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711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 TOLL FREE 1-877-601-2828



## LOBBYING BY STATE AND LOCAL GOVERNMENT AGENCIES

2018-10-11

2810

Agency or Governmental Entity Name and Address	Date prepared		Report for calendar quarter ending	
HIGHLINE SD 401	201	18-10-11	1	
15675 AMBAUM BLVD SW	County		SEP 2018	
BURIEN WA 98166	KII	1G	Month Year	
PERSONS WHO LOB	BIED THIS QUARTER			
Name Job title		Annual salary		
			during quarter	
Dill/MAC number. Consult description of labbring activities as abjectives				
Bill/WAC number General description of lobbying activities or objectives				
Check if person spent more than \$15 of non-public funds in lobbying				
Name Job title		Annual salary	% of time spent lobbying during quarter	
			during quarter	
Bill/WAC number General description of lobbying activities or objectives			1	
Observation and a second second the second s				
Check if person spent more than \$15 of non-public funds in lobbying  Name  Job title		Annual salary	O/ of time an ant labelying	
Thaine Sob title		Allitual Salary	% of time spent lobbying during quarter	
Bill/WAC number General description of lobbying activities or objectives				
☐ Check if person spent more than \$15 of non-public funds in lobbying				
EXPENDITURES FOR LO	BBYING THIS QUART	ER		
Report only the separately identifiable and measu	able expenditures incurred for	r lobbying purpose	S	
Salaries Of Persons Who Lobbied (Include only portion of quarterly salary attributable to lobbying)			\$0.00	
Travel (Include food, lodging, per diem payments and cost of transportation used)			\$0.00	
Brochures And Other Publications Whose Principal Purpose Is To Influence Legislation			\$0.00	
Consultants Or Other Contractual Services			\$4,374.00	
Total This Quarter				
			\$4,374.00	
	Total To Date This	Year	\$4,374.00 \$0.00	
CERTIFICATION: I certify that to the best of my knowledge the above is a	Total To Date This  Name of employee completi			
CERTIFICATION: I certify that to the best of my knowledge the above is a true, complete and correct statement in accordance with RCW 42.17.190.				
true, complete and correct statement in accordance with RCW 42.17.190.	Name of employee completi	ng report	\$0.00	
true, complete and correct statement in accordance	Name of employee complete AIMEE NGUYEN  Work telephone Number	ng report 206-631-307	\$0.00	

## **SERVICES ATTACHMENT** Report for calendar quarter ending Agency or Governmental Entity Name 2018 **Yea**r HIGHLINE SD 401 Month Date Name Amount 2018-07-19 HIGHLINE SD 401 \$1,458.00 Purpose LOBBYING AND LEGISLATIVE SUPPORT Name Amount 2018-08-17 HIGHLINE SD 401 \$1,458.00 Purpose LOBBYING AND LEGISLATIVE SUPPORT Date Name Amount 2018-09-18 HIGHLINE SD 401 \$1,458.00 Purpose LOBBYING AND LEGISLATIVE SUPPORT Date Name Amount Purpose Date Name Amount Purpose