PUBLICDISCLOSURE COMMISSION			RECEIVED
	Candidate	04	
711 CAPITOL WAY RM 206 PO BOX 40908			EED 9 1 2000
OLYMPIA WA 98504-0908 (360) 753-1111	Registration	(3/06)	FEB <b>2 1</b> 2008
Toll Free 1-877-601-2828		(3/06)	B. I. I. Diselector.
			Public Disclosure
Candidate's Name (Give candidate's full name.)	1)	i	Telephone Number
niana L. Wilh	ite.		(509)991-7639
			Fax Number
Citizens to Elect Diana	LWilhite 4th Dist State &		(509) 534 - 3003
P.o. Box 14932			Candidate's E-Mail Address hot ma
City Spolcane Valley	Spokane 99214	.0932	Campaign E-Mail Address UOLWITh I te @ hotmail
What office are you running for?	Legislative District, County or City	Position No.	Do you now hold this office?
State Representative	1 471 leg Dist	2	Yes No 🛣
Political party (if partisan office)		general or specia	l election
Republican		04-08	
4. How much do you plan to spend during your entire	e election campaign, including the primary and general	elections? Bas	ed 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 \$3,500, including any charges for inclusion in state and local voters pamphlets. I will not accept more than \$300 in the aggregate from any contributor except myself.			
Option II FULL REPORTING: I will use the Full	Reporting system. I will file the frequent, detailed campaign re	ports required by	law.
	reasurer. List deputy treasurers on attached sheet.   Continu	led on attached	Daytime Telephone Number
_annectiling cen		^	(Enn FOF THE
6009 Emouland Dr	-ive, Spokune Valley, WA 9	4212	(509)535-5167
	ontinue on attached sheet if necessary. See reverse for definition		Continued on attached sheet
Gay Lynn James - Campugua Manager			
zung 5, Gillis			
Spokare Valley WA 99206			
	$\wedge$		
·			
7 Compaign Bank or Depositors	Penneh		City
7. Campaign Bank or Depository	Branch	1	City
Banner Bank	Hrgonne	1	Spokene balley
			9
Related or Affiliated Political Committees. List name,	address and relationship	1	
			Continued on attached sheet
	ntment between 8 a.m. and 8 p.m. during the eight days before		ept Saturdays, Sundays, and legal
holidays. In the space below, provide contact informa a post office box or an out-of-area address.	tion for scheduling an appointment and the address where the	nspection will tak	e place. It is not acceptable to provide
Street Address, Room Number, City where campaign books will be available for inspection			
617 N. Helena, Spokane, WA 99202			
, ,			
In order to make an appointment, contact the campaign at (telephone, fax, e-mail): (			
10. CERTIFICATION: I certify that this report is true, complete and correct to the best of my knowledge.			
Candidate's Signature	the best of my knowledge.  Date		
-		2-18	-08)
Diana L. Wilhit	n	•	
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