PUBLIC DISCLOSURE COMMISSION 711 CAPITOL WAY RM 201 PO BOX 40908 0LYMPIA WA 98504-0908 (360) 753-1111 Toll Free 1-877-601-2828					
Candidate's Name (Give candidate's full name.)					

## Candidate

C1 DATE HILED PDC

SEE INSTRUCTIONS ON NEXT PAGE

	OLYMPIA WA 98504-0908 (360) 753-1111 Toli Free 1-877-601-2828	Registration		(11/10)	でき <b>っ620</b> 00		
Can	didate's Name (Give candidate's full name.)		Telephone Number				
	Larry Gossett	(206) 382-5552					
Can	didate's Committee Name (Do not abbreviate.)		(200) 302-3332 Fax Number				
Can	, ,	( )					
	Gossett for County Counci	_	,				
Mail	PO Box 22444				Candidate's E-Mail Address larrygossett09@gmail.com		
City		County	Zip + 4		Campaign E-Mail Address		
	_Seattle	King	98122		phil@seattlecfo.com		
1.	What office are you running for?  County Council Member	Legislative District, County or City King Co.	l	Position No. 02	Do you now hold this office? Yes No		
2.	Political party (if partisan office)			eneral or specia	l election		
	NA		11/0	3/2015			
t	<ul> <li>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.</li> <li>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.</li> <li>Option II FULL REPORTING: I will use the Full Reporting system. I will file the frequent, detailed campaign reports required by law.</li> </ul>						
5.	Treasurer's Name and Address. Does treasurer perfo		ee WAC 390-05		Daytime Telephone Number		
	Philip Lloyd 603 Stewart St Ste 8	_			(206) 382-5552		
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."  Continued on attached sheet.							
8.	Campaign Bank or Depository	Branch		_	City		
	Key Bank	2 <sup>nd</sup> & Marion			Seattle		
9.	Related or Affiliated Political Committees. List name,	address and relationship.			☐ 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 603 Stewart St Ste 819, Seattle  In order to make an appointment, contact the campaign at (telephone, fax, e-mail): ( 206 ) 382-5552 phil@seattlecfo.com						
11.	CERTIFICATION: I certify that this report is true, complete and correct to the best of my knowledge.  Candidate's Signature  Date  2-6-1/Z						