

**CASH RECEIPTS  
 MONETARY  
 CONTRIBUTIONS**

**C3**  
 (1/02)

THIS SPACE FOR OFFICE USE  
 100906378  
 06-03-2019

Candidate or Committee Name (Do not abbreviate. Use full name.)  
**( COMMITTEE TO ELECT SKYLER RUDE )**

Mailing Address  
**PO BOX 502**

City Zip + 4 Office Sought (candidates) Election Date  
**WALLA WALLA, WA 99362 STATE REPRESENTATIVE 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 .....		
05/21/19	d. Miscellaneous receipts (interest, refunds, auctions, other). Attach explanation .....	\$1,000.00	
	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			\$1,000.00	*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.

\$1,000.00

4. Date of Deposit  
 05/21/19

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 ZALAZNIK L**

Date  
 06-03-2019

**Statement of Miscellaneous Receipts**  
**Attachment to Form C3**

Candidate or Committee Name  
(COMMITTEE TO ELECT SKYLER RUDE)

Deposit Date

Date Received	Payee's Name, Address, City, State, Zip	Description	Amount
05/21/19	SKYLER RUDE SURPLUS ACCOUNT PO Box 502 Walla Walla, WA 99362	Transfer from Surplus to Campaign Account	\$1,000.00

Subtotal this page \$1,000.00