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OCT 16 2013

Public Disclosure Commission



**WASHINGTON STATE PUBLIC DISCLOSURE COMMISSION
COMPLAINT FORM**

(See instructions on the last page.)

Description of Complaint

1. RESPONDENT:

Identify who you are filing a complaint against and provide all contact information you have for them. Give names and titles, if any, for individuals, and the full name of any organization. Please note that the PDC does not enforce federal campaign finance laws or local ordinances.

Example #1: Joe Public, Mayor of My Town,

123 Main Street, Your Town, State, Phone: 555-123-4567, Email: unknown

Example #2: The Political Action Group (instead of P.A.G.), 123 Main Street, Your Town, State,

Phone: 555-123-4567, Email: pag@pag.org

Citizen's against Fire District 2 levy, Mr. Eric Foth Chairperson, telephone 360-460- 1988, PO Box 1481 Port Angeles, WA 9836

2. ALLEGED VIOLATIONS:

Explain how and when you believe the people/entities you are filing a complaint against violated RCW 42.17/RCW 42.17A or Title 390 WAC. Be as detailed as possible about dates, times, places and acts. If you can, cite which specific laws or rules you believe were violated. Attach additional pages if needed. (Note that the RCW 42.17 citation applies to conduct before 2012 and the RCW 42.17A citation applies to conduct on or after January 1, 2012.)

The PDC filings of forms C3 clearly indicate a pattern of "book keepers" for companies owned by Bill Littlejohn (Olympic Ambulance) and his retirement home in Sequim "Sherwood Assisted Living" along with employees Olympic Ambulance, Olympic Oxygen service technicians, Fleet Managers with Olympic Ambulance, billing Manager with Olympic Ambulance, Administrators with Olympic Ambulance all donating from \$1,000 to \$1,250 to this campaign, It is HIGHLY SUSPECT that these individuals did this out of their concern for a levy in another city! This is clearly a violation of RCW42.17A.485 a person may not, directly or indirectly, reimburse another person for a contribution to a candidate for public office, political committee, or political party. In addition, RCW 42.17A.495 (1) No employer or labor organization may increase the salary of an officer or employee, or compensate an officer, employee, or other person or entity, with the intention that the increase in salary, or the compensation, or a part of it, be contributed or spent to support or oppose a candidate, state official against whom recall charges have been filed, political party, or political committee.

Evidence and Witnesses

3. EVIDENCE:

List the documents or other evidence you have that support your complaint, if any, and attach copies to this form. If you do not have copies, provide any information you have about where you believe the documents or evidence can be found and how to obtain it. Attach additional pages if needed.

Example: Emails between Joe public and Candidate X, attached OR

Joe Public has emails from Candidate X which describe an illegal campaign donation, and Joe Public's phone number is 555-123-4567.

PDC Registration form C1pc September 9th, 2013 Citizens Against Fire District 2 Levy PO Box 1481, Port Angeles, WA 98362 plus Form C3 filed 09-19-13 plus form C3 filed 09-20-13 plus form C3 filed 09-27-13 (copies attached)

4. WITNESSES:

List the names and contact information, if known, of any witnesses or other persons who have knowledge of facts that support your complaint. Attach additional pages if needed.

Example: Jane Public was present when Candidate X spoke to me about the illegal contribution. Jane Public's address is 123 Main Street, Your Town, USA 12345, and her phone number is 555-123-4567.

Sam Phillips PO Box 1384 Port Angeles, WA 98362 360-406-0429

Certification

In signing this complaint:

- I have provided all information, documents and other evidence of which I am aware;
- If I become aware of additional information, documents or evidence related to my complaint, I will promptly provide it to the PDC; and,
- I am providing the PDC current information on how to contact me, and will promptly update that information if it changes.

Your name (print or type) Michael DeRousie

Street address 1946 Westview Drive

City, state and zip code Port Angeles WA 98363

Telephone number (including area code) 360-452-3462

E-mail address (optional)
miked@spashop.com

Oath

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Required for complaints against elected officials or candidates for elective office:

I certify (or declare) under penalty of perjury under the laws of the State of Washington that this complaint is complete, true and correct to the best of my knowledge and belief.*

Your signature _____ Michael DeRousie _____

Date signed _____ 10-15-13 _____

Place signed (city and county)

____ Port Angeles
City

Clallam _____
County

Attachments

X Check here if you are attaching copies of documentary evidence or extra pages explaining your complaint.

**RCW 9A.72.040 says that "(1) A person is guilty of false swearing if he makes a false statement which he knows to be false, under an oath required or authorized by law. (2) False swearing is a misdemeanor."*

**Washington State Public Disclosure Commission
Instructions for Filing a Formal Complaint**

⚡ When to use the formal complaint form:

While this form is not required, its use is recommended when you want to file formal allegations of a violation of the Public Disclosure Commission (PDC) statutes or rules. You can find the PDC statutes and rules on the PDC website at www.pdc.wa.gov. If you have information or concerns about a possible violation but do not wish to file a complaint, please contact the PDC office directly.

⚡ How to submit your complaint form to the PDC:

- Complete all sections. If you do not have some information, please write "unknown" instead of leaving a blank space.
- Attach copies of any evidence you have - we'll contact you if we need originals.
- Sign the oath if your complaint is against an elected official or a candidate for elective office.
- Mail, fax, or email your complaint and all attachments to the PDC.

⚡ If you have more questions:

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If you have more questions about filing a complaint, see the "Frequently Asked Questions about Filing a Complaint" guide available on the PDC's website at www.pdc.wa.gov under "Enforcement and Compliance." You may also contact the PDC directly.

PDC Contact Information

MAILING ADDRESS: Washington State Public Disclosure Commission
711 Capitol Way, Room 206
PO Box 40908
Olympia, WA 98504-0908

EMAIL ADDRESS: pdc@pdc.wa.gov

PHONE: 1-877-601-2828 (toll free)

FAX: (360) 753-1112

HOURS: Monday-Friday, 8:00 a.m. – 5:00 p.m., closed on state holidays.

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