

**CASH RECEIPTS
 MONETARY
 CONTRIBUTIONS**

C3
 (1/02)

THIS SPACE FOR OFFICE USE

100877786

12-18-2018

Candidate or Committee Name (Do not abbreviate. Use full name.)
SKYLER D RUDE (Committee to Elect Skyler Rude)

Mailing Address
PO Box 502

City **Walla Walla, WA** Zip + 4 **99362** Office Sought (candidates) **STATE REPRESENTATIVE** Election Date **2020**

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received		Amount	Total
	a. Anonymous		
	b. Candidate's personal funds deposited in the bank (include candidate loans in 1c).....		
	c. Loans, notes, security agreements. Attach Schedule L		
12/18/18	d. Miscellaneous receipts (interest, refunds, auctions, other). Attach explanation	\$500.00	
	e. Small contributions \$25.00 or less not itemized and number of persons giving _____ (persons)		

2. CONTRIBUTIONS OVER \$25.00

Date Received	Contributor's Name, Address, City, State, Zip	Contributions of more than \$100:*	P R I	G E N	Amount	Aggregate* Total
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Sub-total			\$500.00	*See reverse for details.
	<input type="checkbox"/> Check here if additional pages are attached	Amount from attached pages			\$0.00	

3. TOTAL FUNDS RECEIVED AND DEPOSITED OR CREDITED TO ACCOUNT

Sum of parts 1 and 2 above. Enter this amount in line 1, Schedule A to C4.

\$500.00

4. Date of Deposit **12/18/18**

Treasurer's Daytime Telephone No.: **(509) 526-5689**

I certify that this report is true and complete to the best of my knowledge

Treasurer's Signature **Debora L Zalaznik** Date **12-18-2018**

Statement of Miscellaneous Receipts
Attachment to Form C3

Candidate or Committee Name
SKYLER D RUDE (Committee to Elect Skyler Rude)

Deposit Date

Date Received	Payee's Name, Address, City, State, Zip	Description	Amount
12/18/18	SKYLER RUDE SURPLUS PO Box 502 Walla Walla, WA 99362	Transfer from Surplus	\$500.00

Subtotal this page \$500.00