


PUBLIC DISCLOSURE COMMISSION  711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 Toll Free 1-877-601-2828		<h1>Candidate Registration</h1>		<h1>C1</h1> (1/2008)	100392952 12-11-2010
Candidate's Name (Give candidate's full name.)				Telephone Number	
CHRISTINE N ROLFES				206-842-8029	
Candidate's Committee Name (Do not abbreviate.)				Fax Number	
PEOPLE FOR CHRISTINE ROLFES					
Mailing Address				Candidate's E-Mail Address	
PMB 118, 19689 7TH AVE. NE				CROLFES@SOUNDDSL.COM	
City		County		Zip + 4	
POULSBO		KITSAP		98370	
				Campaign E-Mail Address	
				info@electchristine.com	
1. What office are you running for?		Legislative District, County or City		Position No. Do you now hold this office?	
STATE REPRESENTATIVE		LEG DISTRICT 23 - HOUSE		02 Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
2. Political party (if partisan office)			3. Date of general or special election		
DEMOCRAT			11-06-2012		
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.					
<input type="checkbox"/> Option I MINI REPORTING: In addition to my filing fee of \$_____, I will raise and spend no more than \$5,000, including any charges for inclusion in state and local voters pamphlets. I will not accept more than \$500 in the aggregate from any contributor except myself.					
<input checked="" type="checkbox"/> 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. Does treasurer perform <u>only</u> ministerial functions? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> . See WAC 390-05-243 and next page for details. List deputy treasurers on attached sheet.				Daytime Telephone Number	
LINDA ZIMLICKI-OWENS 11018 ARROW POINT DR., BAINBRIDGE ISLAND WA 98110				206-842-6255	
6. Persons who perform only ministerial functions on your behalf <u>and</u> on behalf of other candidates or political committees. List name, title and address of these persons. See WAC 390-05-243 and next page for details. <input type="checkbox"/> Continued on attached sheet.					
7. Committee Officers and other persons who authorize expenditures or make decisions on your behalf. List name, title and address. See next page for definition of "officer." <input type="checkbox"/> Continued on attached sheet.					
8. Campaign Bank or Depository		Branch		City	
WELLS FARGO		BAINBRIDGE ISLAND		BAINBRIDGE ISLAND	
9. Related or Affiliated Political Committees. List name, address and relationship. <input type="checkbox"/> Continued on attached sheet.					
10. 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 11018 ARROW POINT DR., BAINBRIDGE ISLAND In order to make an appointment, contact the campaign at (telephone, fax, e-mail): 360-471-4592 CROLFES@SOUNDDSL.COM					
11. CERTIFICATION:					
I certify that this report is true, complete and correct to the best of my knowledge.					
Candidate's Signature				Date	
CHRISTINE N ROLFES				12-11-2010	