DISCLOSURE COMMISSION

711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908

Political Committee Registration

C1PC DATE FILED PDC

i i			(1/2006)	SEP	19 2008	
Committee Name (Show entire official name.) Yes for EMS		Acı	onym:			
Tes for Livio			Telephone: (253) 307-6400			
Mailing Address		Tel	epnone: (203)	307-0400		
4001 58 th St Ct NW		Fa	c ()			
City County		Zip + 4	<u> </u>			
Gig Harbor P	ierce	98335 E-r	nail: kauppila	4@centurytel.net		
NEW OR AMENDED REGISTRATION?	COMMITTEE STATUS					
NEW. Complete entire form. Continuing (On-going; not established in anticipation of any particular campaign election.) AMENDS previous report. Complete entire form. (Year)						
What is the purpose or description of the committee?						
☐ Bona Fide Political Party Committee - official state or count of the names of the candidates you support.	y central committee or legislat	tive district committee. If you a	re not supporting	the entire party tio	ket, attach a list	
Ballot Committee - Initiative, Bond, Levy, Recall, etc. Name or description of ballot measure: Pierce County Fire District 5 EMS levy renewal				Ballot Number Prop 1	FOR AGAINST	
Other Political Committee - PAC, caucus committee, politica name:	al club, etc. If committee is rel	lated or affiliated with a busine	ss, association, u	nion or similar ent	ity, specify	
For single election-year only committees (not continuing com (a) one or more candidates? Yes No If yes, attack	mittees): Is the committee sin a list of each candidate's nar	upporting or opposing me, office sought and political	party affiliation.			
(b) the entire ticket of a political party?	If yes, identify the party:					
2. Related or affiliated committees. List name, address and relation	onship.					
How much do you plan to spend during this entire election cambelow. (If your committee status is continuing, estimate spendial of the box is checked you are chillrated to use Sull Report.)	ng on a calendar year basis.)			hoose one of the		
If no box is checked you are obligated to use Full Report MINI REPORTING	ung. See instruction manual	_		changing report	ng options.	
Mini Reporting Mini Reporting is selected. No more than \$5,000 will be raised or spent and no more than \$500 in the aggregate will be accepted from any one contributor. Full Reporting is selected. The frequent, detailed campaign reports mandated by law will be filed as required.						
Campaign Manager's or Media Contact's Name and Address				Telephone Number:		
			1/25	3) 208-1773		
Scott Duncan 7012 42 ^{rx}	St NW Gig Harbor,	WA 98335	(25.			
				me Telenhone Nu	mher	
Treasurer's Name and Address. Does treasurer perform only mext page for details. List deputy treasurers on attached sheet.			13 and Dayti	me Telephone Nu	mber:	
Treasurer's Name and Address. Does treasurer perform only ment page for details. List deputy treasurers on attached sheet.	ninisterial functions? Yes	No _x See WAC 390-05-24	13 and Dayti	me Telephone Nu 3) 307-6400	mber:	
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