

Check here if additional

Treasurer's Daytime Telephone No.: (253)988-2455

## CASH RECEIPTS MONETARY CONTRIBUTIONS

**C3** 

\$1,000.00

\$0.00

**Sub-total** 

Amount from

THIS SPACE FOR OFFICE USE

100854552

08-27-2018

Candidate	or Committee Name (Do not abbrevi	ate. Use full nam	ie.)					
NORMA	SMITH (Friends of Norm	a Smith)						
Mailing Ad	ldress							
PO Box	270							
City Zip + 4		Office Sought (candidates)			Election Date 2018			
Clinton, WA 98236		STATE REPRESENTATIVE						
1. MONET	ARY CONTRIBUTIONS DEPOSITED	IN ACCOUNT						
Date Received							Amount	Total
	a. Anonymous							\$130.00
	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 p	persons giving (	persoi	ns)		
2. CONTR	IBUTIONS OVER \$25.00							
Date Received	Contributor's Name, Address, (	City, State, Zip		s of more than \$100:* Name, City and State	P R I	G E N	Amount	Aggregate <sup>*</sup> Total
08/22/18	RETAIL ACTION COUNCIL	1				х		
	PO Box 2227						\$1,000.00	\$1,000.00
	Olympia, WA 98507							
			Occupation					
		Occupation						

pages are attached \*\*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.

4. Date of Deposit I certify that this report is true and complete to the best of my knowledge

Treasurer's Signature Date

Tom Perry 08-27-2018

Occupation

Occupation

Occupation