FORM 3

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

OMB APPROVAL								
OMB Number:	OMB Number: 3235-0104							
Estimated average burden								
hours per response:	0.5							

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934 or Section 30(h) of the Investment Company Act of 1940

						continent company Act of 10						
1. Name and Address of Reporting Person* DEMATTEI DAVID 2. Date of Event Requiring Statement (Month/Day/Year) 08/15/2006					3. Issuer Name and Ticker or Trading Symbol Zumiez Inc [ZUMZ]							
(Last) (First) (Middle) 3250 VAN NESS AVENUE						ationship of Reporting Perso call applicable) Director	son(s) to Issuer		5. If Amendment, Date of Original Filed (Month/Day/Year)			
(Street) SAN FRANCISCO	CISCO CA 94109				Officer (give title below)		Other (specify below)		6. Individual or Joint/Group Filing (Check Applicable Line) X Form filed by One Reporting Person Form filed by More than One Reporting Person			
(City)	(State)	(Zip)										
Table I - Non-Derivative Securities Beneficially Owned												
1. Title of Security (Instr. 4)						unt of Securities ially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)		4. Nature of Indirect Beneficial Ownership (Instr. 5)			
Common stock						0	D					
Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)												
Exp			Expiration D	2. Date Exercisable and Expiration Date (Month/Day/Year)		d 3. Title and Amount of Secur Underlying Derivative Securi		4. Conver or Exer	rcise	5. Ownership Form:	6. Nature of Indirect Beneficial Ownership (Instr. 5)	
			Date Exercisable	Expiration Date	n Title	9	Amount or Number of Shares	Derivat Securit	tive	Direct (D) or Indirect (I) (Instr. 5)		

Explanation of Responses:

Chris K. Visser, Attorney-in-

Fact

** Signature of Reporting Person Date

08/23/2006

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.

^{*} If the form is filed by more than one reporting person, see Instruction 5 (b)(v).

^{**} Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

- 1. Designation of Attorneys-in-Fact. The undersigned, hereby designates each of Gary J. Kocher and Chris K. Visser, individuals with full power of substitution, as my attorney-in-fact to act for me and in my name, place and stead, and on my behalf in connection with the matters set forth in Item 2 below.
- 2. Powers of Attorney-in-Fact. Each attorney-in-fact, as fiduciary, shall have the authority to sign all such U.S. Securities and Exchange Commission ("SEC") reports, forms and other filings, specifically including but not limited to Forms 3, 4, 5 and 144, as such attorney-in-fact deems necessary or desirable in connection with the satisfaction of my reporting obligations under the rules and regulations of the SEC.
- 3. Effectiveness. This power of attorney shall become effective upon the execution of this document.
- 4. Duration. This power of attorney shall remain in effect until revoked by me. This power of attorney shall not be affected by disability of the principal.
- 5. Revocation. This power of attorney may be revoked in writing at any time by my giving written notice to the attorney-in-fact. If this power of attorney has been recorded, the written notice of revocation shall also be recorded.

Date: August 22, 2006.

__David DeMattei____
David DeMattei

STATE OF _California)

COUNTY OF San Francisco)

SIGNED OR ATTESTED before me on 8/22/06 by David DeMattei

Curtis K. Kasper___ Signature of Notary Public

_Curtis K. Kasper__ (SEAL) Typed Name of Notary Public Residing at:_San Francisco County__ My commission expires: _6/11/2007