

**CASH RECEIPTS
 MONETARY
 CONTRIBUTIONS**

C3
 (1/02)

THIS SPACE FOR OFFICE USE
 100983078
 07-14-2020

Candidate or Committee Name (Do not abbreviate. Use full name.)
(COMMITTEE TO ELECT MATT BOEHNKE)

Mailing Address
6855 W. CLEARWATER AVE., STE 101 BOX 144

City: **KENNEWICK, WA** Zip + 4: **99336** Office Sought (candidates): **STATE REPRESENTATIVE** Election Date: **2020**

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received		Amount	Total
	a. Anonymous		\$90.00
	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: Employer's Name, City and State	P R I	G E N	Amount	Aggregate* Total
07/13/20	NANETTE WALKLEY 4004 DESERT PLATEAU DR. PASCO, WA 99301	,	X		\$100.00	\$200.00
		Occupation RETIRED				
07/13/20	EVELYN WALKLEY 4004 DESERT PLATEAU DR. PASCO, WA 99301	,	X		\$100.00	\$400.00
		Occupation RETIRED				
		Occupation				
		Occupation				
		Occupation				
	<input type="checkbox"/> Check here if additional pages are attached	Sub-total			\$200.00	*See reverse for details.
		Amount from attached pages			\$0.00	

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.

\$200.00

4. Date of Deposit: **07/13/20**

Treasurer's Daytime Telephone No.: **(253)220-5590**

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

Treasurer's Signature: **JASON MICHAUD** Date: **07-14-2020**