

## Political Committee

date filed foc

9-1-2010

PO BOX 40908 OLYMPIA WA 98504-0908 (380) 753-1111 Toll Free 1-877-601-2828	Registration	(1/2004	PC   SEP - 2 2010
Committee Name (Show entire official name.)		Acronym:	HELP
Help Eastmont Le	ayy Pass.	Telephone:	(509) 886-4746
Mailing Address	41		
801 Eastment Avenu		Fax:	(59) 886-4329
East Wenatchee		_	+RobFish@gmail.com
NEW OR AMENDED REGISTRATION?	COMMITTEE STATUS		<i>3</i>
NEW. Complete entire form.  AMENDS previous report. Complete entire form		ot established in anticipation of any only. Date of general or special ele	
1. What is the purpose or description of the committee	e?		
☐ Bona Fide Political Party Committee - official st of the names of the candidates you support.	ate or county central committee or legislati	ve district committee. If you are not	supporting the entire party ticket, attach a lis
Ballot Committee - Initiative, Bond, Levy, Recall East ment School D1 Strict #206	etc. Name or description of ballot measur Bond for Expansion, Renoval	re: hichatImprovement of Sol	Bailot Number FOR AGAINS
Other Political Committee - PAC, caucus commname:	nittee, political club, etc. If committee is rela	ated or affiliated with a business, ass	sociation, union or similar entity, specify
For single election-year only committees (not con (a) one or more candidates? Yes No (b) the entire ticket of a political party? Yes	tinuing committees): Is the committee sure if yes, attach a list of each candidate's nar		iffiliation.
2. Related or affiliated committees. List name, addre	ss and relationship.		☐ Continued on attached sheet.
3. How much do you plan to spend during this entire of below. (If your committee status is continuing, esting the status is continu	mate spending on a calendar year basis.) Full Reporting. See instruction manual \$5,000 will be raised or spent and no more defrom any one contributor.	s for information about reports red	quired and changing reporting options.  The frequent, detailed campaign reports
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Dr. Robert Merrill, 801 Eastmun	THrenue, SuiteB, East We	natchee, WA 18802	<u> </u>
<ol><li>Treasurer's Name and Address. Does treasurer ponext page for details. List deputy treasurers on att</li></ol>	erform <u>only</u> ministerial functions? Yes ached sheet.	No K. See WAC 390-05-243 and Continued on attached	Daytime Telephone Number:
shoot. Dr. Robert Merrill, Rol East	mont avenue, suites ; East	Weintchee, WA 48802	(509) 886-4746
<ol> <li>Persons who perform only ministerial functions on persons. See WAC 390-05-243 and next page for sheet.</li> </ol>		andidates or other political committe	es. List name, title, and address of these  Continued on attached
7. Committee Officers and other persons who authorized	ze expenditures or make decisions for com	mittee. List name, title, and address	See next page for definition of "officer."  Continued on attached sheet.
8. Campaign Bank or Depository		anch	City
Washington Trust		ast Wenatchee	East Wenatchee
<ol><li>Campaign books frust be open to the public by app holidays. In the space below, provide contact infor post office box or an out-of-area address.</li></ol>			
	where campaign books will be available, Suite B, East We		
In order to make an appointment, contact the camp		886-4746	
Eligibility to Give to State Office Candidates: E contribution to a state office candidate, your comm \$10 or more from at least ten persons registered to the contribution of the con	During the 180 days prior to making a nittee must have received contributions of	11. Signature and Certification. and correct to the best of my know	
A shook been indicated your pays and a	d at a day of a second could be the second of an	Committee Treasurer's Sig	jnature <sub>)</sub> Date

☐ 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).