

*Donna Christensen
15655 19th Avenue SW
Burien, WA 98166
donnarchris@aol.com
206-478-2242*

DATE FILED PDC

APR 03 2019

March 29, 2019

Chip Beatty
Washington State Public Disclosure Commission
711 Capitol Way S. #206
P.O. Box 40908
Olympia, WA 98504-0908

Dear Mr. Beatty

Enclosed please find the L-1 form we discussed regarding the gap in my reports from July to December. I am grateful for your assistance in this matter.

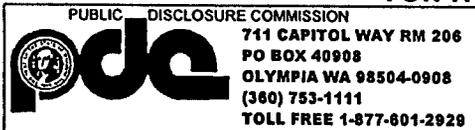
I am really so sorry about this - the last thing I want to do is be out of compliance with the PDC. It is important to me that my reports are correct and timely. It has been my own ignorance that caused this gap. I am now aware of how to add and how to remove clients, should the need ever arise again.

I look forward to the opportunity to amend the reports.

Sincerely,



Donna Christensen



LOBBYIST REGISTRATION

L1

(12/18)

THIS SPACE FOR OFFICE USE

DATE FILED PDC

APR 03 2019

1. Lobbyist Name Donna Christensen		Business Telephone Numbers Permanent (206) 478-2242 Temporary ()																																													
Permanent Business Address 15655 19 th Avenue SW		Cell Phone (206) 478-2242 or Pager																																													
City Burien	WA	Zip 98166																																													
2. Temporary Thurston County address during legislative session N/A		E-Mail Address donnaarchris@aol.com																																													
3. Employer's name and address (person or group for which you lobby) Catholic Community Services of Western Washington 100 23 rd Avenue S. Seattle, WA 98144		Employer's occupation, business or description of purpose of organization Non-profit human services																																													
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.) Peter Bernauer, 123 23 rd Avenue S. Seattle, WA 98144		Employer E-Mail Address PeterB@ccsww.org Phone Number (206) 328-5696																																													
5. What is your pay (compensation) for lobbying? \$ <u>5000</u> per <u>month</u> (hour, day, month, year) Other: Explain:		Description of employment (check one or more boxes) <input type="checkbox"/> Full time employee <input type="checkbox"/> Part time or temporary employee <input checked="" type="checkbox"/> Contractor, retainer or similar agreement <input type="checkbox"/> Unsalariated officer or member of group <input type="checkbox"/> Sole duty is lobbying <input checked="" type="checkbox"/> Lobbying is only a part of other duties																																													
6. Are you reimbursed for lobbying expenses? Explain which expenses. <input type="checkbox"/> Yes: \$ _____ per _____ <input type="checkbox"/> Yes: I am reimbursed for expenses. <input checked="" type="checkbox"/> 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? <input checked="" type="checkbox"/> Permanent lobbyist <input type="checkbox"/> Only during legislative session <input type="checkbox"/> 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. <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. However, no member or funder has paid, pays, or is expected to pay over \$1,450. <input type="checkbox"/> 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. <input checked="" type="checkbox"/> No <input type="checkbox"/> 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.) N/A																																															
11. Areas of interest. Lobbying is most frequent before legislative committee members or state agencies concerned with following subjects:		Remarks:																																													
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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 Donna Christensen		DATE 3/27/2019	EMPLOYER'S SIGNATURE, NAME TYPED OR PRINTED, AND TITLE Peter Bernauer, Secretary Peter BERNAUER																																												
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