

## **AMENDED** Candidate

C1 DATE FILED PDC

(380) 753-1111	Jana	aato		(6/01)	MAT & LUUG
Tell Free 1-877-4	***** Regist	tration			
Candidate's Name (Give candidate's full name.)			1	Telephone Numbers	
Sally Clark			(	(206) 235-0363	
Candidate's Committee Name (Do not abbre	wiate.)		······································	·	
People for Sally Cla	ark 2011		(	( )	
Mailing Address			F	ax Number	
PO Box 2041			(	(206) 381-8597	
City	County	Zip + 4	i -	-Mail Addres	<b>S</b>
Seattle	King	98111-20	41		
1. What office are you running for?	· · · · · · · · · · · · · · · · · · ·	ve District, County or City	Po	sition No.	Do you now hold this office?  Yes No
City Council	<u> </u>	ty of Seattle	D. D. J C	9	
Political party (if partisan office)  N/A			,	general or special election vernber 2011	
How much do you plan to spend during your entire election campaign, including the primary and general election					
reporting options below. If no box is cleaning reporting options.	hecked you are obligated to use O	option il, Full Reporting. See	instruction ma	nuals for inf	ormation about reports required and
voters pamphlets. I will not acce	pt more than \$300 in the aggregate	from any contributor except m	yself.	cidoling any ci	raiges for inclusion in state and local
Option II FULL REPORTING:	will use the Full Reporting system.	I will file the frequent, detailed	d campaign repo	rts required b	y law.
<ol> <li>Treasurer's Name and Address. Candidate may be treasurer. List deputy treasurers on attached sheet.</li></ol>			Continued on at	tached sheet	Daytime Telephone Number
The project of the control of the co					(206) 382-5552
7. Campaign Bank or Depository		Branch			City
Bank of America		4 <sup>th</sup> and Madisor	n		Seattle, WA
8. Related or Affiliated Political Committees.	List name, address and relationship				
	·				
					Continued on attached sheet
<ol><li>Campaign books must be open to the publi between 8 a.m. and 8 p.m.; if the eighth da appointment between 8 a.m. and 8 p.m.</li></ol>	ry is a legal holiday – two consecutiv	e hours on the seventh day be	tween 8 a.m. an	d 8 p.m.: and	(b) on the other weekdays, by
Street Address, Room Number, City				Hours [Two consecutive hours; see 9(a)]	
603 Stewart Street #810 S	Coottle NAA 00101			1	0:00am - Noon
603 Stewart Street #819 Standard to make an appointment, contact the		in: (206)382-5552		·	
10. CERTIFICATION:		· · · · · · · · · · · · · · · · · · ·			
l certify that this report is true, complete a Candidate's Signature	nd correct to the best of my knowled	dge.	ъ.,		
	N		Date		<i>)</i>
Sam Va	want-		20	Miss.	1 03
Please advise us about which forms and Statement (F-1) unless a current one is a	instructions you need. Remember	er, candidates must file a Fil boxes that apply.	nancial Affairs	Dist	ribution of This Report:
I already have financial affairs and campaign disclosure forms and instructions.				OR	GINAL - Public Disclosure Commission
I am using Mini Reporting and, therefore, do not need the other campaign disclosure forms. In addition, I have filed my Financial Affairs Statement and need no additional F-1 forms.			on, I have alread	y   co	PY - County Elections Office (Auditor)
I will obtain all forms and instruction					PY - Your own records
I want PDC to mail me:  the	F-1 instruction booklet (which include	des forms)			te: City candidates contact City Clerk to if local filing is required.)