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DATE FILED PDC

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Lobbyist Monthly Expense Report (as required by Chapter 397, 1995 Session Laws)

Lobbyist Name Heather Villanueva Mailing Address 215 Columbia City State Zip + 4 New Address? ☐ Yes No Seattle WA 98104 This report corrects or This report is Business Telephone Oct 2017 amends the report for for the period (206) 538 -5735 (Month) (Year) (Month) (Year) **ALL COMPLETE THIS PART** COMPLETE IF YOU HAVE MORE THAN ONE EMPLOYER Include all reportable expenditures by lobbyist and lobbyist's employer for or on behalf of the lobbyist Amount attributed to each employer incurred during the reporting period TOTAL AMOUNT Amounts paid from THIS MONTH **Employer** lobbyist's own funds, Employer Employer All employers plus not reimbursed or No. 1 No. __ No. _ own expense attributed to an (Columns a + b + c employer. **Expense Category** + d and attached Column B Column C Column D Column A pages) COMPENSATION earned from employer for lobbying this period (salary, wages, retainer) 0.00 0.00 \$PERSONAL EXPENSES for travel, food and refreshments 0.00 \$ 0.00 ENTERTAINMENT, GRATUITIES, TRAVEL, SEMINARS for state officials, employees, their families (See #15) 0.00 0.00 CONTRIBUTIONS to elected officials, candidates and political committees (See #16) 0.00 0.00 ADVERTISING, PRINTING, INFORMATIONAL LITERATURE 0.00 0.00 POLITICAL ADS, PUBLIC RELATIONS, POLLING, TELEMARKETING, ETC. (See #17) 0.00 0.00 OTHER EXPENSES AND SERVICES (See #18) 0.00 0.00 10. TOTAL COMPENSATION AND EXPENSES INCURRED THIS MONTH 0.00 \$ $0.00 \$ $0.00 \pm$ (Attach additional page(s) if you lobby for more than three employers) 11. EMPLOYERS' No. 1 (B) SEIU 775 215 Columbia St., Seattle, WA 98104 NAMES No. ____ (C) 12. Subject matter of proposed legislation or other legislative activity or rulemaking the lobbyist was supporting or opposing. Subject Matter, Issue or Bill No. Legislative Committee or State Agency Considering Matter Employer Represented **SEIU 775** ☐ Continued on attached pages 13. Of the time spent lobbying, what percentage was devoted to lobbying: the Legislature 90% State Agencies 14. TERMINATION: (COMPLETE THIS ITEM ONLY IF YOU WISH TO TERMINATE YOUR REGISTRATION) Date registration ends: Employer's name: I understand that an L-2 report is required for any month or portion thereof in which I am a registered lobbyist. I also understand that once I have terminated my registration, I must file a new registration prior to lobbying for that employer in the future All registrations terminate automatically on the second Monday in January of each odd numbered year. CERTIFICATION I certify that this report is true and complete to the best of my knowledge. LOBBYIST-SIGNATURE DATE

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Lob	byist Name Heat	ther Villanueva	Reportir Period	ng <u>Oct</u> (Month)	<u>2017</u> (Year)	
15.	 5. Itemize all of the following expenditures that were incurred by lobbyist or lobbyist employer(s) for legislators, state officials, state employees and members of their immediate family Show the actual amount incurred for each individual or the amount fairly attributed to each. • Entertainment expenditures exceeding \$25 per occasion (including lobbyist's expense) for meals, beverages, tickets, passes, or for other forms of entertainment. • Travel, lodging and subsistence expenses in connection with a speech, presentation, appearance, trade mission, seminar or educational program • Enrollment and course fees in connection with a seminar or educational program • Lobbyists must provide an elected official with a copy of the L-2 or Memo Report if the lobbyist reports: 1) spending on one occasion over \$50 for food or beverages for the official and, if permitted, the official's family. 					
	Date	Names of all Persons Entertained or Provided Travel, etc	Description, Place,	etc.	Sponsoring Employer	\$
	-	ا مستوم در ۱۳۰۶ میلید در ۱۳۰۰ میلید و در استان در این در استان در این در این در این در این در استان در این در در این در ای		nus .	and the second second	l une te tid g dame.
	N/A	Total expenses itemized on attached Memo Reports				→
16		n attached pages ary or in-kind contribution exceeding \$25 was given or transmitted	by the lebbyist to any of the f	following itemiz	e the contribution below or on a M	amo Penort: local and
10.	state cand	idates or elected officials; local and state officers or employees; p llot proposition. If a contribution exceeding \$25 was given to the t	olitical committees supporting	g or opposing ar	ny candidate, elected official, office	r or employee or any local
	Date	Name of Individual or Committee Receiving Contribution		Source of Conf	tribution	Amount
						\$
	N/A	Total contributions itemized on attached Memo Reports				····
		ions were made directly by a political action committee associated ort need not be again included in this L-2 report.)	d, affiliated or sponsored by y	our employer, s	how name of the PAC below. (Info	ormation reported by PAC
			75 Quality Care Cor			
17.	7. Expenditures for: a) political advertising supporting or opposing a state or local candidate or ballot measure; or b) public relations, telemarketing, polling or similar activities that directly or indirectly are lobbying-related must be itemized by amount, vendor or person receiving payment, and a brief description of the activity. Itemize each expenditure on an attached page that also shows lobbyist name and report date. Put the aggregate total of these expenditures on line 8.					
18.	18. Payments by the lobbyist for other lobbying expenses and services, including payments to subcontract lobbyists, expert witnesses and others retained to provide lobbying services assistance in lobbying and payments for grass roots lobbying campaigns (except advertising/printing costs listed in Item 7).					ovide lobbying services or
	Date	Recipient's Name and Address	Employer	for Whom Exp	ense was Incurred	Amount
П	Continued c	n attached page.		•		\$

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Lobbyist Name Heather Villanueva			0)	Reporting	Oct (Month)	<u>2017</u>		
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12. Subject Ma	atter, Issue or Bill No.	Legislative Commi	ttee or State Agency	Considering N	Matter	Employer Re	presented	
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15. Date N	ames of all Persons Entertair	ned or Provided Travel, etc.	Description	n, Place, etc.		Sponsoring Employe	r	Amount
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16. Date	Name of Individual or Commit	ttee Receiving Contribution	n yang _{da} Ostasi ser	Source	ce of Contribution) - ,		Amount
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(Use this page if you need additional space for Items 17 or 18)

Lobbyist Name Hea	ther Villanueva	Reporting Oct 2017 Period (Month) (Year)					
17. Date	Names of Vendor or Person Receiving Payment	Description, Place, etc.	Sponsoring Employer	Amount			
				\$			
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18. Date	Recipient's Name and Address	Employer for Whom Exp	ense was Incurred	Amount			
		-		\$			