



# Candidate Registration

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(301)

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OCT 22 2009

Public Disclosure Commission

Candidate's Name (Give candidate's full name.) **CRAIG HUSA** Telephone Numbers **(425) 222-7205**

Candidate's Committee Name (Do not abbreviate.) **Craig Husa**

Mailing Address **33354 SE 55th Street** Fax Number

City **Fall City** County **KING** Zip + 4 **98024** E-Mail Address **craig.svsd@husas.com**

1. What office are you running for? **SCHOOL DIRECTOR** Legislative District, County or City **SNOOQUALMIE VALLEY SD 410** Position No. **3** Do you now hold this office? Yes  No

2. Political party (if partisan office) **SCHOOL DIRECTOR** 3. Date of general or special election **11/03/2009**

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 \$ 50 .00 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 Daytime Telephone Number **(425) 444-1121**  
**Craig Husa**  
**33354 SE 55th Street Fall City, WA 98024**

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

7. Campaign Bank or Depository Branch City

8. Related or Affiliated Political Committees. List name, address and relationship.  Continued on attached sheet

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**  
**33354 SE 55th Street Fall City**

In order to make an appointment, contact the campaign at (telephone, fax, e-mail): **craig.svsd@husas.com**

10. CERTIFICATION: I certify that this report is true, complete and correct to the best of my knowledge.  
Candidate's Signature  Date **10/22/2009**

Please advise us about which forms and instructions you need. Remember, candidates must file a Financial Affairs Statement (F-1) unless a current one is already on file with PDC. Check all boxes that apply.  
 I already have financial affairs and campaign disclosure forms and instructions.  
 I am using Mini Reporting and, therefore, do not need the other campaign disclosure forms. In addition, I have already filed my Financial Affairs Statement and need no additional F-1 forms.  
 I will obtain all forms and instructions from my county elections office.  
 I want PDC to mail me:  the F-1 instruction booklet (which includes forms)  the appropriate campaign disclosure forms and instructions.  
Distribution of This Report:  
ORIGINAL - Public Disclosure Commission  
COPY - County Elections Office (Auditor)  
COPY - Your own records  
(Note: City candidates contact City Clerk to see if local filing is required.)