

Candidate

100873283

(360) 753-1111	Registration	(1/2008)	
Toll Free 1-877-601-2828			11-08-2018
Candidate's Name (Give candidate's full name.)			Telephone Number
MANKA DHINGRA			425-270-8660
Candidate's Committee Name (Do not abbreviate.)			Fax Number
FRIENDS OF MANKA			
Mailing Address			Candidate's E-Mail Address
P.O. BOX 2467			MANKA@ELECTMANKA.COM
City	County	Zip + 4	Campaign E-Mail Address
REDMOND KING		3073	INFO@ELECTMANKA.COM
What office are you running for?	Legislative District, County or City	Position No.	Do you now hold this office? Yes X No
STATE SENATOR	LEG DISTRICT 45 - SENATE	NA .	
Political party (if partisan office)		Date of general or special	al election
DEMOCRAT	ologian compaign including the primary or	11/08/2022	and on that actimate change one of
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.			
Ontion I MINI PEPOPTING: In addition to my fili	ng fae of \$ L will raise and spend n	o more than \$5,000, including	g any charges for inclusion in state
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.			
X Option II FULL REPORTING: I will use the Full R	Reporting system. I will file the frequent, detailed	campaign reports required by	/ law.
Treasurer's Name and Address. Does treasurer perforn	n only ministerial functions? Yes X No . Se	ee WAC 390-05-243 and	Daytime Telephone Number
next page for details. List deputy treasurers on attached		Continued on attached sheet.	
ANDY LO P.O. BOX 2467, REDMOND WA 98073			206-335-8815
7. Committee Officers and other persons who authorize ex	perialidies of make decisions on your behalf. El	st name, like and address. C	Continued on attached sheet.
8. Campaign Bank or Depository	Branch		City
BECU	REDMOND		REDMOND
9. Related or Affiliated Political Committees. List name, a	ddress and relationship.		Continued on attached sheet.
 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 11900 NE 1ST ST #300, BELLEVUE In order to make an appointment, contact the campaign at (telephone, fax, e-mail):425-270-8660 INFOR@ELECTMANKA.COM CERTIFICATION: 			
I certify that this report is true, complete and correct to the best of my knowledge.			
Candidate's Signature Date MANKA DHINGRA 11-08-2018			