

# CASH RECEIPTS MONETARY CONTRIBUTIONS

## C3

(1/02)

THIS SPACE FOR OFFICE USE

100976405

06-15-2020

Candidate or Committee Name (Do not abbreviate. Use full name.)

(Shir Regev)

Mailing Address

PO Box 306

City Zip + 4 Office Sought (candidates)  
 Richland, WA 99352 STATE REPRESENTATIVE

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:*	P R I	G E N	Amount	Aggregate* Total
06/13/20	DONNA GLASS 303 Spring St Richland, WA 99354	India Partners Eugene, OR OccupationPROGRAMS COORDINATOR	X		\$125.00	\$125.00
06/13/20	KEVIN GLASS 303 Spring St Richland, WA 99354	, OccupationNOT EMPLOYED	X		\$125.00	\$125.00
		Occupation				
		Occupation				
		Occupation				
		Occupation				
	<input type="checkbox"/> Check here if additional pages are attached	Sub-total Amount from attached pages			\$250.00 \$0.00	*See reverse for details.

### 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.

\$250.00

4. Date of Deposit

06/13/20

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

Treasurer's Signature

Date

Shir Regev

06-15-2020

Treasurer's Daytime Telephone No.: