

# CASH RECEIPTS MONETARY CONTRIBUTIONS

# C3

(1/02)

THIS SPACE FOR OFFICE USE

100866612

10-16-2018

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

**BRENNAN F BAILEY (Friends of Brennan Bailey)**

Mailing Address

**PO Box 1431**

City Zip + 4 Office Sought (candidates)  
**Chehalis, WA 98532 STATE REPRESENTATIVE**

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	G E N	Amount	Aggregate* Total
10/10/18	JOAN HUTCHISON PO Box 395 Chehalis, WA 98532			X	\$100.00	\$100.00
	Occupation					
	Occupation					
	Occupation					
	Occupation					
	Occupation					
	Occupation					
	<input type="checkbox"/> Check here if additional pages are attached	Sub-total			\$100.00	*See reverse for details.
		Amount from attached pages			\$0.00	
					\$100.00	

## 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.

\$100.00

4. Date of Deposit

10/10/18

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

Treasurer's Signature

Date

**Denise S Nozsar**

10-16-2018

Treasurer's Daytime Telephone No.: (360) 304-9926