



# C3

(1/02)

100844310

07-16-2018

Candidate or Committee Name (Do not abbreviate. Use full name.)

JUDITH M WARNICK (Judy Warnick for Senate Committee)

Mailing Address

601 S Pioneer Way Ste. F #352

City

Zip + 4

Moses Lake, WA

98837

Office Sought (candidates)

STATE SENATOR

Election Date

2018

## 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 N T	G E N	Amount	Aggregate* Total
07/09/18	WASHINGTON HOSPITAL PAC 999 THIRD AVENUE, SUITE 1400 SEATTLE, WA 98104		X		\$1,000.00	\$1,000.00
		Occupation				
07/09/18	WASHINGTON SOCIETY OF CPAS PAC 902 140TH AVE NE BELLEVUE, WA 98005		X		\$1,000.00	\$1,000.00
		Occupation				
07/09/18	WASHINGTON SOCIETY OF CPAS PAC 902 140TH AVE NE BELLEVUE, WA 98005			X	\$1,000.00	\$1,000.00
		Occupation				
		Occupation				
		Occupation				
	<input type="checkbox"/> Check here if additional pages are attached	Sub-total			\$3,000.00	
		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.

**\$3,000.00**

**\*See reverse  
for details.**

4. Date of Deposit

07/09/18

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

Treasurer's Signature

Date \_\_\_\_\_

Cody Parrish

07-16-2018

Treasurer's Daytime Telephone No.: (509) 766-3100