

Candidate Registration

C1
(1/2008)

DATE FILED PDC
JUN 19 2009

Candidate's Name (Give candidate's full name.)

Dennis Scott Henden

Telephone Number

(360) 297-4433

Candidate's Committee Name (Do not abbreviate.)

D. Scott Henden For Fire Commissioner

Fax Number

(360) 297-7899

Mailing Address

26124 Calvary Ln NE

Candidate's E-Mail Address

hendensc@centurytel.net

City

County

Zip + 4

Kingston

Kitson

98346

Campaign E-Mail Address

N/A

1. What office are you running for?

Legislative District, County or City

Position No.

Do you now hold this office?

North Kitsop Fire & Rescue Kitsop

4

Yes ☐ No ☒

2. Political party (if partisan office)

3. Date of general or special election

11/3/09

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 \$ *0*, 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.

☐ **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 only ministerial functions? Yes ☐ No ☒ See WAC 390-05-243 and next page for details. List deputy treasurers on attached sheet.

Daytime Telephone Number

Scott Henden

(360) 297-4433

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.

☐ 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."

☐ Continued on attached sheet.

N/A

8. Campaign Bank or Depository

Branch

City

Kitsop Bank

Poulsbo

Poulsbo

9. Related or Affiliated Political Committees. List name, address and relationship.

☐ Continued on attached sheet.

N/A

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.

Street Address, Room Number, City where campaign books will be available for inspection

26124 Calvary Ln NE Kingston WA 98346

In order to make an appointment, contact the campaign at (telephone, fax, e-mail): *(360) 297-4433*

11. **CERTIFICATION:**

I certify that this report is true, complete and correct to the best of my knowledge.

Candidate's Signature

Date

D. Scott Henden

6/17/09

SEE INSTRUCTIONS ON NEXT PAGE

PUBLIC DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 Toll Free 1-877-601-2828		Candidate Registration		C1 <small>(1/2008)</small>	DATE FILED PDC JUN 19 2009
Candidate's Name (Give candidate's full name.) <i>Dennis Scott Henden</i>				Telephone Number <i>(360) 297-4433</i>	
Candidate's Committee Name (Do not abbreviate.) <i>D Scott Henden For Fire Commissioner</i>				Fax Number <i>(360) 297-7899</i>	
Mailing Address <i>26124 Calvary Ln NE</i>				Candidate's E-Mail Address <i>hendensc@netnet.com</i>	
City <i>Wingston</i>		County <i>Kitsap</i>		Zip + 4 <i>98346</i>	
1. What office are you running for? <i>North Kitsap Fire & Rescue</i>				Legislative District, County or City <i>Kitsap</i>	
2. Political party (if partisan office) <i>—</i>				Position No. <i>4</i>	
3. Date of general or special election <i>11/3/09</i>				Do you now hold this office? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
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 \$ <i>0</i> , 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 checked="" type="checkbox"/> See WAC 390-05-243 and next page for details. List deputy treasurers on attached sheet.				Daytime Telephone Number <i>(360) 297-4433</i>	
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.	
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.	
8. Campaign Bank or Depository <i>Kitsap Bank</i>		Branch <i>Poulsbo</i>		City <i>Poulsbo</i>	
9. Related or Affiliated Political Committees. List name, address and relationship.				<input type="checkbox"/> Continued on attached sheet.	
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.					
Street Address, Room Number, City where campaign books will be available for inspection <i>26124 Calvary Ln NE Wingston WA 98346</i> In order to make an appointment, contact the campaign at (telephone, fax, e-mail): <i>(360) 297-4433</i>					
11. CERTIFICATION: I certify that this report is true, complete and correct to the best of my knowledge.					
Candidate's Signature <i>D. Scott Henden</i>				Date <i>6/17/09</i>	