

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

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3

THIS SPACE FOR OFFICE USE

100994874

08-31-2020

(Committee to Elect Carly Coburn)							
Mailing Add	Iress						
P.O. Box 5744							
City Zip + 4			Office Sought (candidates)			Election Date	
Pasco, WA 99302		STATE REPRESENTATIVE			2020		
1. MONETA	ARY 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						
08/22/20	c. chian contributions \$20.00 or less not termized and number of persons giving (persons)				s)	\$16.00	
2. CONTRII Date Received	BUTIONS OVER \$25.00 Contributor's Name, Address, City, State, Zip		tions of more than \$100: er's Name, City and State		G E N	Amount	Aggregate* Total
Received	General Chame, Address, Gry, Gtato, Esp						Total
		Occumation					
		Occupation	1				
		Occupation					
	Occupation						
		Occupation	tion				
		Occupation				¢16 00	
	☐ Check here if additional	Sub-total Amount from			-	\$16.00	
	pages are attached	7				50.00	*See reverse
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.						\$16.00	for details.
4. Date of Deposit			I certify that this report is true and complete				
08/26/20			Treasurer's Signature			Date	
Treasurer's Daytime Telephone No.: (206)745-2010			Jason Bennett			08-31-2020	