



CASH RECEIPTS MONETARY CONTRIBUTIONS

C3

(1/02)

THIS SPACE FOR OFFICE USE

100859141

09-17-2018

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	Zip + 4	Office Sought (candidates)
Kalama, WA	98625	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
09/08/18	NASH CASCADIA VERDE, LLC 9820 TOWNE CENTRE DR SAN DIEGO, CA 92121			X	\$1,000.00	\$1,000.00
		Occupation				
09/10/18	WA HOSPITALITY ASSOC PAC 510 Plum St SE, Suite 200 Olympia, WA 98501			X	\$1,000.00	\$1,000.00
		Occupation				
09/13/18	ALLSTATE INSURANCE CO 2775 Sanders Rd Northbrook, IL 60062			X	\$500.00	\$500.00
		Occupation				
09/13/18	WA OIL MARKETERS ASSOC 9390 Orchard Ave SE Port Orchard, WA 98367			X	\$1,000.00	\$1,000.00
		Occupation				
		Occupation				
	<input type="checkbox"/> Check here if additional pages are attached	Sub-total			\$3,500.00	*See reverse
		Amount from attached pages			\$0.00	

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.

\$3,500.00

4. Date of Deposit

09/13/18

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

Date _____

Edmund T Orcutt

09-17-2018