



# CASH RECEIPTS MONETARY CONTRIBUTIONS

# C3

(1/02)

**THIS SPACE FOR OFFICE USE**

101001185

09-26-2020

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

BRAD KLIPPERT (CITIZENS FOR BRAD KLIPPERT)

Mailing Address

7620 WEST 21ST AVENUE

City	Zip + 4	Office Sought (candidates)
<b>KENNEWICK, WA</b>	<b>99338</b>	<b>STATE REPRESENTATIVE</b>

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
09/28/20	WA BEER AND WINE DISTRIBUTORS PO BOX 86 OLYMPIA, WA 98507		<input type="checkbox"/>	X	\$500.00	\$500.00
		Occupation				
09/28/20	WA OPTOMETRIC PAC PO BOX 1138 Walla Walla, WA 99362		<input type="checkbox"/>	X	\$250.00	\$250.00
		Occupation				
			<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation				
			<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation				
			<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation				
	<input type="checkbox"/> Check here if additional pages are attached	Sub-total			\$750.00	
		Amount from attached pages			\$0.00	*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.

4. Date of Deposit

09/28/20

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

Date \_\_\_\_\_

ELLA CHILDERS

09-26-2020