| PUBLIC | DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 TOLL FREE 1-877-601-2828 | MON | EIPTS TIONS | (1/02) | THIS SPACE FOR OFFICE USE 101005378 10-12-2020 | | |
|---|--|------------------|--------------------------------|---|--|--------------|---------------------------------|
| | or Committee Name (Do not abbreviate | | , | | | | |
| | ens To Elect Ron Wesen d | lba. Re-El | lect Ron | Wesen) | | | |
| Mailing Add | | | | | | | |
| P.0 Boz | x 1345 | - : , | | | •••• | | - |
| Burlington, WA 9823 | | Zip + 4 98233 | Office Sought (COUNTY COMM | | , | Election Dat | e |
| 1. MONET | ARY CONTRIBUTIONS DEPOSITED IN | N ACCOUNT | | | | | |
| Date Received | | | | | | Amount | Total |
| | a. Anonymous | | | | | | \$20.00 |
| | 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 | | | | | | |
| 10/12/20 e. Small contributions \$25.00 or less not itemized and number of persons giving (persons) | | | | | \$25.00 | | |
| 2. CONTRI Date Received | IBUTIONS OVER \$25.00 Contributor's Name, Address, City | y, State, Zip | | ons of more than \$100: [*] 's Name, City and State | P G R E I N | Amount | Aggregate [*] Total |
| 10/12/20 | PAUL HAGMAN 18454 Cascade View Driv Mount Vernon, WA 98274 | ve | | PRESIDENT | x | \$1,000.00 | \$1,000.00 |
| 10/12/20 | DUANE KNAPP 2415 T Ave Suite 210 Mount Vernon, WA 98274 | | / OccupationF | | X | \$400.00 | \$400.00 |
| | | | | | | | |
| | | | Occupation | | | | |
| | | | occupation | | | | |
| | | | Occupation | | | | |
| | | | | | | | |
| | | | Occupation | | | | |
| | | Sub-total | | | \$1,425.00 | *See reverse | |
| | Check here if additional pages are attached | | Amount from attached pages | | \$0.00 | | |
| | FUNDS RECEIVED AND DEPOSITED (arts 1 and 2 above. Enter this amount ir | | | NI | | \$1,425.00 | for details. |
| 4. Date of Deposit | | | | I certify that this report is true and complete to the best of my knowledge Treasurer's Signature Date | | | |
| 10/12/20 Treasurer's Daytime Telephone No.: (360)671-8200 | | | | Bruce Ayers, dba Ayers 10-12-2020 | | | |