

CASH RECEIPTS MONETARY CONTRIBUTIONS

THIS SPACE FOR OFFICE USE

101007414

10-15-2020

Candidate or Committee Name (Do not abbreviate. Use full name.) Danielle Garbe Reser (Friends Of Danielle Garbe Reser) Mailing Address

99362

PO Box 3297

Walla Walla, WA

City Zip + 4

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(p | erso | ns) | | |
| 2. CONTR | RIBUTIONS OVER \$25.00 | | | P | G | | |
| Date Received | Contributor's Name, Address, City, State, Zip | | tions of more than \$100:* er's Name, City and State | R I | G E N | Amount | Aggregate [*] Total |
| 10/13/20 | Franklin County Democratic | | | | Х | | |
| | 4209 North Mojave Drive Pasco, WA 99301 | | | | | \$250.00 | \$250.00 |
| | | Occupation | | | | | |
| 10/13/20 | Local 1433 Pasco Firefighters PO box 568 Pasco, WA 99301 | | | | х | | |
| | | | | | | \$500.00 | \$500.00 |
| | | Occupation | 1 | | | | |
| 10/13/20 | Walla Walla Democratic Central PO Box 1323 Walla Walla, WA 99362 | | | | х | \$533.00 | \$1,033.00 |
| | | Occupation | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Occupation | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Occupation | | | | | |
| | | Sub-total | | \$1,283.00 | | | |
| | ☐ Check here if additional pages are attached | 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. | | | | | \$1,283.00 | for details. | |
| 4. Date of Deposit I certify that this report | | | | rue a | nd con | nplete to the best of m | y knowledge |
| 10/12/20 | | | Treasurer's Signature Date | | | | Date |

10/13/20

Treasurer's Daytime Telephone No.: (206)745-2010

Jason Bennett 10-15-2020