

711 CAPITOL WAY RM 206 PO BOX 40000 OLYIMPIA WA 98504-0906 (380) 753-1111 Toll Pree 1-877-801-2828	Registration	C1P(	JAN 18 2013
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.)  Franklin County Republican Central Committee		Acronym: FC	CRCC
		Telephone: (	)
Mailing Address P O Bo× イ390		Fax: (	)
Pasco Fra	county zip+ 2 nklin 9930.	2 - 4390 E-mail:	
NEW OR AMENDED REGISTRATION?  ONEW. Complete entire form.  ONEW. Complete entire form.			
1. What is the purpose or description of the committee?    Bona Fide Political Party Committee - official state or county central committee or legislative district committee. If you are not supporting the entire party ticket, attach a list of the names of the candidates you support.			
☐ Ballot Committee - Initiative, Bond, Levy, Recall	, etc. Name or description of ballot measure	:	Bailot Number FOR AGAINST
Other Political Committee - PAC, caucus committee, political club, etc. If committee is related or affiliated with a business, association, union or similar entity, specify name:			
For single election-year only committees (not continuing committees): Is the committee supporting or opposing (a) one or more candidates?  Yes  No If yes, attach a list of each candidate's name, office sought and political party affiliation.  (b) the entire ticket of a political party?  Yes  No If yes, identify the party:			
Related or affiliated committees. List name, addre     A	ss and relationship.		☐ Continued on attached sheet.
3. How much do you plan to spend during this entire election campaign, including the primary and general elections? Based on that estimate, choose one of the reporting options below. (If your committee status is continuing, estimate spending on a calendar year basis.)			
If no box is checked you are obligated to use Full Reporting. See instruction manuals for information about reports required and changing reporting options.  MINI REPORTING  Mini Reporting is selected. No more than \$5,000 will be raised or spent and no more than \$500 in the aggregate will be accepted from any one contributor.  Full Reporting is selected. The frequent, detailed campaign reports mandated by law will be filed as required.			
4. Campaign Manager's or Media Contact's Name ar L. Brad Peck, 200 N. Ro	oad 34, Pasco WA99	301	Telephone Number: (509) 547-0334
5. Treasurer's Name and Address. Does treasurer perform only ministerial functions? Yes X No See WAC 390-05-243 and next page for details. List deputy treasurers on attached sheet.    Continued on attached   Continued on attached			
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.  Continued on attached sheet.  Con Larsen, 3320 W. Pearl St., Pasco WA 99301			
7. Committee Officers and other persons who authorize expenditures or make decisions for committee. List name, title, and address. See next page for definition of "officer."  L. Brad Peck, Chairman, 200 N Road 34, Pasco, WA 99301  Continued on attached sheet.  Stephanie Swan berg, Vice Chair, 8106 Livingston Rd., Pasco, WA 99301			
8. Campaign Bank or Depository  Bank Reale	Bran	the eight days before the election, except	Pasco
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  3320 W. Pearl St., Pasco, WA 9930/  In order to make an appointment, contact the campaign at (telephone, fax, e-mail): (509) 545-9914 or jaan alice larsen @ yahoo.com			
10. Eligibility to Give to Political Committees and State Office Candidates: A committee must receive \$10 or more each from ten Washington State registered voters before contributing to a Washington State political committee. Additionally, during the six months prior to making a contribution to a state office candidate your committee must have received contributions of \$10 or more each from at least ten Washington State registered voters.    A check here indicates your awareness of and pledge to comply with these provisions. Absence of a check mark means your committee does not qualify to give to Washington			
Absence of a check mark means your committee State political committees and/or state office car	ee does not qualify to give to Washington	1	