

**Candidate
 Registration**

C1
 (11/10)

DATE FILED PDC

JUL 20 2011

Candidate's Name (Give candidate's full name.) RALPH GUTSCHMIDT		Telephone Number (360) 376-7879
Candidate's Committee Name (Do not abbreviate.)		Fax Number (360) 376-7879
Mailing Address PO BOX 191 EASTSOUND, WA 98245		Candidate's E-Mail Address LoriandRalph@hotmail.com
City EASTSOUND	County SAN JUAN	Zip + 4 98245
Campaign E-Mail Address LoriandRalph@hotmail.com		
1. What office are you running for? CHARTER REVIEW COMMISSIONER		Legislative District, County or City Position No. Do you now hold this office? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
2. Political party (if partisan office) N/A		3. Date of general or special election NOV 8, 2011
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 checked="" type="checkbox"/> Option I MINI REPORTING: In addition to my filing fee of \$ 6 , 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 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 ___ No ___ See WAC 390-05-243 and next page for details. List deputy treasurers on attached sheet. UNKNOWN NONE		Daytime Telephone Number N/A
6. Persons who perform only ministerial functions on your behalf and 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. RALPH GUTSCHMIDT		
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." sheet. <input type="checkbox"/> Continued on attached sheet. NONE		
8. Campaign Bank or Depository N/A	Branch	City
9. Related or Affiliated Political Committees. List name, address and relationship. sheet. <input type="checkbox"/> Continued on attached sheet. NONE		
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 294 PARADISE LOST WAY, EASTSOUND, WA 98245 In order to make an appointment, contact the campaign at (telephone, fax, e-mail): (360) 376-7879		
11. CERTIFICATION: I certify that this report is true, complete and correct to the best of my knowledge. Candidate's Signature Ralph Gutschmidt Date 07/20/11		