

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3

THIS SPACE FOR OFFICE USE

100967948

05-11-2020

| Candidate or Committee Name (Do not | t abbreviate. Use full name.) | |
|-------------------------------------|-------------------------------|----------------------------|
| FRANCES CHVATAL (Elect | Frances Chvatal) | |
| Mailing Address | | |
| РО Вож 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 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 Received Contributor's Name, Address, City, State, Zip Total Х 04/07/20 KAREN MORTON 204 Newell St \$35.00 \$35.00 Walla Walla, WA 99362 Occupation Х 04/07/20 ALISON KIRBY 330 S Palouse St \$50.00 \$50.00 Walla Walla, WA 99362 Occupation Х 04/07/20 DWYLA DONOHUE 113 S Pine St \$100.00 \$100.00 Dayton, WA 99328 Occupation Occupation Occupation Sub-total \$185.00 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. \$185.00 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 Date

4. Date of Deposit

04/10/20

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

05-11-2020