



# Political Committee Registration

**C1pc**  
(1/2008)

DATE FILED PDC  
SEP 16 2009

Committee Name (Show entire official name.)  
**Pierce County District 16 "FOR" Committee**

Acronym: \_\_\_\_\_

Telephone: (310) 594-6555

Mailing Address  
**222 Lorenz Rd KPN**

Fax: N/A

City: **Lakebay** County: **WA** Zip + 4: **98349**

E-mail: **anezzy@earthlink.net**

NEW OR AMENDED REGISTRATION?  
 NEW. Complete entire form.  
 AMENDS previous report. Complete entire form.

COMMITTEE STATUS  
 Continuing (On-going; not established in anticipation of any particular campaign election.)  
 \_\_\_\_\_ election year only. Date of general or special election: \_\_\_\_\_ (Year)

1. What is the purpose or description of the committee?  
 **Bona Fide Political Party Committee** - official state or county central committee or legislative district committee. If you are not supporting the entire party ticket, attach a list of the names of the candidates you support.

**Ballot Committee** - Initiative, Bond, Levy, Recall, etc. Name or description of ballot measure: \_\_\_\_\_

Ballot Number: \_\_\_\_\_ FOR  AGAINST

**Other Political Committee** - PAC, caucus committee, political club, etc. If committee is related or affiliated with a business, association, union or similar entity, specify name: \_\_\_\_\_

**For single election-year only committees (not continuing committees):** Is the committee supporting or opposing  
 (a) one or more candidates?  Yes  No If yes, attach a list of each candidate's name, office sought and political party affiliation.  
 (b) the entire ticket of a political party?  Yes  No If yes, identify the party: \_\_\_\_\_

2. Related or affiliated committees. List name, address and relationship.  Continued on attached sheet.

3. How much do you plan to spend during this entire election campaign, including the primary and general elections? Based on that estimate, choose one of the reporting options below. (If your committee status is continuing, estimate spending on a calendar year basis.)  
 If no box is checked you are obligated to use Full Reporting. See instruction manuals for information about reports required and changing reporting 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**  
 Full Reporting is selected. The frequent, detailed campaign reports mandated by law will be filed as required.

4. Campaign Manager's or Media Contact's Name and Address  
**Anne Nesbit** 222 Lorenz Rd KPN, Lakebay, WA 98349 Telephone Number: (310) 594-6555

5. Treasurer's Name and Address. Does treasurer perform only ministerial functions? Yes \_\_\_ No X See WAC 390-05-243 and next page for details. List deputy treasurers on attached sheet.  Continued on attached sheet.

**Jason Learned** 806 E 47<sup>th</sup> St, Tacoma, WA 98404 Daytime Telephone Number: (253) 820-9868

6. Persons who perform only ministerial functions on behalf of this committee and on behalf of candidates or other political committees. List name, title, and address of these persons. See WAC 390-05-243 and next page for details.  Continued on attached sheet.

**Randall Niven** PO Box 723, Bremerton, WA 98337 503-310-4277

7. Committee Officers and other persons who authorize expenditures or make decisions for committee. List name, title, and address. See next page for definition of "officer."  Continued on attached sheet.

8. Campaign Bank or Depository  
**Sound Credit Union** Branch: **Key Center** City: **Lakebay**

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.  
**Street Address, Room Number, City where campaign books will be available for inspection**  
**8905 Key Peninsula Highway N, Lakebay, WA 98349**  
 In order to make an appointment, contact the campaign at (telephone, fax, e-mail): **(253) 820-9868**

10. **Eligibility to Give to State Office Candidates:** During the 180 days prior to making a contribution to a state office candidate, your committee must have received contributions of \$10 or more from at least ten persons registered to vote in Washington State.  
 A check here indicates your awareness of and pledge to comply with this provision. Absence of a check mark means your committee does not qualify to give to state office candidates (legislative and statewide executive candidates).

11. **Signature and Certification.** I certify that this statement is true, complete and correct to the best of my knowledge.

Committee Treasurer's Signature: \_\_\_\_\_ Date: 09/01/2009

SEE INSTRUCTIONS ON NEXT PAGE

<b>PUBLIC DISCLOSURE COMMISSION</b> 711 CAPITOL WAY RM 208 PO BOX 40000 OLYMPIA WA 98504-0000 (360) 753-1111 Toll Free 1-877-601-3828	<b>Political Committee Registration</b>	DATE FILED PDC <b>C1 PC</b> (1/2008) SEP 16 2009	SEP 16 2009 DATE FILED PDC JUN 11 2009
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Committee Name (Show entire official name.) <b>Pierce County District #16 Levy "FOR" Committee</b>		Acronym:
Mailing Address <b>PO Box 339</b>		Telephone: <b>(503) 310-4277</b>
City <b>Vaughn</b>	County <b>Pierce</b>	Zip + 4 <b>98394</b>
NEW OR AMENDED REGISTRATION? <input checked="" type="checkbox"/> <b>NEW</b> . Complete entire form. <input type="checkbox"/> <b>AMENDS</b> previous report. Complete entire form.		COMMITTEE STATUS <input type="checkbox"/> Continuing (On-going; not established in anticipation of any particular campaign election.) <input checked="" type="checkbox"/> <b>2009</b> election year only. Date of general or special election: <b>8/18/2009</b> (Year)
E-mail: <b>Obadiah@aracnet.com</b>		Fax: ( )

1. What is the purpose or description of the committee?

**Bona Fide Political Party Committee** - official state or county central committee or legislative district committee. If you are not supporting the entire party ticket, attach a list of the names of the candidates you support.

**Ballot Committee** - initiative, Bond, Levy, Recall, etc. Name or description of ballot measure: \_\_\_\_\_

	Ballot Number	FOR <input checked="" type="checkbox"/>	AGAINST <input type="checkbox"/>
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**Other Political Committee** - PAC, caucus committee, political club, etc. If committee is related or affiliated with a business, association, union or similar entity, specify name: \_\_\_\_\_

**For single election-year only committees** (not continuing committees): Is the committee supporting or opposing

(a) one or more candidates?  Yes  No If yes, attach a list of each candidate's name, office sought and political party affiliation.

(b) the entire ticket of a political party?  Yes  No If yes, identify the party: \_\_\_\_\_

2. Related or affiliated committees. List name, address and relationship.  Continued on attached sheet.

3. How much do you plan to spend during this entire election campaign, including the primary and general elections? Based on that estimate, choose one of the reporting options below. (If your committee status is continuing, estimate spending on a calendar year basis.)

If no box is checked you are obligated to use Full Reporting. See instruction manuals for information about reports required and changing reporting 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**  
Full Reporting is selected. The frequent, detailed campaign reports mandated by law will be filed as required.

4. Campaign Manager's or Media Contact's Name and Address <b>Randall Niven PO Box 339, Vaughn WA 98394</b>	Telephone Number: <b>(503 ) 310-4277</b>
5. Treasurer's Name and Address. Does treasurer perform <u>only</u> ministerial functions? Yes ___ No X See WAC 390-05-243 and next page for details. List deputy treasurers on attached sheet. <span style="float: right;"><input type="checkbox"/> Continued on attached sheet.</span>	Daytime Telephone Number: <b>(503 ) 310-4277</b>
6. Persons who perform <u>only</u> ministerial functions on behalf of this committee <u>and</u> on behalf of candidates or other political committees. List name, title, and address of these persons. See WAC 390-05-243 and next page for details. <span style="float: right;"><input type="checkbox"/> Continued on attached sheet.</span>	

7. Committee Officers and other persons who authorize expenditures or make decisions for committee. List name, title, and address. See next page for definition of "officer."  Continued on attached sheet.

8. Campaign Bank or Depository <b>Sound Credit Union</b>	Branch <b>8920 Key Peninsula Hwy N</b>	City <b>Key Center</b>
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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.

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

**9617 186<sup>th</sup> Ave Kp N, Vaughn WA 98394**

In order to make an appointment, contact the campaign at (telephone, fax, e-mail): **(503 ) 310-4277**

10. Eligibility to Give to State Office Candidates: During the 180 days prior to making a contribution to a state office candidate, your committee must have received contributions of \$10 or more from at least ten persons registered to vote in Washington State. <input type="checkbox"/> A check here indicates your awareness of and pledge to comply with this provision. Absence of a check mark means your committee does not qualify to give to state office candidates (Initiatives and statewide executive candidates).	11. Signature and Certification. I certify that this statement is true, complete and correct to the best of my knowledge. Committee Treasurer's Signature <b>Randall Niven</b> Date <b>6/18/09</b> <i>by Sheila Hunt</i>
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