PUBLIC DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 01 YMPIA WA 98504-0908 (360) 753-1111 TOLL FREE 1-877-601-2929	REGISTRATION	L1  THIS SPACE FOR OFFICE USE  DATE FILED PDC  MAR 07 2019
1. Lobbyist Name	<u></u>	
Daniel Fazio		
Permanent Business Address		Business Telephone Numbers
8830 Tallon Lanc NE, Suite C		Permanent (360) 455 -8064 Temporary ( )
City State  Lacey WA	98516	Cell Phone (360) 951 - 8641 or Pager
2. Temporary Thurston County address during legislative session		e-Mail Address  Afazio @wafla.org
3. Employer's name and address (person or group for which you lobby)		Employer's occupation, business or description of purpose of organization
wafla - BB30 Taccon Ln NE, Swife C  Lacey, WA 98516		Non Protit - Associa
4. Name and address of person having custody of accounts, receipts, books or other documents which substantiate		Employer E-Mail Address
lobbyist reports. (Person responsible for producing the lobbyist employer's annual L-3 report.)		
		Phone Number ( )
S. What is your pay (compensation) for lobbying?  \$ 12.	Description of employment (check one or more boxes)  Full time employee Part time or temporary employee Contractor, retainer or similar agreement Unsalaried 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.		g expenses directly?
7. How long do you expect to lobby for this organization?		
Permanent lobbyist 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.    Vec. However, no member or funder has paid, pays, or is expected to pay over \$1,450.    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.  Vo  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.)		
11. Areas of interest. Lobbying is most frequent before legislative committee members Remarks:		
or state agencies concerned with following subjects:		
CODE SUBJECT O1 Agriculture O2 Business and consumer affairs O3 Constitutions and elections O4 Education O5 Energy and utilities  CODE SUBJECT O9 Health Care O9 Health Care Higher education Higher education 11 Human services 12 Labor Law and justice		
06 ☐ Environmental affairs - natural resources - parks 15 ☐ State government resources - parks 15 ☐ Technology Insurance 17 ☐ Transportation 18 ☐ Other - Specify:		
CERTIFICATION: hereby certify that the above is a true, complete and correct statement.	in this registration statement	
12. LOBBYIST'S SIGNATURE DATE	EMPLOYER'S SIGNATURE NAME TYPED OR PRINTED, AND TITLE DATE  3/5/19	
NOT VALID UNLESS SIGNED BY BOTH		