


PUBLIC DISCLOSURE COMMISSION  711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 Toll Free 1-877-601-2828		<h1>Candidate Registration</h1>	<h1>C1</h1> (1/2008)	100752815 03-17-2017	
Candidate's Name (Give candidate's full name.) KIMBERLY WYMAN			Telephone Number 360-746-6668		
Candidate's Committee Name (Do not abbreviate.) CITIZENS FOR KIM WYMAN			Fax Number		
Mailing Address PO BOX 3812			Candidate's E-Mail Address KIM.WYMAN@COMCAST.NET		
City LACEY		County THURSTON	Zip + 4 98509	Campaign E-Mail Address KIM.WYMAN@COMCAST.NET	
1. What office are you running for? SECRETARY OF STATE		Legislative District, County or City SECRETARY OF STATE, OFFICE	Position No. NA	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 11/03/2020			
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 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 checked="" 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 <input checked="" type="checkbox"/> . See WAC 390-05-243 and next page for details. List deputy treasurers on attached sheet. GLENN AVERY 214 W HOWE ST, SEATTLE WA 98119			<input type="checkbox"/> Continued on attached sheet. Daytime Telephone Number 206-286-1498		
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 TWIN STAR CREDIT UNION		Branch LACY	City LACEY		
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 1835 QUEEN ANNE AVE N, SEATTLE In order to make an appointment, contact the campaign at (telephone, fax, e-mail): 206-286-1498 GRAVERY@HOTMAIL.COM					
11. CERTIFICATION: I certify that this report is true, complete and correct to the best of my knowledge. Candidate's Signature KIMBERLY WYMAN					
			Date 03-17-2017		