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| PUBLIC DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 783-1111 Toll Free 1-877-601-2828 | | <h1 style="margin: 0;">Candidate Registration</h1> | | <h1 style="margin: 0;">C1</h1> <p style="font-size: small;">(6/18)</p> | DATE FILED PDC <h2 style="margin: 0;">JUL 14 2018</h2> |
| Candidate's Name (Give candidate's full name.) <h2 style="margin: 0;">Dean Berkeley</h2> | | | | Telephone Number (360.661.5868) | |
| Candidate's Committee Name (Do not abbreviate.) | | | | | |
| Mailing Address <h2 style="margin: 0;">4123 – Fishermans Bend</h2> | | | | Candidate's E-Mail Address <h2 style="margin: 0;">daberkeley@aol.com</h2> | |
| City Blaine | County Whatcom | Zip + 4 98230 | Campaign E-Mail Address | | |
| 1. What office are you running for? <h2 style="margin: 0;">STATE REP.</h2> | | Legislative District, County or City 42 | Position No. 1 | Do you now hold this office? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> | |
| 2. Political party (if partisan office) <h2 style="margin: 0;">REPUBLICAN</h2> | | | 3. Date of general or special election Nov, 7. 2018 | | |
| 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 checked="" type="checkbox"/> Option I MINI REPORTING: In addition to my filing fee of \$ <u>475.00</u> , 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 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 <input type="checkbox"/> No <input type="checkbox"/> See WAC 390-05-243 and next page for details. List deputy treasurers on attached sheet. | | | | Daytime Telephone Number (360.661.5868) | |
| Dean Berkeley | | | | | |
| 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. | | | | | |
| N/A | | | | | |
| 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. | | | | | |
| N/A | | | | | |
| 8. Campaign Bank or Depository WECU | | Branch BLAINE | | City BLAINE | |
| 9. Related or Affiliated Political Committees. List name, address and relationship. | | | | | |
| <input type="checkbox"/> Continued on attached sheet. | | | | | |
| N/A | | | | | |
| 10. Campaign books must be open to the public by appointment between 9 a.m. and 5 p.m. during the 10 calendar days before the election, except Saturdays, Sundays and legal holidays. In the space below, please provide an email address for scheduling an appointment at a location agreed upon by the treasurer and individual requesting the inspection. | | | | | |
| In order to make an appointment, contact the campaign at (e-mail): DABERKELEY@AOL.COM | | | | | |
| 11. CERTIFICATION: I certify that this report is true, complete and correct to the best of my knowledge. I acknowledge that the candidate's email address herein shall constitute the official address for purposes of all communications with the commission, and that I must notify the commission of any change to that address within ten days. | | | | | |
| Candidate's Signature | | | Date July 5, 2018 | | |