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**Virginia Conflict of Interest and Ethics Advisory Council  
LOBBYIST REGISTRATION FORM (Rev. 4/05)**

Please send the original and a copy with a \$50.00 registration fee, made  
Payable to the Treasurer of Virginia to:

*Secretary of the Commonwealth  
Attn: Lobbyist Specialist  
1111 E. Broad St  
4<sup>th</sup> Floor  
Richmond, Virginia 23219*

**FOR OFFICE USE ONLY**  
**Principal Notification Date** \_\_\_\_\_  
**Date Received** \_\_\_\_\_  
**Fee Paid: Check #** \_\_\_\_\_ **Cash** \_\_\_\_\_

(1) **PRINCIPAL:** \_\_\_\_\_ Virginia Sexual and Domestic Violence Action Alliance

(1a) **What type of business is the principle engaged in:**

Statewide training, technical assistance, and advocacy on sexual and domestic violence intervention and prevention.

Officer of Principal authorizing your employment as a lobbyist, or to whom your expenditures will be reported. *The same name may not appear in items 2 and 5 of this form.*

(2) **Name:** \_\_\_\_\_ Kristi VanAudenhove

(2a) **Business Address:** \_\_\_\_\_ 5008 Monument Richmond, VA 23230

(2b) **Business Telephone:** \_\_\_\_\_ 8043770335

Officer of Principal who will retain **ALL** records, in behalf of the principal, with respect to your lobbying activities for their organization. If records are physically stored in another location, please so indicate in the space provided by item 3c.

(3) **Name:** \_\_\_\_\_ Kristi VanAudenhove

(3a) **Business Address:** \_\_\_\_\_ 5008 Monument Richmond, VA 23230

(3b) **Business Telephone:** \_\_\_\_\_ 8043770335

(3c) **Business Address/Telephone number of location where records are stored:**

\_\_\_\_\_  
\_\_\_\_\_

(4) **Please list the full name(s), business address(es), and telephone number(s) of all other individual(s) that are registered to lobby in behalf of the PRINCIPAL listed in item 1 of your registration form.**

Aimee Perron Siebert and Lauren Schmitt--The Hillbridge Group  
The Hillbridge Group  
28 N 8th Street  
Richmond, VA 23219  
804-647-3140

SECRETARY OF THE COMMONWEALTH  
LOBBYIST'S REGISTRATION  
Page Two

(5) **LOBBYIST:** Kristine Hall  
(5a) **Business Address:** 5008 Monument Avenue Richmond, VA 23230  
(5b) **Business Telephone:** 8043770335  
(5c) **E-Mail Address:** khall@vsdvalliance.org

Individual who will retain ALL records, on behalf of the lobbyist, with respect to your lobbying activities for the afore-designated principal. If records are physically stored in another location, please so indicate in the space provided in item 7d.

(6) **Name:** Kristi VanAudenhove  
(6a) **Business Address:** 5008 Monument Richmond, VA 23230  
(6b) **Business Telephone:** 8043770335  
(6c) **Business Address/Telephone number of location where records are stored:**

\_\_\_\_\_  
\_\_\_\_\_

(7) **Matters and purpose for which you expect to lobby:** (be as specific as possible in this response)

Supporting legislation and funding initiatives that enhance the prevention of and response to sexual and domestic violence. Oppose legislation the undermines victims' rights, perpetrator accountability, and victim safety

(8) **As a lobbyist, you are:** (check one)

- ☒ **Employed** (Lobbyist is on payroll of principal)  
☐ **Retained** (Lobbyist is not on payroll of principal, but is compensated)  
☐ **Not Compensated** (Lobbyist is not compensated, but expenses may be reimbursed)

(9) **If you are *employed* either part-time or full-time by the principal, please give your job title:**

Policy Director

**I, the undersigned lobbyist, do state that the information furnished on this registration statement and on any and all accompanying statements attached thereto, is to the best of my knowledge and belief, complete and accurate.**

Date: 12/04/2015 Lobbyist's Signature: Kristine Hall (Electronically Signed: 12/4/2015 3:09:18 PM UTC)