## PUBLIC DISCLOSURE COMMISSION Candidate 711 CAPITOL WAY RM 206 PO BOX 40908

100760726

	OLYMPIA WA 98504-0908 (360) 753-1111	Registration		(1/2008)	
	Toll Free 1-877-601-2828			(1/2000)	05-14-2017
Candidate's Name (Give candidate's full name.)					Telephone Number
SALLY J KARR					360-426-6185
Candidate's Committee Name (Do not abbreviate.)					Fax Number
SALLY KARR FOR SCHOOL BOARD, DIRECTOR DISTRICT #3					
Mailing Address					Candidate's E-Mail Address
451 SE MILL CRE	CEK RD				SALLYKARR@GMAIL.COM
City		County	Zip	+ 4	Campaign E-Mail Address
SHELTON			98584		sallykarr@gmail.com
1. What office are you ru	at office are you running for?  Legislative District, County or City		or City	Position No.	Do you now hold this office?  Yes $\overline{X}$ No $\overline{\Box}$
SCHOOL DIRECTO					
2. Political party (if partisan office)  3. Date of general or specific party (if partisan office)				ate of general or speci	al election
NONE $11-07-2017$ 4. How much do you plan to spend during your entire election campaign, including the primary and general elections? Ba					and an that actimate about an 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.					
X Option I MINI REPORTING: In addition to my filing fee of \$0, 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.					
Option II FULL REPORTING: I will use the Full Reporting system. I will file the frequent, detailed campaign reports required by law.					
		only ministerial functions? Yes			Daytime Telephone Number
next page for details. List deputy treasurers on attached sheet.  SALLY J KARR  Continued on attached shee					360-426-6185
451 SE MILL CREEK RD, SHELTON WA 98584					
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.					
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."					
Continued on attached sheet.					
8. Campaign Bank or De	epository	Branch			City
OCCU		UPTOWN			SHELTON, WA
9. Related or Affiliated F	Political Committees. List name, add	ress and relationship.			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					
451 SE MILL	CREEK RD, SHELTON	·			
In order to make an appointment, contact the campaign at (telephone, fax, e-mail):260-426-6185 SALLYKARR@GMAIL.COM  11. CERTIFICATION:					
	rt is true, complete and correct to the	e best of my knowledge.			
Candidate's Signatu	ıre			ate 4-2017	
SALLY J KARR			U2-I	4-201/	