

## CASH RECEIPTS MONETARY CONTRIBUTIONS

**C3** 

THIS SPACE FOR OFFICE USE

100975343

06-10-2020

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

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 ...... \$85.00 Various e. Small contributions \$25.00 or less not itemized and number of persons givifig (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 05/06/20 JUDITH FENNO 6 S Bellevue Ave \$30.00 \$30.00 Walla Walla, WA 99362 Occupation Х 05/07/20 ORMAND HILDERBRAND PaTu Wind Farm 1003 Boyer Ave \$250.00 \$350.00 Walla Walla, WA 99362 Walla Wallaa, WA OccupationOWNER Х 05/09/20 CAMILLE KAMMER 1233 Lewis St \$25.00 \$45.00 Nashville, TN 37210 Occupation Occupation Occupation Sub-total \$390.00 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. \$390.00 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

05/10/20

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

06-10-2020