| PUBLIC DISCL | OSURE COMMISSION  |
|--------------|---|
|              | 711 CAPITOL WAY RM 206<br>PO BOX 40908<br>OLYMPIA WA 98504-0908<br>(340) 783-1111<br>Toll Free 1-877-601-2828 |

## Candidate

|  | PO BOX 40908<br>OLYMPIA WA 98504-0908<br>(340) 753-1111<br>Toll Free 1-877-801-2828               | Registration  | (3/06)  | JUL 1 6 2007                               |
|--|---|---|---|--|
| Candidate's Name (Give   | e candidate's full name.)   |   |   | Telephone Number                           |
| Mark Ste   | ven Hanneman  |   |   | (509) 628-1862                             |
| <del> </del>   | Name (Do not abbreviate.)   |   |   | Fax Number                                 |
| Hannema  | an 2007   |   |   | (509) 628-1862                             |
| Mailing Address  |   |   |   | Candidate's E-Mail Address                 |
| 3202 East  | Lattin Road   |   |   | OldDrummer55@aol.com                       |
| City   |   | County  | Zip + 4   | Campaign E-Mail Address                    |
| West Richl   | and   | Benton  | 99353   | Hanneman2007@aol.com                       |
| What office are you  | •   | Legislative District, County or City  | Position No.  | Do you now hold this office?               |
| City Cou   | ıncil   | West Richland   | 4   | Yes No X                                   |
| 2. Political party (if pa  | artisan office)   |   | 3. Date of general or spec                                      | cial election                              |
| N/A  |   | ire election campaign, including the primary  | November 6,   |  |
| X Option i MiN   | ting options.  If REPORTING: In addition to my ets. I will not accept more than \$3               | you are obligated to use Option II, Full Reporting filing fee of \$42.00_, I will raise and spend no mo 00 in the aggregate from any contributor except my I Reporting system. I will file the frequent, detailed | ore than \$3,500, including an                                  | y charges for inclusion in state and local |
| 5. Treasurer's Name  | and Address. Candidate may be to  | reasurer. List deputy treasurers on attached sheet  | Continued on attached   | Daytime Telephone Number                   |
| <ol> <li>Treasurer's Name and Address. Candidate may be treasurer. List deputy treasurers on attached sheet.</li></ol> |   |   |   | (509) 628-1213                             |
|  |   | 401 Mt. Anderson Court, West Rich   | iidiid, *** 33333   |  |
| 7. Campaign Bank or  | Depository  | Branch  |   | City                                       |
| HAPO   |   | N/A   |   | Richland                                   |
| 8. Related or Affiliated   | Political Committees. List name,  | address and relationship.   |   |  |
| None   |   |   |   | ☐ Continued on attached sheet              |
| post office box or ar<br>Street Address, Roc   | nce below, provide contact informat<br>n out-of-area address.<br>om Number, City where campaign i | ntment between 8 a.m. and 8 p.m. during the eight of tion for scheduling an appointment and the address books will be available for inspection  | days before the election, exce<br>where the inspection will tak | of Caturday Cundays and local              |
| 3202 East Lat  | tin Rd., W. Richland, W.  | A 99353   |   |  |
|  |   | ·   | •   |  |
|  | appointment, contact the campaign   | n at (telephone, fax, e-mail): (509) 628-1862   |   |  |
| I certify that this repo   | ort is true, complete and correct to  | the best of my knowledge.   |   |  |
| Candidate's Signa  | ture  | 1/2   | Date 7/15   | 107  |