

Candidate

C1 DATE FILED PDC

| didate's Name (Give candidate's full name.) | | 1 | (11/10) | JUN 27 2011 |
|---|--|---|-----------------|--|
| didates realine (Give calididates full fiame.) | | | | Telephone Number |
| Gary W. Nystul | | | | (360) 697-2453 |
| didate's Committee Name (Do not abbreviate.) | | | | Fax Number |
| None | | | | ()none |
| 700 Jensen Way NE | | *************************************** | | Candidate's E-Mail Address |
| | County | Zip + 4 | | Campaign E-Mail Address |
| Poulsbo | WA | 98370- | 7499 | N/A |
| What office are you running for? Poulsbo City Council | Legislative District, County or City | Po | sition No. 3 | Do you now hold this office? Yes No X |
| Political party (if partisan office) | | 3. Date of gen | eral or specia | election |
| | | 11/8/201 | 11 | |
| local voters pamphlets. I will not accept r Option II FULL REPORTING: I will use | n to my filing fee of \$_60.00, I will raise and spend more than \$500 in the aggregate from any contributor except the Full Reporting system. I will file the frequent, detailed | ept myself. | | w. |
| Treasurer's Name and Address. Does treasur page for details. List deputy treasurers on atta | | ee WAC 390-05-2 Continued on atta | | Daytime Telephone Number |
| None | | | | () |
| 390-05-243 and next page for details. None | | | | ☐ Continued on attached sheet. |
| None | nthorize expenditures or make decisions on your behalf. Li | ist name, title and | address. See | |
| None | nthorize expenditures or make decisions on your behalf. Li | ist name, title and | address. See | next page for definition of "officer." |
| None Committee Officers and other persons who au None Campaign Bank or Depository | ithorize expenditures or make decisions on your behalf. Li | ist name, title and | address. See | next page for definition of "officer." |
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| None Committee Officers and other persons who automate None Campaign Bank or Depository None Related or Affiliated Political Committees. List None Campaign books must be open to the public beholidays. In the space below, provide contact post office box or an out-of-area address. Street Address, Room Number, City where | Branch | t days before the e | election, excep | next page for definition of "officer." Continued on attached sheet. City Continued on attached sheet. |
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