

LOBBYIST REGISTRATION

L1
(12/14)

THIS SPACE FOR OFFICE USE
 DATE FILED PDC
JAN 06 2017

1. Lobbyist Name
James Shoemake

Permanent Business Address
825 5th Ave SE

City State Zip
Olympia WA 98501

Business Telephone Numbers
 Permanent (360) 943-5717
 Temporary ()
 Cell Phone () or Pager

2. Temporary Thurston County address during legislative session
WASA, 825 5th Ave SE, Olympia WA 98501

E-Mail Address
jshoe@harboret.com

3. Employer's name and address (person or group for which you lobby)
WASA, 825 5th Ave SE, Olympia WA 98501

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

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.)
Evelyn Johnson, WASA 825 5th Ave SE, Olympia WA 98501

E-Mail Address
ejohnson@wasa-oly.org

5. What is your pay (compensation) for lobbying?
 \$ 3609.38 per month
 (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
 Unsalariated 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:

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.)

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"/> 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 _____ DATE _____

EMPLOYER'S SIGNATURE, NAME TYPED OR PRINTED, AND TITLE _____ DATE _____
 Bill Keim, Executive Director *[Signature]* 1/6/17

Crystalee A. Sweeting, Ed.D.
Arlington Public Schools
315 N French Ave
Arlington, WA 98223-1317

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PO Box 2098
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Auburn, WA 98002-4499

Mr. John Deeder
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Vancouver, WA 98668-8910

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Bellingham, WA 98225-3118

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565 NW Holly St
Issaquah, WA 98027-2899

Mr. Laurence Francois
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1601 R Ave
Anacortes, WA 98221-2276

Dana Anderson
Capital Region ESD 113
6005 Tye Drive SW
Tumwater, WA 98512

Calvin Watts
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12033 SE 256th St
A-200
Kent, WA 98030-6503

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