

# CASH RECEIPTS MONETARY CONTRIBUTIONS

# C3

(1/02)

THIS SPACE FOR OFFICE USE

100928614

09-06-2019

Candidate or Committee Name (Do not abbreviate. Use full name.)

(COMMITTEE TO ELECT MATT BOEHNKE)

Mailing Address

6855 W. CLEARWATER AVE., STE 101 BOX 144

City Zip + 4 Office Sought (candidates)  
 KENNEWICK, WA 99336 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 .....		
	d. Miscellaneous receipts (interest, refunds, auctions, other). Attach explanation .....		
	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: Employer's Name, City and State	P R I N T	G E N	Amount	Aggregate* Total
08/12/19	WASHINGTON STATE DENTAL PAC 126 NW CANAL ST., #300 SEATTLE, WA 98107		X		\$1,000.00	\$1,000.00
		Occupation				
08/12/19	MICROSOFT 6100 Neil Rd. Reno , NV 89511		X		\$1,000.00	\$1,000.00
		Occupation				
08/12/19	PUGET SOUND ENERGY PO BOX 97034 BELLEVUE, WA 98009		X		\$1,000.00	\$1,000.00
		Occupation				
08/12/19	THE BOEING COMPANY PAC 929 Long Bridge Drive Arlington, VA 22202		X		\$500.00	\$500.00
		Occupation				
08/12/19	USAA PO Box 34330 San Antonio, TX 78265		X		\$1,000.00	\$1,000.00
		Occupation				
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			\$4,500.00	*See reverse for details.
		Amount from attached pages			\$2,000.00	

## 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.

\$6,500.00

4. Date of Deposit

08/13/19

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

Treasurer's Signature

Date

JASON MICHAUD

09-06-2019

Treasurer's Daytime Telephone No.: (253)220-5590

# RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

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Candidate or Committee Name (Do not abbreviate. Use full name.) (COMMITTEE TO ELECT MATT BOEHNKE)	Deposit Date 08/13/19
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## 2. CONTRIBUTIONS OVER \$25.00

Date Received	Contributor's Name, Address, City, State, Zip	Contributions of more than \$100: Employer's Name, City and State	P R I	G E N	Amount	Aggregate Total*
08/12/19	WASHINGTON FOOD INDUSTRY PO Box 706 OLYMPIA, WA 98507	Occupation	X		\$1,000.00	\$1,000.00
08/13/19	ALTRIA CLIENT SERVICES LLC PO Box 85088 Richmond, VA 23285	Occupation	X		\$1,000.00	\$1,000.00
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Page Total \$2,000.00