

711 CAPITOL WAY PO BOX 4998 OLYMPIA WA 925 (360) 753-1111 Toll Free 1-277-50	Regis	tration	C1 (1/12)	MAY 2 9 2015
Candidate's Name (Give candidate's full na	me \	· · · · · · · · · · · · · · · · · · ·		Public Disclosure Commission Telephone Number
Amy A. Cruver	me. <i>j</i>			(253) 847-7891
Candidate's Committee Name (Do not abbr	eviate.)			Fax Number
Friends of Amy Cruver	·			()
Mailing Address 8008 313th St. E.				Candidate's E-Mail Address vote4amycruver@hotmail.com
city Eatonville	County Pierce		Zip + 4 98328	Campaign E-Mail Address
What office are you running for? Charter Review Comr	_	ve District, County or City	Position No.	Do you now hold this office? Yes No X
2. Political party (if partisan office)			3. Date of general or spec 11/3/15	ial election
and changing reporting options. Option I MINI REPORTING: In		use Option II, Full Reportin OO_, I will raise and spend I	g. See Instruction manuals no more than \$5,000, including	for information about reports required
Option II FULL REPORTING: I	will use the Full Reporting system.	I will file the frequent, detailed	I campaign reports required t	by law.
 Treasurer's Name and Address. Does next page for details. List deputy trea sheet. 		unctions? Yes No S	ee WAC 390-05-243 and Continued on attached	Daytime Telephone Number
				()
WAC 390-05-243 and next page for disheet.	sais.			Continued on attached
 Committee Officers and other persons sheet. 	who authorize expenditures or mak	e decisions on your behalf. L	ist name, title and address.	See next page for definition of "officer." Continued on attached
8. Campaign Bank or Depository		Branch		City
US Bank 9. Related or Affiliated Political Committee	ees. List name, address and relation	Spanaway nship.	· · · · · · · · · · · · · · · · · · ·	Spanaway Continued on attached
sheet.	,			
a post office box or an out-of-area add Street Address, Room Number, City 22209 Meridian Ave E	contact information for scheduling a fress. where campaign books will be a Graham	n appointment and the addre	ss where the inspection will t	ccept Saturdays, Sundays, and legal ake place. It is not acceptable to provide
In order to make an appointment, con	tact the campaign at (telephone, fax,	e-mail): (253) 847	-7891	
 CERTIFICATION: I certify that this report is true, complete 	te and correct to the best of my know	wledge.		
Candidate's Signature			Date	
Amy Criwer			5/28/15	