



PUBLIC DISCLOSURE COMMISSION  
**711 CAPITOL WAY RM 206**  
**PO BOX 40908**  
**OLYMPIA WA 98504-0908**  
**(360) 753-1111**  
**TOLL FREE 1-877-601-2828**

# LOBBYIST REGISTRATION

DATE FILED FOR PDC

**L1**

(12/03)

MAR 13 2018

1. Lobbyist Name

Alex Hur

Business Telephone Numbers

Permanent ( )

Temporary ( )

Cell Phone (206 ) 795-8047  
or Pager

Permanent Business Address

1752 NW Market St. #708

City

Seattle

State

WA

Zip

98107

E-Mail Address

AlexH55@gmail.com

2. Temporary Thurston County address during legislative session

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

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

Schools Insurance Association of Washington  
451 Diamond Drive, Ephrata, WA 98823

Public entity insurance pools for school districts

4. Name and address of person having custody of accounts, receipts, books or other documents which substantiate lobbyist reports. (Person responsible for producing the annual L3 report)

E-Mail Address

Jan Hutton

[jhutton@cvsd.org](mailto:jhutton@cvsd.org)

451 Diamond Drive, Ephrata, WA 98223

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

\$ 1291.67 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  
 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.

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 similar organization which lobbies on behalf of its members? If "yes," attach a list showing the name and address of each member who has paid the association 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 has paid, pays, or is expected to pay over \$500  
 Yes. The list is 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.)

11. Areas of interest. Lobbying is most frequent before legislative committee members or state agencies concerned with following subjects:

- |   |   |
|---|---|
| 01 <input type="checkbox"/> Agriculture                                       | 09 <input type="checkbox"/> Higher education            |
| 02 <input type="checkbox"/> Business and consumer affairs                     | 10 <input type="checkbox"/> Human services              |
| 03 <input type="checkbox"/> Constitutions and elections                       | 11 <input type="checkbox"/> Labor                       |
| 04 <input type="checkbox"/> Education   | 12 <input checked="" type="checkbox"/> Law and justice  |
| 05 <input type="checkbox"/> Energy and utilities                              | 13 <input type="checkbox"/> Local government            |
| 06 <input type="checkbox"/> Environmental affairs - natural resources - parks | 14 <input checked="" type="checkbox"/> State government |
| 07 <input checked="" type="checkbox"/> Financial institutions and insurance   | 15 <input type="checkbox"/> Transportation              |
| 08 <input type="checkbox"/> Fiscal  | 16 <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

*A. Hur*

2/25/18

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

DATE

*J. Hutton*

2/25/18