Mailing Address Doctor Society County C		711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 Toll Free 1-877-601-2828	Candidate Registration	C1 (3/06)	DATE FILED PDC JUN 1 3 2007
Cly County or City County (7 persisten Re.) 1. What effice are you running for? Legislative District County or City Pesition No. Do you now hold this office County or City County (7 persisten Re.) 2. Political party (7 persisten office) 3. Date of general or special election County or City County (7 persisten Re.) 4. How much do you plan to spend during your entire election campaign, including the primary and general elections? Based on that estimate, choose the reporting options below. If no box is checked you are obligated to use Option II, Full Reporting, See and General elections? Based on that estimate, choose the reporting options for information about reports read on and changing reporting options for information about reports read on county of the propring options in reporting options. 2. Option I MINI REPORTING: In addition to my filing fee of 3. I will raise and spend no more than \$3,500, including any charges for inclusion in state and local votes appointed. I will not be freely reported to septime for a service from any contributor except myself. 3. Date of general or special election. 4. How much do you plan to spend uning your entire election campaign including any charges for inclusion in state and local votes appointed in the part of the primary and general elections? Based on the reporting options in from and local votes and propring options from any contributor except myself. 4. Option I FULL REPORTING: In addition to my filing fee of \$2. I will raise and spend no more than \$3,500, including any charges for inclusion in state and local votes appointed by law. 5. Treasurer's Name and Address. Condidate may be reasurer. List deputy resource on attached sheet. I continued on attached and proprinted on attached and proprinted proprinted on attached and proprinted proprinted proprinted on attached and proprinte	Candidate's Committee	Warren O'Bri Name (Do not abbreviate.)	ien		(509) 548-7995
Leavenuelly Wheliam Legislative District County or City Position No. Do you now hold this office Cascade School Board of Biredon School Board School Boar	K	0. Box 312			Candidate's E-Mail Address Chief 3@nwi.net
2. Posticel party (it parlisan office) 3. Date of general or special election is office in the party and general elections? Based on that estimate, choose 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 read changing reporting options. Option I MINI REPORTING: In addition to my fiting fee of S	Leavenwe. 1. What office are yo	ou running for?	Chelan Legislative District Countries City	98826	
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Option II FULL REPORTING: I will use the Full Reporting system. I will file the frequent, detailed campaign reports required by law. Treasurer's Name and Address. Candidate may be treasurer. List deputy treasurers on attached sheet. Continued on attached Daytime Telephone Number (SUR) 3.786-77.11	Option I MIN	II REPORTING: In addition to much	Flore to A	Nov C 20 ind general elections? Ba g. See instruction manuals	9 0 7 sed on that estimate, choose one of for information about reports required
Aelly OBrien (same as above) (509) 5'16-771/ Committee Officers. List name, title and address. Continue on attached sheet if necessary. See reverse for definition of officer. Continued on attached significantly and the continued contact information for scheduling an appointment and the address where the inspection will take place. It is not acceptable to provide box or an out-of-area address. Street Address, Room Number, City where campaign books will be available for inspection In order to make an appointment, contact the campaign at (telephone, fax, e-mail): ()	Option II FUL	LL REPORTING: I will use the Full	Reporting system. I will file the frequent, detailed	campaign reports required b	g any charges for inclusion in state y law.
Campaign Bank or Depository Branch Campaign Bank or Depository Branch City 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 a post office box or an out-of-area address. 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 a post office box or an out-of-area address. Sireet Address, Room Number, City where campaign books will be available for inspection In order to make an appointment, contact the campaign at (telephone, fax, e-mail):	5. Treasurer's Name a sheet Helly O	and Address. Candidate may be to	reasurer. List deputy treasurers on attached sheet.	. Continued on attached	
Campaign Bank or Depository Branch City Related or Affiliated Political Committees. List name, address and relationship. 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 a post office box or an out-of-area address. Street Address, Room Number, City where campaign books will be available for inspection In order to make an appointment, contact the campaign at (telephone, fax, e-mail):			· · · · · · · · · · · · · · · · · · ·	F 4 F W	
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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 the election, except Saturdays, Sundays, and legal a post office box or an out-of-area address. Street Address, Room Number, City where campaign books will be available for inspection In order to make an appointment, contact the campaign at (telephone, fax, e-mail):	· Cattpuign sunt of a	Pepository	Branch		City
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Candidate's Signature Date Co////07	l certify that this report	t is true, complete and correct to the			