

CASH RECEIPTS **MONETARY** CONTRIBUTIONS

THIS SPACE FOR OFFICE USE

100964024

04-10-2020

Candidate or Committee Name (Do not abbreviate. Use full name.) FRANCES CHVATAL (Elect Frances Chvatal) Mailing Address PO Box 53 City Zip + 4Office Sought (candidates) **Election Date** STATE REPRESENTATIVE 2020 Walla Walla, WA 99362

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT Date **Amount** Total Received 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 Contributions of more than \$100:* Aggregate* Date R Ε Amount Employer's Name, City and State Contributor's Name, Address, City, State, Zip Total Received х 03/20/20 SUZANNE TOWERY 12 Whitman St \$50.00 \$50.00 Walla Walla, WA 99362 Occupation х 03/20/20 TED COX 159 Coyote Ridge Dr \$50.00 \$50.00 Walla Walla, WA 99362 Occupation Occupation Occupation Occupation Sub-total \$100.00 Check here if additional Amount from \$0.00 pages are attached *See reverse attached pages 3. TOTAL FUNDS RECEIVED AND DEPOSITED OR CREDITED TO ACCOUNT for details. \$100.00 Sum of parts 1 and 2 above. Enter this amount in line 1, Schedule A to C4. 4. Date of Deposit I certify that this report is true and complete to the best of my knowledge

Treasurer's Signature 03/20/20

Date

Josie Olsen

04-10-2020

Treasurer's Daytime Telephone No.: (206)682-7328