

**CASH RECEIPTS  
 MONETARY  
 CONTRIBUTIONS**

**C3**  
 (1/02)

THIS SPACE FOR OFFICE USE  
 100844385  
 07-16-2018

Candidate or Committee Name (Do not abbreviate. Use full name.)  
**EDMUND T ORCUTT (Committee to Re-Elect Ed Orcutt)**

Mailing Address  
**PO Box 1280**

City: **Kalama, WA** Zip + 4: **98625** Office Sought (candidates): **STATE REPRESENTATIVE** Election Date: **2018**

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received	Amount	Total
a. Anonymous .....		\$60.00
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 .....		
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	G E N	Amount	Aggregate* Total
07/10/18	STRAT PAC PO Box 30 Chehalis, WA 98532		X		\$1,000.00	\$1,000.00
		Occupation				
07/10/18	STRAT PAC PO Box 30 Chehalis, WA 98532			X	\$1,000.00	\$1,000.00
		Occupation				
07/10/18	WA STATE DENTAL PAC 126 NW CANAL ST SEATTLE, WA 98107		X		\$1,000.00	\$1,000.00
		Occupation				
07/10/18	WA BEVERAGE ASSOCIATION PAC 2210 BLACK LAKE BLVD. SW OLYMPIA, WA 98512		X		\$1,000.00	\$1,000.00
		Occupation				
	<input type="checkbox"/> Check here if additional pages are attached				Sub-total \$4,000.00 Amount from attached pages \$0.00	*See reverse for details.
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.					\$4,000.00	

4. Date of Deposit: **07/13/18**

Treasurer's Daytime Telephone No.: **(360)751-2317**

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

Treasurer's Signature: **Edmund T Orcutt** Date: **07-16-2018**