711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111	Candidate Registration	C1	100879351
Toll Free 1-877-601-2828		(1/2008)	01-07-2019
Candidate's Name (Give candidate's full name.)			Telephone Number
TAMMY MORALES			206-399-0478
Candidate's Committee Name (Do not abbreviate.)			Fax Number
PEOPLE FOR TAMMY MORALES			
Mailing Address			Candidate's E-Mail Address
PO BOX 20655			INFO@VOTEFORTAMMY.COM
City	County	Zip + 4	Campaign E-Mail Address
SEATTLE KI	NG 98	102	INFO@VOTEFORTAMMY.COM
1. What office are you running for?	Legislative District, County or City	Position No.	Do you now hold this office?
CITY COUNCIL MEMBER	CITY OF SEATTLE	2	Yes No X
2. Political party (if partisan office)		3. Date of general or specia	al election
NON PARTISAN		11/05/2019	
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.			
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 Reporting system. I will file the frequent, detailed campaign reports required by law.			
 Treasurer's Name and Address. Does treasurer penetry preserved and the preserved and the	erform <u>only</u> ministerial functions? Yes X_No Se	e WAC 390-05-243 and Continued on attached sheet.	Daytime Telephone Number
ABBOT TAYLOR 349 16TH AVE E #60, SEATTLE W		Continued on attached sheet.	206-218-3108
 Persons who perform only ministerial functions on y 	your behalf and on behalf of other candidates or politi	cal committees. List name t	itle and address of these persons. See
WAC 390-05-243 and next page for details. Continued on attached sheet. ABBOT TAYLOR, TREASURER, 349 16TH AVE E #60, SEATTLE WA 98112			
 Committee Officers and other persons who authori: 	ze expenditures or make decisions on your behalf. Li	st name, title and address. S	See next page for definition of "officer."
8. Campaign Bank or Depository	Branch		City
KEYBANK	CAPITOL HILL		SEATTLE
9. Related or Affiliated Political Committees. List nam			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 350 15TH AVE E, SEATTLE In order to make an appointment, contact the campaign at (telephone, fax, e-mail):206–218–3108			
 11. CERTIFICATION: I certify that this report is true, complete and correct to the best of my knowledge. 			
Candidate's Signature Date			
TAMMY MORALES	c	1-07-2019	