


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 <i>Amended</i>	C1 <small>(1/12)</small>	DATE FILED PDC JUL 15 2013
Candidate's Name (Give candidate's full name.) Helen Grace Rayfield		DATE FILED PDC JUL 19 2013	Telephone Number (509) 548-4781	
Candidate's Committee Name (Do not abbreviate.)		Fax Number () N/A		
Mailing Address 9656 North Road		Candidate's E-Mail Address hrayfield@charter.net		
City Peshastin	County Chelan	Zip + 4 98847	Campaign E-Mail Address	
1. What office are you running for? Chelan County Hospital District 1		Legislative District, County or City	Position No. 4	Do you now hold this office? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
2. Political party (if partisan office) N/A		3. Date of general or special election November 7, 2013		
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 \$ <u>0</u> , 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 <u>only</u> ministerial functions? Yes ___ No ___ See WAC 390-05-243 and next page for details. List deputy treasurers on attached sheet.			Daytime Telephone Number	
N/A Helen Rayfield			(509) 548-4781	
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.				
N/A				
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."				
N/A				
8. Campaign Bank or Depository N/A Cashmere Valley Bank		Branch Leavenworth	City Leavenworth	
9. Related or Affiliated Political Committees. List name, address and relationship.				
N/A				
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 Leavenworth City Hall 700 State Hwy 2, Leavenworth				
In order to make an appointment, contact the campaign at (telephone, fax, e-mail): (509) 548-4791 hrayfield@charter.net				
11. CERTIFICATION: I certify that this report is true, complete and correct to the best of my knowledge.				
Candidate's Signature Helen Rayfield			Date 7/13/2013	

Helen Rayfield
 Helen Rayfield

7/18/13