



LOBBYIST REGISTRATION

L1
(12/14)

THIS SPACE FOR OFFICE USE

DATE FILED PDC

DEC 21 2016

1. Lobbyist Name

Suzanne Petersen Tanneberg

Permanent Business Address

4800 Sand Point Way NE, M/S RB.2.419

City

Seattle

State

WA

Zip

98105

Business Telephone Numbers

Permanent (206) 987-2125

Temporary ()

Cell Phone (206) 321-5212
or Pager

2. Temporary Thurston County address during legislative session

N/A

E-Mail Address

Suzanne.petersen@seattlechildrens.org

3. Employer's name and address (person or group for which you lobby)

Seattle Children's

Employer's occupation, business or description of purpose of organization

Children's 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.)

Cassie King, 4800 Sand Point Way NE, Seattle, WA 98105

E-Mail Address

cassie.king@seattlechildrens.org

5. What is your pay (compensation) for lobbying?

\$ 163 per hour
(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
- Unsalariated 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.

Yes, organized yearly advocacy day

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.

- No
- Yes. 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.

- 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.)

Suzanne Petersen Tanneberg, Hugh Ewart, Steve Duncan, Abby Moore

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 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 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

DATE

EMPLOYER'S SIGNATURE, NAME TYPED OR PRINTED, AND TITLE

DATE

Suzanne Petersen Tanneberg

12/21/16

Steve Duncan

20 DEC 16