

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3

THIS SPACE FOR OFFICE USE

100964027

04-10-2020

Candidate or Committee Name (Do not abbr	eviate. Use full name.)		
FRANCES CHVATAL (Elect Fra	nces Chvatal)		
Mailing Address			
PO Box 53			
City	Zip + 4	Office Sought (candidates)	
Walla Walla, WA	99362	STATE REPRESENTATIVE	

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 \$26.00 Various 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 03/13/20 RONALD KAMMER Not Employed 150 EAST CHESTNUT ST \$16.00 \$251.00 WALLA WALLA, WA 99362 WALLA WALLA, WA OccupationRETIRED Х 03/16/20 DANA BURGESS 917 Ankeny St \$32.00 \$32.00 Walla Walla, WA 99362 Occupation Х 03/17/20 JUDITH JOHANNESEN 1615 Sanford Avenue \$20.00 \$65.00 Richland, WA 99354 Occupation Occupation Occupation Sub-total \$94.00 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. \$94.00 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

4. Date of Deposit

03/17/20

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

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

Treasurer's Signature

Josie Olsen

04-10-2020