

711 CAPITOL WAY RM 206 PO BOX 40906 PO BOX 40906

FFB -8 2012

	OLYMPIA WA 98504-0908 (360) 753-1111 Toll Free 1-877-601-2828	Regi	stration		(1/12)		
Committee Name (Include sponsor in committee name. See next page for definition of "sponsor." Show entire official name. Do not use abbreviations or acronyms in this box.)					Acronym: CKCQE2012		
CENTRAL KITSAP CITIZONS FOR QUALITY EDUCATION 2012					Telephone: (360) 981-4888		
Mailing Address PO BOX 884					Fax: ()	
City		County		Zip + 4	Tuk.	/	
BREMERTON		•	TSAP	98337	E-mail: J2B	SURCH@YAHOO.COM	
NEW OR AMENDED REG	SISTRATION?		COMMITTEE STATUS	6			
☐ NEW. Complete entire form. ☐ Continuing (On-going; not established in antici							
AMENDS previous 1. What is the purpose or o	ous report. Complete entire description of the committee		XXX 2012 election	year only. Date of general o	r special election:	2/14/2012_ (Year)	
☐ Bona Fide Political Pa of the names of the car		ate or county	central committee or legi	islative district committee. If	you are not suppor	rting the entire party ticket, attach a list	
Ballot Committee - Initiative, Bond, Levy, Recall, etc. Name or description of ballot measure: School support						Ballot Number FOR AGAINST XX [
Other Political Comm	nittee - PAC, caucus comm	ittee, political	club, etc. If committee is	s related or affiliated with a b	usiness, associatio	on, union or similar entity, specify	
For single election-year of (a) one or more candidates				ee supporting or opposing name, office sought and po	litical party affiliatio	n.	
(b) the entire ticket of a po	litical party? Yes	□ No	If yes, identify the party:				
2. Related or affiliated com	mittees. List name, addres	ss and relation	nship.			_	
0 Harrison b. da		1	-i i			Continued on attached sheet	
	to spend during this entire e ee status is continuing, estir				ased on that estima	ate, choose one of the reporting options	
If no box is checked	l you are obligated to use	Full Reporti	ng. See instruction mar	nuals for information about	t reports required	and changing reporting options.	
MINI REPORTI	NG			XXIX FULL	REPORTING		
	is selected. No more than a e aggregate will be accepte			nore Full Reporting		e frequent, detailed campaign reports s required.	
4. Campaign Manager's or Media Contact's Name and Address JOHN Q BURCH PO BOX 884 BREMERTON, WA. 98337					L L	Telephone Number: (360) 981-4888	
5. Treasurer's Name and Address. Does treasurer perform only ministerial functions? Yes No XX See WAC 390-05-243 and next page for details. List deputy treasurers on attached sheet.						Daytime Telephone Number:	
JOHN Q BURCH PO BOX 884 BREMERTON, WA. 98337						(360) 981-4888	
6. Persons who perform only ministerial functions on behalf of this committee and on behalf of candidates or other political committees. List name, title, and address of these persons. See WAC 390-05-243 and next page for details.							
7. Committee Officers and	other persons who authorize	e expenditure	es or make decisions for	committee. List name, title,	and address. See	next page for definition of "officer."	
☐ Continued on attached sheet. JULIETTA HOKANSON, CO-CHAIR, 11170 ANDERSON LANDING NW, SILVERDALE, WA. 98383							
ROBERT RAM	ISEY, CO-CHAIR,	PO BOX	559 SEABECK, V	VA. 98383	•	00000	
		5606 NW	BRYAN RD, BR	EMERTON, WA. 98	3311		
8. Campaign Bank or Depo KITSAP BANK				Branch SILVERDALE		City SILVERDALE	
	ride contact information for					t Saturdays, Sundays, and legal holidays. s not acceptable to provide a post office	
Street Address, Room Number, City where campaign books will be available for inspection							
7805 FOREST RIDGE DR. BREMERTON, WA. 98310							
In order to make an appointment, contact the campaign at (telephone, fax, e-mail): (360) 981-4888 10. Eligibility to Give to Political Committees and State Office Candidates: A committee 11. Signature and Certification. I certify that this statement is true, complete							
must receive \$10 or contributing to a Wast prior to making a co	Political Committees and more each from ten Wi- hington State political com- portribution to a state office of \$10 or more each from	ashington St mittee. Addit ce candidate	ate registered voters be ionally, during the six mo your committee must t	efore and correct to the of onths have Committee Ti		ure Date	
	ates your awareness of an	ee does not d			/ h	119979012	