

**CASH RECEIPTS
 MONETARY
 CONTRIBUTIONS**

C3
 (1/02)

THIS SPACE FOR OFFICE USE
 100958576
 02-25-2020

Candidate or Committee Name (Do not abbreviate. Use full name.)
(Perry Dozier For State Senate)

Mailing Address
PO Box 3042

City: **Walla Walla, WA** Zip + 4: **99362** Office Sought (candidates): **STATE SENATOR** 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	G E N	Amount	Aggregate* Total
02/25/20	MARK GRANT PO Box 25 Prescott, WA 99348		X		\$100.00	\$100.00
		Occupation				
02/25/20	JUDY HOLLOWAY 119 Chamberlain Road Walla Walla, WA 99362		X		\$50.00	\$50.00
		Occupation				
02/25/20	MIKE BUCKLEY 11537 W Hwy 12 Walla Walla, WA 99362	Buckley Farm Walla Walla, WA	X		\$125.00	\$125.00
		Occupation FARMER				
02/25/20	SANDRA BUCKLEY 11537 W Hwy 12 Walla Walla, WA 99362	Buckley Farm Walla Walla, WA	X		\$125.00	\$125.00
		Occupation FARMER				
02/25/20	MIKE PETERSON 400 Babs Avenue Benton City, WA 99320	UChain Inc Denver, CO	X		\$125.00	\$125.00
		Occupation VP OPERATIONS				
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			\$525.00	*See reverse for details.
		Amount from attached pages			\$125.00	

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.

\$650.00

4. Date of Deposit: **02/25/20**

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

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

Treasurer's Signature: **Daryl Hopson** Date: **02-25-2020**

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.)
(Perry Dozier For State Senate)

Deposit Date
02/25/20

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*
02/25/20	CATHY PETERSON 400 Babs Avenue Benton City, WA 99320	St Patricks School Pasco, WA Occupation TEACHER	X		\$125.00	\$125.00
		Occupation				
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