

LOBBYIST REGISTRATION

DATE FILED PDC
 THIS SPACE FOR OFFICE USE

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 (12/14) JAN 19 2017

1. Lobbyist Name
ENACE STRATEGICS, SPC CRAIG EMBELKUB

Permanent Business Address
6035 95TH AVE SW

Business Telephone Numbers
 Permanent **(360) 561-7701**
 Temporary ()
 Cell Phone () or Pager

City **OLYMPIA WA** State Zip **98512**

2. Temporary Thurston County address during legislative session
N/A E-Mail Address **craig_embelkub@smi.com**

3. Employer's name and address (person or group for which you lobby)
TINY TREES PRESCHOOL 220 2ND AVE S SEATTLE WA 98101 Employer's occupation, business or description of purpose of organization
EARLY CHILDHOOD EDUCATION

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.)
ANDREW JAY, CEO E-Mail Address **andrew@tinytrees.org**

5. What is your pay (compensation) for lobbying?
\$ 1250 per MO (hour, day, month, year)
 Other: Explain:
 Description of employment (check one or more boxes)
 Full time employee Sole duty is lobbying
 Part time or temporary employee Lobbying is only a part of other duties
 Contractor, retainer or similar agreement
 Unalaried officer or member of group

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: **BEFORE, DURING, AFTER SESSION**

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 entry 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.)
CRAIG EMBELKUB

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 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 type="checkbox"/>	Human services
04 <input checked="" 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 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 **[Signature]** DATE **1/3/2017**

EMPLOYER'S SIGNATURE, NAME TYPED OR PRINTED, AND TITLE **[Signature]** DATE **1/3/2017**