

PUBLIC DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 Toll Free 1-877-601-2828		Candidate Registration		C1 <small>(1/12)</small>	DATE FILED PDC JUN 14 2013
Candidate's Name (Give candidate's full name.) Colleen M. State				Telephone Number (360) 748-6237	
Candidate's Committee Name (Do not abbreviate.)				Fax Number ()	
Mailing Address 140 S.W. 8th St. Lewis 98532				Candidate's E-Mail Address colleen.state@gmail.com	
City Chehalis		County		Zip + 4	
1. What office are you running for? School Director				Legislative District, County or City #4 Lewis/Chehalis	
2. Political party (if partisan office)				Position No. 4	
3. Date of general or special election November 2013				Do you now hold this office? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
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 \$_____, 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 only 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.				Daytime Telephone Number (360) 748-6237	
Colleen State 140 SW 8th Chehalis, 98532					
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.					
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 Twin State Credit Union		Branch Chehalis		City Chehalis	
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.					
Street Address, Room Number, City where campaign books will be available for inspection 140 SW 8th St. Chehalis 98532					
In order to make an appointment, contact the campaign at (telephone, fax, e-mail): ()					
11. CERTIFICATION: I certify that this report is true, complete and correct to the best of my knowledge.					
Candidate's Signature 				Date 6/13/13	

SEE INSTRUCTIONS ON NEXT PAGE