

LOBBYIST REGISTRATION

L1

(12/18)

THIS SPACE FOR OFFICE USE

DATE FILED PDC

FEB 14 2019

1. Lobbyist Name

Joel Aune

Permanent Business Address

825 5th Ave SE

Business Telephone Numbers

Permanent (360) 943-5717

Temporary ()

Cell Phone ()
or Pager

City
Olympia

State
WA

Zip
98501

2. Temporary Thurston County address during legislative session

E-Mail Address

jaune@wasa-oly.org

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

Washington Association of School Administrators
825 5th Ave SE
Olympia WA 98501-1501

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

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.)

Evelyn Johnson, WASA, 825 5th Ave SE, Olympia WA 98801

Employer E-Mail Address

ejohnson@wasa-oly.org

Phone Number (360) 489-3643

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

\$ 1600.00 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
- 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.

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

Joel Aune

2/14/19

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

DATE

Evelyn Johnson, Accountant

Evelyn Johnson

2/14/19

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

Mr. Kevin Chase
ESD 105
33 S 2nd Ave
Yakima, WA 98902-3414

Mr. Ronald D. Thiele
Issaquah School District
565 NW Holly St
Issaquah, WA 98027-2899

Alan D. Spicciati, Ed.D.
Auburn School District
915 4th St NE
Auburn, WA 98002-4499

Mr. Tim Merlino
ESD 112
2500 NE 65th Ave
Vancouver, WA 98661-6812

Calvin Watts, Ed.D.
Kent School District
12033 SE 256th St #A-200
Kent, WA 98030-6503

Mr. Mark A. Ross
Battle Ground School District
PO Box 200
Battle Ground, WA 98604-0200

Mr. Darcy Weisner
ESD 123
3924 W Court St
Pasco, WA 99301-2775

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12309 22nd St NE
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Mead, WA 99021-9600

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6005 Tyee Dr SW
Tumwater, WA 98512-7356

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Federal Way, WA 98003-6325

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4160 86th Ave SE
Mercer Island, WA 98040-4196

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Central Valley School District
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Spokane Valley, WA 99016-9404

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9401 Sharon Dr
Everett, WA 98204-2647

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Lynnwood, WA 98036-7400

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Issaquah, WA 98027-2899

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