

# LOBBYIST REGISTRATION

**L1**  
(12/14)

THIS SPACE FOR OFFICE USE

DATE FILED PDC

FEB 28 2017

1. Lobbyist Name

Dedi Little

Permanent Business Address

130 18<sup>th</sup> AVE SE

City

Olympia

State

WA

Zip

98501

Business Telephone Numbers

Permanent ( )

Temporary ( )

Cell Phone (360)480-9671  
or Pager

2. Temporary Thurston County address during legislative session

E-Mail Address

dedi@wsparx.org

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

Washington State Pharmacy Association

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

Professional Trade 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.)

Jeff Rochon, 411 Williams Ave S, Renton, WA 98057-2748

E-Mail Address

jeff@wsparx.org

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

\$ 74,000.00 per year  
(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 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.)

Jeff Rochon

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 checked="" type="checkbox"/> Business and consumer affairs          | 10   | <input checked="" 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 checked="" 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 checked="" 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

*Dedi Little* 2-27-17

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

DATE

*Jeff Rochon* Jeff Rochon CEO 2/27/17



**NOT VALID UNLESS SIGNED BY BOTH**