


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 AMENDMENT	C1 (3/06)	DATE FILED PDC JUL 02 2007
Candidate's Name (Give candidate's full name.) MARK L. SOMERS		Telephone Number (425) 335-1442		
Candidate's Committee Name (Do not abbreviate.) MARK SOMERS CAMPAIGN		Fax Number ()		
Mailing Address 2411 118th DR NE		Candidate's E-Mail Address m.pam@verizon.net		
City LAKE STEVENS	County SNOHOMISH	Zip + 4 98258-9178	Campaign E-Mail Address VOTEFORMARKSOMERS.NET	
1. What office are you running for? CITY COUNCIL MEMBER		Legislative District, County or City LAKE STEVENS	Position No. 4	Do you now hold this office? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
2. Political party (if partisan office) X		3. Date of general or special election 11-6-07		
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 \$ 36 , 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 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	
MARK SOMERS			(425) 335-1442	
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
X				
7. Campaign Bank or Depository	Branch	City		
WASHINGTON MUTUAL	9009 MARKET PLACE	LAKE STEVENS		
8. Related or Affiliated Political Committees. List name, address and relationship.				
X				
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 2411 118th DR NE LAKE STEVENS				
In order to make an appointment, contact the campaign at (telephone, fax, e-mail): (425) 335-1442				
10. CERTIFICATION: I certify that this report is true, complete and correct to the best of my knowledge.				
Candidate's Signature Mark L. Somers			Date 7/1/07	

SEE INSTRUCTIONS ON REVERSE