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SEP 24 2007

Public Disclosure
Commission

Sept 20, 2007

Dear PDC,

Please note my treasurer will be
sending in the C-3 & C-4 reports
asap.

Thank you,

Debbie Klosowski
Univ. Place City Council, Position 2

D. Klosowski
P. Link
P.O. Box 64702
University Place, WA 98464

(253) 565-8466

Kloslink@comcast.net

September 20, 2007

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SEP 24 2007

Public Disclosure
Commission

Mr. Carl Mollnow
5124 84th Avenue W.
University Place, WA 98467

DATE FILED PDC
SEP 21 2007

Dear Mr. Mollnow:

Per PDC requirements, this is to inform you that I have changed from Mini Reporting to Full Reporting.

Sincerely,

Debbie Klosowski

Debbie Klosowski
PO Box 64702
University Place, WA 98464

253 565-8466

kloslink@comcast.net

*Here is a copy of a letter I mailed to my
opponent this week.*

University Place City Council, Position 2

Please contact me if you need more information.

Thank you.

*Debbie Klosowski
Sept 20, 2007*

<div style="display: flex; align-items: center;"> <div> PUBLIC DISCLOSURE COMMISSION <small>711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 Toll Free 1-877-601-2828</small> </div> </div> <div style="text-align: center; margin-top: 20px;"> <h2 style="margin: 0;">Candidate Registration</h2> </div>		<h1 style="font-size: 2em; margin: 0;">C1</h1> <small>(3/06)</small>	<h2 style="margin: 0;">DATE FILED PDC</h2> <h2 style="margin: 0;">SEP 21 2007</h2>
Candidate's Name (Give candidate's full name.) <i>Debbie Klosowski</i>		Telephone Number <i>(253) 565-8466</i>	
Candidate's Committee Name (Do not abbreviate.) <i>Citizens for Debbie Klosowski</i>		Fax Number ()	
Mailing Address <i>PO BOX 64702</i>		Candidate's E-Mail Address <i>kloslink@comcast.net</i>	
City <i>University Place</i>	County <i>Pierce</i>	Zip + 4 <i>98464</i>	Campaign E-Mail Address
1. What office are you running for? <i>Univ. Place City Council</i>		Legislative District, County or City	Position No. <i>2</i>
2. Political party (if partisan office) <i>N/A</i>		3. Date of general or special election <i>NOV.</i>	
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"/> Option I MINI REPORTING: In addition to my filing fee of \$_____, I will raise and spend no more than \$3,500, including any charges for inclusion in state and local voters pamphlets. I will not accept more than \$300 in the aggregate from any contributor except myself.			
<input checked="" 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. Candidate may be treasurer. List deputy treasurers on attached sheet. <input type="checkbox"/> Continued on attached sheet		Daytime Telephone Number	
<i>Pat Gollighur</i> <i>4133 Ridge Road, Univ. Place 98466</i>		<i>(253) 565-1703</i>	
6. Committee Officers. List name, title and address. Continue on attached sheet if necessary. See reverse for definition of "officer." <input type="checkbox"/> Continued on attached sheet			
<i>Peter LINK- Campaign manager</i>			
7. Campaign Bank or Depository	Branch	City	
<i>WASHINGTON Mutual</i>	<i>WASH MUT</i> <i>6916-19th St W</i>	<i>Univ. Place</i>	
8. Related or Affiliated Political Committees. List name, address and relationship.			
<i>N/A</i>			
9. 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>Pat Gollighur, 4133 Ridge Road, Univ. Place 98466</i>			
In order to make an appointment, contact the campaign at (telephone, fax, e-mail): <i>(253) 565-1703</i>			
10. CERTIFICATION: I certify that this report is true, complete and correct to the best of my knowledge.			
Candidate's Signature		Date	
<i>Debbie Klosowski</i>		<i>Sept 20, 2007</i>	

SEE INSTRUCTIONS ON REVERSE