

## **CASH RECEIPTS MONETARY** CONTRIBUTIONS

THIS SPACE FOR OFFICE USE

100805874

	001		5110	(1/02)	12	2-29-2017	
Candidate	or Committee Name (Do not abbreviate. Use full nam	ne.)					
PAMELA	J HALEY (Committee to Elect Pam	Haley)					
Mailing Ad	dress						
621 West Sprague Avenue							
City	Zip + 4		Office Sought (candidates)		Election Date		
Spokane			CITY COUNCIL M	TY COUNCIL MEMBER		2017	
1. MONET	ARY CONTRIBUTIONS DEPOSITED IN ACCOUNT						
Date Received					Amount	Total	
	a. Anonymous						
	b. Candidate's personal funds deposited in the bank (include candidate loans in 1c)						
	d. Miscellaneous receipts (interest, refunds, auctions, other). Attach explanation						
	e. Small contributions \$25.00 or less not itemized	and number of p	persons giving (p	persons)			
2. CONTR	IBUTIONS OVER \$25.00			P G			
Date Received	Contributor's Name, Address, City, State, Zip		s of more than \$100:* Name, City and State	P G R E I N	Amount	Aggregate* Total	
2/27/17	SUNSHINE DISPOSAL & RECYCLING X						
	920 N Argonne Rd, #300				\$300.00	\$300.00	
	Spokane Valley, WA 99212						
		Occupation		1 1			
		Occupation		1 1		_	
		Occupation					
		Occupation					
		Occupation					
		Occupation					
		Occupation	•	Sub-total	\$300.00		
	☐ Check here if additional		Amo	unt from	\$0.00	***	
	pages are attached pages			ed pages		*See reverse	

4. Date of Deposit

12/29/17

Treasurer's Daytime Telephone No.: (509)924-4211

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.

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

Treasurer's Signature

12-29-2017 Charlotte Benjamin

\$300.00

for details.