-143 and 144 for instructions.) NA				
11. Areas of interest. Lobbying is most frequent before legislative committee members or state agencies concerned with following subjects: <table style="width:100%; border:none;"> <tr> <td style="width:50%;"> CODE SUBJECT 01 <input type="checkbox"/> Agriculture 02 <input type="checkbox"/> Business and consumer affairs 03 <input type="checkbox"/> Constitutions and elections 04X Education 05 <input type="checkbox"/> Energy and utilities 06X Environmental affairs - natural resources - parks 07 <input type="checkbox"/> Financial institutions and insurance 08X Fiscal </td> <td style="width:50%;"> CODE SUBJECT 09X Health Care 10 <input type="checkbox"/> Higher education 11X Human services 12 <input type="checkbox"/> Labor 13X Law and justice 14 <input type="checkbox"/> Local government 15 <input type="checkbox"/> State government 16 <input type="checkbox"/> Technology 17X Transportation 18 <input type="checkbox"/> Other - Specify: Gambling </td> </tr> </table>		CODE SUBJECT 01 <input type="checkbox"/> Agriculture 02 <input type="checkbox"/> Business and consumer affairs 03 <input type="checkbox"/> Constitutions and elections 04X Education 05 <input type="checkbox"/> Energy and utilities 06X Environmental affairs - natural resources - parks 07 <input type="checkbox"/> Financial institutions and insurance 08X Fiscal	CODE SUBJECT 09X Health Care 10 <input type="checkbox"/> Higher education 11X Human services 12 <input type="checkbox"/> Labor 13X Law and justice 14 <input type="checkbox"/> Local government 15 <input type="checkbox"/> State government 16 <input type="checkbox"/> Technology 17X Transportation 18 <input type="checkbox"/> Other - Specify: Gambling	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 	DATE 1/10/2019	EMPLOYER'S SIGNATURE, NAME TYPED OR PRINTED, AND TITLE * Z. K. Chole		
		DATE 1/10/2019		