
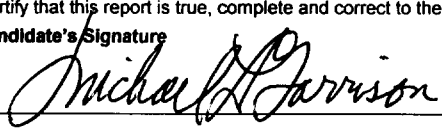


<b>PUBLIC DISCLOSURE COMMISSION</b>  711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 Toll Free 1-877-601-2828		<b>Candidate Registration</b> <span style="font-size: 1.5em; font-family: cursive;">AMENDED</span>		<b>C1</b> <small>(1/2008)</small>	<b>DATE FILED PDC</b> <b>AUG 11 2009</b>
Candidate's Name (Give candidate's full name.) <span style="font-size: 1.2em;">MICHAEL L. GARRISON</span>				Telephone Number <span style="font-size: 1.2em;">(509) 545-9743</span>	
Candidate's Committee Name (Do not abbreviate.) <span style="font-size: 1.2em;">COMMITTEE TO RE-ELECT MIKE GARRISON</span>				Fax Number <span style="font-size: 1.2em;">(509) 546-9602</span>	
Mailing Address <span style="font-size: 1.2em;">909 N. 26<sup>th</sup></span>				Candidate's E-Mail Address	
City <span style="font-size: 1.2em;">PASCO</span>	County <span style="font-size: 1.2em;">FRANKLIN</span>	Zip + 4 <span style="font-size: 1.2em;">99301-</span>		Campaign E-Mail Address	
1. What office are you running for? <span style="font-size: 1.2em;">CITY COUNCIL DISTRICT 2</span>		Legislative District, County or City <span style="font-size: 1.2em;">PASCO</span>		Position No. <span style="font-size: 1.2em;">2</span>	Do you now hold this office? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
2. Political party (if partisan office) <span style="font-size: 1.2em;">NON-PARTISAN</span>			3. Date of general or special election <span style="font-size: 1.2em;">NOV. 3, 2009</span>		
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 type="checkbox"/> <b>Option I MINI REPORTING:</b> 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.					
<input checked="" type="checkbox"/> <b>Option II FULL REPORTING:</b> 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 only ministerial functions? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> . See WAC 390-05-243 and next page for details. List deputy treasurers on attached sheet. <span style="font-size: 1.2em;">MARK MORRISSETTE</span> <span style="font-size: 1.2em;">4009 DESERT CT. PASCO, WA 99301</span>				Daytime Telephone Number <span style="font-size: 1.2em;">(509) 547-0544</span>	
6. Persons who perform only ministerial functions on your behalf and 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.					
<span style="font-size: 1.5em;">NONE</span>					
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."					
<div style="display: flex; justify-content: space-around;"> <div style="text-align: left;"> <span style="font-size: 1.2em;">MICHAEL L. GARRISON</span>  <span style="font-size: 1.2em;">909 N. 26<sup>th</sup> AVE</span>  <span style="font-size: 1.2em;">PASCO, WA 99301</span> </div> <div style="text-align: left;"> <span style="font-size: 1.2em;">CANDIDATE/CHAIRMAN</span> </div> </div>					
8. Campaign Bank or Depository <span style="font-size: 1.2em;">STERLING SAVINGS BANK</span>		Branch <span style="font-size: 1.2em;">20<sup>th</sup> AVE BRANCH</span>		City <span style="font-size: 1.2em;">PASCO</span>	
9. Related or Affiliated Political Committees. List name, address and relationship.					
<span style="font-size: 1.5em;">NONE</span>					
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.					
<span style="font-size: 1.2em;">MICHAEL L. GARRISON</span> <span style="font-size: 1.2em;">909 N. 26<sup>th</sup> AVE.</span> <span style="font-size: 1.2em;">(509) 5459743, PASCO, WA 99301</span>					
11. <b>CERTIFICATION:</b> I certify that this report is true, complete and correct to the best of my knowledge.					
Candidate's Signature 				Date <span style="font-size: 1.2em;">7-31-09</span>	