

CASH RECEIPTS **MONETARY** CONTRIBUTIONS

THIS SPACE FOR OFFICE USE 100998299

09-12-2020

Candidate or Committee Name (Do not abbreviate. Use full name.) (Committee to Elect Carly Coburn) Mailing Address P.O. Box 5744 City Zip + 4Office Sought (candidates) **Election Date** STATE REPRESENTATIVE

2020 Pasco, WA 99302 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 Contributor's Name, Address, City, State, Zip Total Received х 09/05/20 JUDITH JOHANNESEN BATTELLE 1615 SANFORD AVE \$20.00 \$40.00 RICHLAND, WA RICHLAND, WA 99354 **OccupationTECHNICIAN** х 09/07/20 KARI WILLIAMS 5011 w 6th place \$25.00 \$41.00 Kennewick, WA 99336 Occupation Occupation Occupation Occupation Sub-total \$45.00 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. \$45.00 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 Treasurer's Signature Date

09/10/20

Treasurer's Daytime Telephone No.: (206)745-2010

Jason Bennett

09-12-2020