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** (1/2008)

DATE FILED PDC
FEB 11 2010

Candidate's Name (Give candidate's full name.)
BRANDON PARKER VICK

Telephone Number
(360) 609-4363

Candidate's Committee Name (Do not abbreviate.)
COMMITTEE TO ELECT BRANDON VICK

Fax Number
(360) 573-6531

Mailing Address
PO BOX 87521

Candidate's E-Mail Address
VICKFORREP@COMCAST.NET

City: VANCOUVER
County: CLARK
Zip + 4: 98687-7521
Campaign E-Mail Address: VICKFORREP@COMCAST.NET

1. What office are you running for? STATE REPRESENTATIVE
Legislative District, County or City: 18TH DISTRICT
Position No.: 1
Do you now hold this office? Yes ☐ No X

2. Political party (if partisan office): REPUBLICAN
3. Date of general or special election: 11/02/2010

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 $_____, 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.

X **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 _X__ No ___. See WAC 390-05-243 and next page for details. List deputy treasurers on attached sheet. ☐ Continued on attached sheet.
DARCI VICK
Daytime Telephone Number: (360) 903-1552

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: UMPQUA BANK
Branch: EVERGREEN SQUARE
City: VANCOUVER

9. Related or Affiliated Political Committees. List name, address and relationship. ☐ 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**
11504 NW 29TH CT VANCOUVER, WA 98685
In order to make an appointment, contact the campaign at (telephone, fax, e-mail): (360) 609-4363

11. **CERTIFICATION:**
I certify that this report is true, complete and correct to the best of my knowledge.
**Candidate's Signature** B. P. V
**Date** 2/9/10

**SEE INSTRUCTIONS ON NEXT PAGE**