

**CASH RECEIPTS
 MONETARY
 CONTRIBUTIONS**

C3
 (1/02)

THIS SPACE FOR OFFICE USE
 100999118
 09-15-2020

Candidate or Committee Name (Do not abbreviate. Use full name.)
BRAD KLIPPERT (CITIZENS FOR BRAD KLIPPERT)

Mailing Address
7620 WEST 21ST AVENUE

City: **KENNEWICK, WA** Zip + 4: **99338** Office Sought (candidates): **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: Employer's Name, City and State	P R I	G E N	Amount	Aggregate* Total
09/15/20	COMMUNITY BANKERS OF WA (CBW 504 14TH AVENUE SE SUITE 100 OLYMPIA, WA 98501			X	\$250.00	\$250.00
	Occupation					
09/15/20	CONSUMER FIREWORKS SAFETY PAC 16526 SHORE DRIVE NE LAKE FOREST PARK, WA 98155			X	\$300.00	\$300.00
	Occupation					
	Occupation					
	Occupation					
	Occupation					
	<input type="checkbox"/> Check here if additional pages are attached	Sub-total			\$550.00	*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.

\$550.00

4. Date of Deposit: **09/15/20**

Treasurer's Daytime Telephone No.: **(509)947-5383**

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

Treasurer's Signature: **ELLA CHILDERS** Date: **09-15-2020**