

**CASH RECEIPTS
 MONETARY
 CONTRIBUTIONS**

C3
 (1/02)

THIS SPACE FOR OFFICE USE
 101004977
 10-12-2020

Candidate or Committee Name (Do not abbreviate. Use full name.)
(Perry Dozier For State Senate)

Mailing Address
PO Box 3042

City: **Walla Walla, WA** Zip + 4: **99362** Office Sought (candidates): **STATE SENATOR** 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
10/12/20	JAMES HONEYFORD 100 Flagstone Lane Sunnyside, WA 98944			X	\$100.00	\$100.00
	Occupation					
10/12/20	KEVIN JOHN PAULSON 10321 E Bigelow Gulch Road Spokane, WA 99217-9522			X	\$50.00	\$50.00
	Occupation					
10/12/20	BOB RUPAR 1545 Gray Lynn Drive Walla Walla, WA 99362			X	\$500.00	\$500.00
	Occupation RETIRED					
10/12/20	SYDNEY RUPAR 1545 Gary Lynn Drive Walla Walla, WA 99362			X	\$500.00	\$500.00
	Occupation RETIRED					
10/12/20	WASHINGTON AFFORDABLE HOUSING 300 Deschutes Way SW, Suite Tumwater, WA 98501			X	\$1,000.00	\$1,000.00
	Occupation					
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			\$2,150.00	*See reverse for details.
		Amount from attached pages			\$4,750.00	
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.					\$6,900.00	

4. Date of Deposit: **10/12/20**

Treasurer's Daytime Telephone No.: **(509)525-1664**

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

Treasurer's Signature: **Daryl Hopson** Date: **10-12-2020**

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.) (Perry Dozier For State Senate)	Deposit Date 10/12/20
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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*
10/12/20	WASHINGTON WHEAT PAC PO Box 184 Ritzville, WA 99169	Occupation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$500.00	\$500.00
10/12/20	WASHINGTON OPTOMETRIC POLITICAL PO Box 1138 Walla Walla, WA 99362	Occupation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$250.00	\$250.00
10/12/20	WASHINGTON SOCIETY OF CPAS PAC 902 140th Ave NE Bellevue, WA 98005	Occupation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$1,000.00	\$1,000.00
10/12/20	WHCA-PAC 303 Cleveland Avenue SE, Ste Tumwater, WA 98501	Occupation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$1,000.00	\$1,000.00
10/12/20	PHRMA 950 F Street NW, Suite 300 Washington , DC 20004	Occupation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$1,000.00	\$1,000.00
10/12/20	BAYER CORPORATOIN 100 Bayer Road Building Four Pittsburg, PA 15205	Occupation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$1,000.00	\$1,000.00
		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"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		