

# CASH RECEIPTS MONETARY CONTRIBUTIONS

## C3

(1/02)

THIS SPACE FOR OFFICE USE

100939253

10-19-2019

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

(Committee to Elect Tom Dent)

Mailing Address

601 S. Pioneer Way Ste. F PMB 396

City Zip + 4 Office Sought (candidates)  
 Moses Lake, WA 98837 STATE REPRESENTATIVE

Election Date  
 2020

### 1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received		Amount	Total
	a. Anonymous .....		\$80.00
	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	G E N	Amount	Aggregate* Total
10/18/19	GOMBOSKY PUBLIC AFFAIRS 2312 Wedgewood Dr SE Olympia, WA 00000		X		\$100.00	\$100.00
		Occupation				
10/18/19	WA FOOD PAC 8338 NE ALDERWOOD RD STE 160 SOUTH CLE ELUM, WA 00000		X		\$500.00	\$500.00
		Occupation				
10/18/19	WASHINGTON STATE TREE FRUIT 105 S 18TH STREET 116 YAKIMA, WA 98901		X		\$1,000.00	\$1,000.00
		Occupation				
10/18/19	GUS C SMITH 1904 TOLMAN RD ELLENSBURG, WA 98926	SELF ELLENSBURG, WA	X		\$150.00	\$150.00
		Occupation				
10/18/19	ROBERT MARUSA 808 LINCOLN AVE S SOUTH CLE ELUM, WA 00000		X		\$75.00	\$75.00
		Occupation				
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			\$1,825.00	*See reverse for details.
		Amount from attached pages			\$75.00	

### 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.

\$1,900.00

4. Date of Deposit

10/18/19

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

Treasurer's Signature

Date

Terry Weimer

10-19-2019

Treasurer's Daytime Telephone No.: (509)750-6926

# 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 Tom Dent)

Deposit Date  
10/18/19

## 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*
10/18/19	CHERYL MARUS 808 LINCOLN AVE S SOUTH CLE ELUM, WA 00000	Occupation	X		\$75.00	\$75.00
		Occupation				
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Page Total \$75.00