

Treasurer's Daytime Telephone No.: (509)525-1664

CASH RECEIPTS MONETARY CONTRIBUTIONS

THIS SPACE FOR OFFICE USE

100955370

01-30-2020

| | 33 | | 10110 | (1/02) | 01 | -30-2020 |
|--|---|-----------------|---|--|-----------------------|---------------------|
| Candidate | or Committee Name (Do not abbreviate. Use full na | ame.) | | | | |
| (Perry | Dozier For State Senate) | | | | | |
| Mailing Ad | dress | | | | | |
| PO Box | | | | | | |
| CM2 MT | | | | Office Sought (candidates) Election Date | | е |
| Walla Walla, WA 99362 STATE SENATOR | | | | 2020 | | |
| 1. MONET | 'ARY CONTRIBUTIONS DEPOSITED IN ACCOUN' | Γ | | | | |
| 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 itemiz | ed and number o | of persons giving (p | persons) | | |
| 2. CONTR Date Received | IBUTIONS OVER \$25.00 Contributor's Name, Address, City, State, Zip | | ons of more than \$100:* 's Name, City and State | P G R E I N | Amount | Aggregate* Total |
| 01/30/20 | RICHARD RANCH | Boeing | | х | | |
| | 2602 North Lawrence Street | | | | | \$600.00 |
| | Tacoma, WA 98407 | Auburn, | Auburn, WA | | | |
| | | OccupationB | OEING | <u> </u> | | |
| | | | | | | |
| | | | | | | |
| | | Occupation | | | | |
| | | | | | | |
| | | | | | | |
| | | Occupation | | | | |
| | | | | | | |
| | | | | | | |
| | | Occupation | | | | |
| | | | | | | |
| | | | | | | |
| | | Occupation | | | | |
| | | Cocupation | Sub-total Amount from attached pages | | | *See reverse |
| | Check here if additional pages are attached | | | | | |
| 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. | | | | | \$100.00 | for details. |
| 4. Date of Deposit I certify that this report is true and comp | | | | | ete to the best of my | knowledge |
| 01, | /30/20 | | Treasurer's Signature Date | | | |

Daryl Hopson