

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3

(1/02)

THIS SPACE FOR OFFICE USE

100947116

12-03-2019

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:*	P R I	G E N	Amount	Aggregate* Total
11/26/19	WEYERHAUESER 220 Occidental Ave S Seattle, WA 98104		X		\$1,000.00	\$1,000.00
	Occupation					
11/26/19	MDU RESOURCES GROUP 8113 W GRANBRIDGE BLVD SEATTLE, WA 98104		X		\$500.00	\$500.00
	Occupation					
11/26/19	SABEY CORPORATION 12201 TUKWILA INTL BLVD SEATTLE, WA 98168		X		\$500.00	\$500.00
	Occupation					
11/26/19	KALISPEL TRIBAL ECONOMIC 100 N HAYFORD RD AIRWAY HEIGHTS, WA 99001		X		\$500.00	\$500.00
	Occupation					
11/26/19	FREIHE FARMS 2498 ROAD S NE MOSES LAKE, WA 98837		X		\$250.00	\$250.00
	Occupation					
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			\$2,750.00	*See reverse for details.
		Amount from attached pages			\$350.00	

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.

\$3,100.00

4. Date of Deposit

11/26/19

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

Treasurer's Signature

Date

Terry Weimer

12-03-2019

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

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Page 2

Candidate or Committee Name (Do not abbreviate. Use full name.)
(Committee to Elect Tom Dent)

Deposit Date
11/26/19

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*
11/26/19	ST ISIDORE FARMS 16287 D 2 NW QUINCY, WA 98848	Occupation	X		\$100.00	\$100.00
11/26/19	MICHAEL V SCHWISOW 1336 WILSON ST NE OLYMPIA, WA 98506	SELF EMPLOYED OLYMPIA, WA Occupation LOBBYIST	X		\$250.00	\$250.00
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Page Total \$350.00