

PUBLIC DISCLOSURE COMMISSION  711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 Toll Free 1-877-601-2828		Candidate Registration		C1 (1/2008)		100414581 06-24-2011	
Candidate's Name (Give candidate's full name.)						Telephone Number	
CLAIRE E WILSON						253-852-2096	
Candidate's Committee Name (Do not abbreviate.)						Fax Number	
CITIZENS FOR CLAIRE WILSON							
Mailing Address						Candidate's E-Mail Address	
3712 S. 279TH PLACE						WILSON LEAVELL@MSN.COM	
City		County		Zip + 4		Campaign E-Mail Address	
AUBURN		KING		98001		claireforschools@yahoo.c	
1. What office are you running for? Legislative District, County or City Position No. Do you now hold this office? SCHOOL DIRECTOR FEDERAL WAY SD 210 2 Yes ☐ No ☒							
2. Political party (if partisan office)				3. Date of general or special election			
NON PARTISAN				11-08-2011			
4. How much do you plan to spend during your entire election campaign, including the primary and general elections? Based 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 \$0_____, I will raise and spend no more than \$5,000, including any charges for inclusion in state and local voters pamphlets. I will not accept more than \$500 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 reports required by law.							
5. Treasurer's Name and Address. Does treasurer perform <u>only</u> ministerial functions? Yes ___ No ☒ . See WAC 390-05-243 and next page for details. List deputy treasurers on attached sheet.						Daytime Telephone Number	
CLAIRE E WILSON 3712 S. 279TH PLACE, AUBURN WA 98001						253-852-2096	
6. Persons who perform only ministerial functions on your behalf <u>and</u> on behalf of other candidates or political committees. List name, title and address of these persons. See WAC 390-05-243 and next page for details. ☐ Continued on attached sheet.							
7. Committee Officers and other persons who authorize expenditures or make decisions on your behalf. List name, title and address. See next page for definition of "officer." ☐ Continued on attached sheet.							
8. Campaign Bank or Depository				Branch		City	
SECUWA				SEATTLE		SEATTLE	
9. Related or Affiliated Political Committees. List name, address and relationship. ☐ Continued on attached sheet.							
10. 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 3712 S. 279TH PLACE, AUBURN In order to make an appointment, contact the campaign at (telephone, fax, e-mail): 253-852-2096 CLAIREFORSCHOOLS@YAHOO.COM							
11. CERTIFICATION: I certify that this report is true, complete and correct to the best of my knowledge. Candidate's Signature CLAIRE E WILSON Date 06-24-2011							