PUBLIC DISCLOSURE COMMISSION

pdc

711 CAPITOL WAY RM 206
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(360) 753-1111
Toll Free 1-877-601-2828

Candidate Registration

C1
(3/06)

MASON COUNTY AUDITOR
KAREN L. HERR

2007 JUN 18 P 3: 22

REQUEST OF:

Candidate's Name (Give candidate's full name.)
Kelley L. McIntosh

Candidate's Committee Name (Do not abbreviate.)

Telephone Number
(360) 801.6481

Fax Number
( )

Mailing Address
PO Box 1481

Candidate's E-Mail Address

City
Belfair

County
Mason

Zip + 4
98528

Campaign E-Mail Address

1. What office are you running for?
Fire Commissioner

Legislative District, County or City
MCFD #2

Position No.
4

Do you now hold this office?
Yes ☑   No ☐

2. Political party (if partisan office)

3. Date of general or special election
Nov 4 2007

4. How much do you plan to spend during your entire election campaign, including the primary and general elections? Based on that estimate, choose one of the reporting options below. **If no box is checked you are obligated to use Option II, Full Reporting.** See instruction manuals for information about reports required and changing reporting options.

☑ **Option I   MINI REPORTING:** In addition to my filing fee of $_____, I will raise and spend no more than $3,500, including any charges for inclusion in state and local voters pamphlets. I will not accept more than $300 in the aggregate from any contributor except myself.

☐ **Option II   FULL REPORTING:** I will use the Full Reporting system. I will file the frequent, detailed campaign reports required by law.

5. Treasurer's Name and Address. Candidate may be treasurer. List deputy treasurers on attached sheet. ☐ Continued on attached sheet

N/A

Daytime Telephone Number
( )

6. Committee Officers. List name, title and address. Continue on attached sheet if necessary. See reverse for definition of "officer." ☐ Continued on attached sheet

N/A

7. Campaign Bank or Depository

N/A

Branch

City

8. Related or Affiliated Political Committees. List name, address and relationship.

N/A

9. Campaign books must be open to the public by appointment between 8 a.m. and 8 p.m. during the eight days before the election, except Saturdays, Sundays, and legal holidays. In the space below, provide contact information for scheduling an appointment and the address where the inspection will take place. It is not acceptable to provide a post office box or an out-of-area address. ☐ Continued on attached sheet

Street Address, Room Number, City where campaign books will be available for inspection

In order to make an appointment, contact the campaign at (telephone, fax, e-mail): ( )

10. **CERTIFICATION:**
I certify that this report is true, complete and correct to the best of my knowledge.

Candidate's Signature
Kelley McIntosh

Date
6/17/07

SEE INSTRUCTIONS ON REVERSE