


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)	100757535 04-28-2017
Candidate's Name (Give candidate's full name.)				Telephone Number	
BARBARA F BAILEY				360-240-0844	
Candidate's Committee Name (Do not abbreviate.)				Fax Number	
FRIENDS OF BARBARA BAILEY					
Mailing Address				Candidate's E-Mail Address	
BOX 374				BARBBAILEY10@GMAIL.COM	
City		County		Zip + 4	
OAK HARBOR		ISLAND		98277	
Candidate's E-Mail Address				Campaign E-Mail Address	
BARBBAILEY10@GMAIL.COM				BARBBAILEY10@GMAIL.COM	
1. What office are you running for?		Legislative District, County or City		Position No. Do you now hold this office?	
STATE SENATOR		LEG DISTRICT 10 - SENATE		NA Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
2. Political party (if partisan office)			3. Date of general or special election		
REPUBLICAN			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.				Daytime Telephone Number	
BERNIS H BAILEY BOX 374, OAK HARBOR WA 98277				360-240-0844	
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.					
BERNIS BAILEY, TREASURER, 527 SUNRISE BLVD, OAK HARBOR WA 98277					
8. Campaign Bank or Depository			Branch		City
WHIDBEY ISLAND BANK			OAK HARBOR		OAK HARBOR
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 527 SUNRISE BLVD, OAK HARBOR In order to make an appointment, contact the campaign at (telephone, fax, e-mail): 360-240-0844 BARBBAILEY10@GMAIL.COM					
11. CERTIFICATION:					
I certify that this report is true, complete and correct to the best of my knowledge.					
Candidate's Signature				Date	
BARBARA F BAILEY				04-28-2017	