

Committee Name (Show entire official name.) <p style="font-size: 1.2em;">Walla Walla County Democratic Central Committee</p>	Acronym: Telephone: (509) 525-9754
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Mailing Address <p style="font-size: 1.2em;">PO Box 1323</p>	Fax: ()
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City <p style="font-size: 1.2em;">Walla Walla</p>	County <p style="font-size: 1.2em;">Walla Walla</p>	Zip + 4 <p style="font-size: 1.2em;">99362-0024</p>	E-mail:
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NEW OR AMENDED REGISTRATION? <input type="checkbox"/> NEW. Complete entire form. <i>2007 form</i> <input checked="" type="checkbox"/> AMENDS previous report. Complete entire form.	COMMITTEE STATUS <input checked="" type="checkbox"/> Continuing (On-going; not established in anticipation of any particular campaign election.) <input type="checkbox"/> _____ election year only. Date of general or special election: _____ (Year)
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1. What is the purpose or description of the committee?
 Bona Fide Political Party Committee - official state or county central committee or legislative district committee. If you are not supporting the entire party ticket, attach a list or specify here the names of the candidates you support

<input type="checkbox"/> Ballot Committee - Initiative, Bond, Levy, Recall, etc. Name or description of ballot measure:	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">Ballot Number</td> <td style="padding: 2px;">FOR</td> <td style="padding: 2px;">AGAINST</td> </tr> <tr> <td style="text-align: center;">_____</td> <td style="text-align: center;"><input type="checkbox"/></td> <td style="text-align: center;"><input type="checkbox"/></td> </tr> </table>	Ballot Number	FOR	AGAINST	_____	<input type="checkbox"/>	<input type="checkbox"/>
Ballot Number	FOR	AGAINST					
_____	<input type="checkbox"/>	<input type="checkbox"/>					

Other Political Committee - PAC, caucus committee, political club, etc. If committee is related or affiliated with a business, association, union or similar entity, specify name:

For single election-year only committees (not continuing committees): Is the committee supporting or opposing

(a) one or more candidates? Yes No If yes, attach a list of each candidate's name, office sought and political party affiliation.

(b) the entire ticket of a political party? Yes No If yes, identify the party.

2. Related or affiliated committees. List name, address and relationship. Continued on attached sheet

3. How much do you plan to spend during this entire election campaign, including the primary and general elections? Based on that estimate, choose one of the reporting options below. (If your committee status is continuing, estimate spending on a calendar year basis.)

If no box is checked you are obligated to use Full Reporting. See instruction manuals for information about reports required and changing reporting options.

<input type="checkbox"/> MINI REPORTING Mini Reporting is selected. No more than \$3,500 will be raised or spent and no more than \$300 in the aggregate will be accepted from any one contributor.	<input type="checkbox"/> FULL REPORTING Full Reporting is selected. The frequent, detailed campaign reports mandated by law will be filed as required.
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4. Campaign Manager's or Media Contact's Name and Address	Telephone Number: ()
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5. Treasurer's Name and Address (List deputy treasurers on attached sheet.) <input type="checkbox"/> Continued on attached sheet <p style="font-size: 1.2em;">Norman Osterman PO Box 1535 Walla Walla, WA 99362-0028</p>	Daytime Telephone Number: <p style="font-size: 1.2em;">(509) 525-9754 240-2952 cell</p>
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6. Committee Officers. List name, title, and address. Continue on attached sheet if necessary. See reverse for definition of "officer." Continued on attached sheet

William McCaw / Chair / 203 Hope St, Walla Walla, WA 99362
 Jude Noland / Vice Chair / 734 Hill Rd, Walla Walla, WA 99362
 Beth Call / Secretary / 102 Otis St, Walla Walla, WA 99362
 Norm Osterman / Treasurer / 1032 Pomona, Walla Walla, WA 99362

7. Campaign Bank or Depository <p style="font-size: 1.2em;">Baker Boyer Bank</p>	Branch <p style="font-size: 1.2em;">Main</p>	City <p style="font-size: 1.2em;">Walla Walla</p>
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8. 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

1032 Pomona, Walla Walla, WA 99362

In order to make an appointment, contact the campaign at (telephone, fax, e-mail): (509) 240-2952

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9. **Eligibility to Give to State Office Candidates:** During the 180 days prior to making a contribution to a state office candidate, your committee must have received contributions of \$10 or more from at least ten persons registered to vote in Washington State.

A check here indicates your awareness of and pledge to comply with this provision. Absence of a check mark means your committee does not qualify to give to state office candidates (legislative and statewide executive candidates).

10. **Signature and Certification.** I certify that this statement is true, complete and correct to the best of my knowledge.

Committee Treasurer's Signature

Date

Norman J. Offeman 01/07/2008

SEE INSTRUCTIONS ON REVERSE

DATE FILED PDC

JAN 12 2008

#6 continued

Nina Roth / State Committee Woman
5914 Mill Creek Rd, Walla Walla, WA
99362

Conrado Cavazos / State Committeeman / 504 Malcolm St
Walla Walla, WA
99362