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Clerk of the House of Representatives Legislative Resource Center B-106 Cannon Building Washington, DC 20515	Secretary of the Senate Office of Public Records 232 Hart Building Washington, DC 20510
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# LOBBYING REPORT

Lobbying Disclosure Act of 1995 (Section 5) - All Filers Are Required to Complete This Page

1. Registrant name Organization <b>Washington2 Advocates</b>	
2. Address <input type="checkbox"/> Check if different than previously reported P.O. Box 1462 City <b>Bellevue</b> State <b>WA</b> Zip Code <b>98009</b> Country <b>US</b>	
3. Principal place of business (if different than line 2) City _____ State _____ Zip Code _____ Country _____	
4a. Contact Name Prefix Full Name <b>Ms. Nina Collier</b>	b. Telephone number <b>425-467-6900</b>
c. E-mail <b>nina.collier@washington2advocat.</b>	
5. Senate ID # <b>63451-33</b>	
7. Client Name <input type="checkbox"/> Self <b>Pend Oreille Public Utility District</b>	6. House ID # <b>3551701</b>

**TYPE OF REPORT** 8. Year 2004 Midyear (January 1-June 30)  OR Year End (July 1-December)

9. Check if this filing amends a previously filed version of this report

10. Check if this is a Termination Report  ⇨ Termination Date \_\_\_\_\_

11. No Lobbying Acti

## INCOME OR EXPENSES - Complete Either Line 12 OR Line 13

<p align="center"><b>12. Lobbying Firms</b></p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> ⇨ \$ <u>40,000</u></p> <p>Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income from the client (including all payments to the registrant by any other entity for lobbying activities on behalf of the client).</p>	<p align="center"><b>13. Organizations</b></p> <p>EXPENSES relating to lobbying activities for this reporting were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input type="checkbox"/> ⇨ \$ _____</p> <p><b>14. REPORTING METHOD.</b> Check box to indicate expense accounting method. See instructions for description of opti</p> <p><input type="checkbox"/> <b>Method A.</b> Reporting amounts using LDA definitions of</p> <p><input type="checkbox"/> <b>Method B.</b> Reporting amounts under section 6033(b)(8), Internal Revenue Code</p> <p><input type="checkbox"/> <b>Method C.</b> Reporting amounts under section 162(e) of t Revenue Code</p>
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Form Co

Printed Name and Title Nina Collier, Member/Partner

*[Signature]* 2/11/05







Registrant Name Washington2 Advocates Client Name Pend Oreille Public Utility District

**Information Update Page - Complete ONLY where registration information has changed.**

20. Client new address

Address

City

State

Zip Code

Country

21. Client new principal place of business (if different than line 20)

City

State

Zip Code

Country

22. New general description of client's business or activities

**LOBBYIST UPDATE**

23. Name of each previously reported individual who is **no longer** expected to act as a lobbyist for the client

First Name

Last Name

Suffix

First Name

Last Name

Su

1

3

2

4

**ISSUE UPDATE**

24. General lobbying issues that **no longer** pertain

Find the code to select below.

**AFFILIATED ORGANIZATIONS**

25. Add the following affiliated organization(s)

Name	Address	Principal place of Business (city and state or country)
	Address C/S/Z	City State Country
	Address C/S/Z	City State

26. Name of each previously reported organization that is **no longer** affiliated with the registrant or client

1

2

3

**FOREIGN ENTITIES**

27. Add the following foreign entities

Name	Street Address City	Address State/Province Country	Principal place of business (city and state or country) City State Country	Amount of contribution for lobbying activities	Own perc clier

28. Name of each previously reported foreign entity that **no longer** owns, **or** controls, **or** is affiliated with the registrant, affiliated organization

1

3

5

2

4

6

Add a page for more

Printed Name and Title Nina Collier, Member/Partner

