

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3

(1/02)

THIS SPACE FOR OFFICE USE

100946604

11-29-2019

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

SKYLER RUDE (COMMITTEE TO ELECT SKYLER RUDE)

Mailing Address

PO BOX 502

City Zip + 4 Office Sought (candidates)
WALLA WALLA, WA 99362 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:*	P R I	G E N	Amount	Aggregate* Total
11/27/19	RAI SERVICES COMPANY PO Box 464 Winston-Salem, NC 27102		X		\$350.00	\$350.00
	Occupation					
11/29/19	WACA PAC PO box 9912 Seattle, WA 98109		X		\$500.00	\$500.00
	Occupation					
11/29/19	PUGET SOUND CHAPTER NECA PAC 16001 Aurora Avenue N, Suite Shoreline, WA 98133		X		\$1,000.00	\$1,000.00
	Occupation					
11/29/19	WASHINGTON PHYSICAL THERAPY 1855 1ST ST CHENEY, WA 99004		X		\$500.00	\$500.00
	Occupation					
11/29/19	BRISTOL-MYERS SQUIBB COMPANY PO Box 25277 Tampa, FL 33622		X		\$500.00	\$500.00
	Occupation					
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			\$2,850.00	*See reverse for details.
		Amount from attached pages			\$3,500.00	

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.

\$6,350.00

4. Date of Deposit

11/29/19

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

Treasurer's Signature

Date

DEBORA ZALAZNIK

11-29-2019

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

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Page 2

Candidate or Committee Name (Do not abbreviate. Use full name.) SKYLER RUDE (COMMITTEE TO ELECT SKYLER RUDE)	Deposit Date 11/29/19
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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*
11/29/19	WASHINGTON HOSPITALITY 510 PLUM ST SE, SUITE 200 OLYMPIA, WA 98501	Occupation	X		\$1,000.00	\$1,000.00
11/29/19	WA CHARTERS PAC 603 STEWARD ST STE 819 SEATTLE, WA 98101	Occupation	X		\$1,000.00	\$1,000.00
11/29/19	WASHINGTON INDIAN GAMING 525 Pear Street SE Olympia, WA 98501	Occupation	X		\$1,000.00	\$1,000.00
11/29/19	JEREMIE J DUFAULT PO BOX 579 Selah, WA 98942	Jeremie J Dufault Selah, WA Occupation SELF-EMPLOYED REAL ESTATE	X		\$250.00	\$250.00
11/29/19	AMY B DUFAULT PO BOX 579 Selah, WA 98942	Self Selah, WA Occupation SELF-EMPLOYED INSTRUCTOR	X		\$250.00	\$250.00
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Page Total \$3,500.00