


<b>PUBLIC DISCLOSURE COMMISSION</b>  711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 Toll Free 1-877-601-2828		<b>Candidate Registration</b>	<b>C1</b> (1/2008)	100513772  02-13-2013
Candidate's Name (Give candidate's full name.) NORMAN M JOHNSON			Telephone Number (509) 314-9668	
Candidate's Committee Name (Do not abbreviate.) NORM JOHNSON FOR STATE REPRESENTATIVE			Fax Number	
Mailing Address 55 W WASHINGTON AVE #83			Candidate's E-Mail Address NORM@NORMJOHNSON.ORG	
City YAKIMA	County YAKIMA	Zip + 4 98903	Campaign E-Mail Address NORM@NORMJOHNSON.ORG	
1. What office are you running for? STATE REPRESENTATIVE		Legislative District, County or City LEG DISTRICT 14 - HOUSE	Position No. 1	Do you now hold this office? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
2. Political party (if partisan office) REPUBLICAN		3. Date of general or special election 11/04/2014		
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. <b>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.</b>				
<input type="checkbox"/> <b>Option I MINI REPORTING:</b> 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.				
<input checked="" type="checkbox"/> <b>Option II FULL REPORTING:</b> 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 <input checked="" type="checkbox"/> No <input type="checkbox"/> . See WAC 390-05-243 and next page for details. List deputy treasurers on attached sheet.			<input type="checkbox"/> Continued on attached sheet.	
EMILY MEDEIROS 14960 SUMMITVIEW EXT, YAKIMA WA 98908			Daytime Telephone Number (509) 307-0195	
6. Persons who perform only ministerial functions on your behalf <u>and</u> 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.				
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."				
<input type="checkbox"/> Continued on attached sheet.				
8. Campaign Bank or Depository CENTRAL VALLEY BANK		Branch UNION GAP BRANCH	City YAKIMA	
9. Related or Affiliated Political Committees. List name, address and relationship.				
<input type="checkbox"/> 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.				
<b>Street Address, Room Number, City where campaign books will be available for inspection</b> MOSS ADAMS LLP, 402 E. YAKIMA AVE, #110, YAKIMA In order to make an appointment, contact the campaign at (telephone, fax, e-mail): 509-314-9668 NORM@NORMJOHNSON.COM				
11. <b>CERTIFICATION:</b> I certify that this report is true, complete and correct to the best of my knowledge.				
<b>Candidate's Signature</b> NORMAN M JOHNSON			<b>Date</b> 02-13-2013	