

AMENDED Candidate Registration

C1(6/01)

DATE FILED PDC NOV 2 1 2006

	R	legistration			
Candidate's Name (Give candidate's full name.)			Telepho	one Numbers	
Sally Clark			(206)	(206) 235-0363	
Candidate's Committee Name (Do	not abbreviate.)		(====	, - 33 3333	
People for Sal	ly Clark		())	
Mailing Address			Fax Nu	umber	
PO Box 2041			(206)) 381-8597	
City County Zip + 4			Address		
Seattle	King	98111-204	41		
1. What office are you running for?		Legislative District, County or City	Position		
City Council		City of Seattle	9	Yes No 🗌	
		_	f general or special election		
N/A 4. How much do you plan to spend during your entire election campaign, including the primary and general				vember 6, 2007	
Option I MiNI REPOR voters pamphlets. I will	TING: In addition to my filing fee not accept more than \$300 in the		than \$3,500, including self.	nuals for information about reports required g any charges for inclusion in state and local uired by law.	
				·	
5. Treasurer's Name and Address. Candidate may be treasurer. List deputy treasurers on attached sheet. Continued on attack Philip Lloyd 603 Stewart St #819 Seattle, WA 98101			Continued on attached s	Sheet Daytime Telephone Number	
				(206) 382-5552	
6. Committee Officers. List name, title and address. Continue on attached sheet if necessary. See reverse for definition of "officer."				Continued on attached sheet	
7. Campaign Bank or Depository		Branch		City	
Bank of America		4 th and Madison	1	Seattle, WA	
appointment between 8 a.m. and 8 p.m.; if the eappointment between 8 a.m. and 8 Street Address, Room Nu	the public, except on a weekend sighth day is a legal holiday – two B p.m. Specify location and hours mber, City	or legal holiday, during the eight days before consecutive hours on the seventh day beto below. It is not acceptable to provide a provid	ween 8 a.m. and 8 p.n	m.; and (b) on the other weekdays, by it-of-area address. Hours [Two consecutive hours; see 9(a)]	
603 Stewart Street #819 Seattle, WA 98101				10:00am - Noon	
In order to make an appointment, 10. CERTIFICATION:	ontact the campaign at (telephone	e, fax, e-mail): (206)382-5552			
I certify that this report is true, complete and correct to the best of my knowledge.					
Candidate's Signature Date					
Somslan	nu-		19 A	IN 2006	
Please advise us about which forms and instructions you need. Remember, candidates must file a Financial Affairs Statement (F-1) unless a current one is already on file with PDC. Check all boxes that apply. I already have financial affairs and campaign disclosure forms and instructions. I am using Mini Reporting and, therefore, do not need the other campaign disclosure forms. In addition, I have already filed my Financial Affairs Statement and need no additional F-1 forms. I will obtain all forms and instructions from my county elections office. I want PDC to mail me: the F-1 instruction booklet (which includes forms)				Distribution of This Report: ORIGINAL – Public Disclosure Commission COPY – County Elections Office (Auditor) COPY – Your own records (Note: City candidates contact City Clerk to see if local filing is required.)	
	the appropriate campaign dis	sclosure forms and instructions.		♥ := := q =::===/	