

## **CASH RECEIPTS MONETARY**

THIS SPACE FOR OFFICE USE

101007200

Candidate or Committee Name (Do not abbrevisite. Use full name) SKYLER RUDE (COMMITTEE TO ELECT SKYLER RUDE)  Mailing Actions PO BOX 502 City		TOLL FREE 1-877-601-2828	CONTRIBUTIONS		(1/02)		10-15-2020		
Mailing Address PO BOX 502  City Zip + 4					I				
PO BOX 502  City Zp +4 Office Sought (candidates) Election Date 2020  1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT  Date Received			T SKYLER RUDE)						
City   Malla Walla, WA   99362   STATE REPRESENTATIVE   2020	•								
MAILLA WALLA, WA 99362 STATE REPRESENTATIVE 2020  1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT  Date 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)  Date Received  Contributor's Name, Address, City, State, Zip Employer's Name, City and State Received  Ontributor's Name, Address, City, State, Zip Employer's Name, City and State Received  OLYMPIA, WA 98507  Occupation  Occupation  Occupation  Check here if additional parameters of additional parameters		502							
MALLIAN, WA 39362  I. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT  Date 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. CCNTRIBUTIONS OVER \$25.00  Date Received Contributor's Name, Address, City, State, Zip Employer's Name, City and State T N Total  WASHINGTON ELECTRIC PO BOX 7219  PO BOX 7219  OLYMPIA, WA 98507  Occupation  Occupation  Occupation  Check here if additional pages are attached and pages are attached and pages are attached pages  3. TOTAL FUNDS RECEIVED AND DEPOSITED OR CREDITED TO ACCOUNT  Amount from attached pages  3. TOTAL FUNDS RECEIVED AND DEPOSITED OR CREDITED TO ACCOUNT  Amount from attached pages  3. TOTAL FUNDS RECEIVED AND DEPOSITED OR CREDITED TO ACCOUNT  Amount from attached pages  3. TOTAL FUNDS RECEIVED AND DEPOSITED OR CREDITED TO ACCOUNT  Amount from attached pages  3. TOTAL FUNDS RECEIVED AND DEPOSITED TO ACCOUNT  Amount from attached pages  3. TOTAL FUNDS RECEIVED AND DEPOSITED TO ACCOUNT  Amount from attached pages  3. TOTAL FUNDS RECEIVED AND DEPOSITED TO ACCOUNT  Amount from attached pages  3. TOTAL FUNDS RECEIVED AND DEPOSITED TO ACCOUNT  Amount from attached pages  3. TOTAL FUNDS RECEIVED AND DEPOSITED TO ACCOUNT	•		·						
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Received  a. Anonymous	1. MONE	TARY CONTRIBUTIONS DEPOSITED IN	ACCOUNT						
b. Candidate's personal funds deposited in the bank (include candidate loans in 1c)							Amount	Total	
c. Loans, notes, security agreements. Attach Schedule L		a. Anonymous							
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e. Small contributions \$25.00 or less not itemized and number of persons giving		c. Loans, notes, security agreements. Attach Schedule L							
2. CONTRIBUTIONS OVER \$25.00  Date Received Contributor's Name, Address, City, State, Zip Employer's Name, City and State Total  2. COntributor's Name, Address, City, State, Zip Employer's Name, City and State Total  3. Amount Aggregate* Total  4. Amount Aggregate* Total  5. Amount Aggregate* Total  5. Amount Aggregate* Total  7. Contributor's Name, City and State Total  8. Amount Aggregate* Total  8. Soo.oo  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00  \$500.00									
Date Received Contributor's Name, Address, City, State, Zip Contributions of more than \$100:* F R R R R R R R R R R R R R R R R R R	2 CONTE		s not itemized and number of pe	ersons giving (p	persons)				
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4. Date of Deposit

10/15/20

Treasurer's Daytime Telephone No.: (509)526-5689

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

Treasurer's Signature

Date

DEBORA ZALAZNIK

10-15-2020