

# CASH RECEIPTS MONETARY CONTRIBUTIONS

## C3

(1/02)

THIS SPACE FOR OFFICE USE

100981640

07-10-2020

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

**Emily Randall (Emily Randall for Senate)**

Mailing Address

**PO Box 1883**

City

**Port Orchard, WA**

Zip + 4

**98366**

Office Sought (candidates)

**STATE SENATOR**

Election Date

**2022**

### 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 .....            |                |       |
| <b>06/23/20</b> | e. Small contributions \$25.00 or less not itemized and number of persons giving <u>2</u> (persons) | <b>\$25.00</b> |       |

### 2. CONTRIBUTIONS OVER \$25.00

| Date Received   | Contributor's Name, Address, City, State, Zip                                      | Contributions of more than \$100: *<br>Employer's Name, City and State | P<br>R<br>I                         | G<br>E<br>N              | Amount         | Aggregate*<br>Total              |
|-----------------|--|--|-------------------------------------|--------------------------|----------------|----------------------------------|
| <b>06/28/20</b> | <b>Dianne Lee</b><br><b>8302 Dogwood Ln NW</b><br><b>Gig Harbor, WA 98332-6724</b> | ,  | <input checked="" type="checkbox"/> | <input type="checkbox"/> | <b>\$10.00</b> | <b>\$50.00</b>                   |
|                 | Occupation   |  | <input type="checkbox"/>            | <input type="checkbox"/> |                |                                  |
|                 | Occupation   |  | <input type="checkbox"/>            | <input type="checkbox"/> |                |                                  |
|                 | Occupation   |  | <input type="checkbox"/>            | <input type="checkbox"/> |                |                                  |
|                 | Occupation   |  | <input type="checkbox"/>            | <input type="checkbox"/> |                |                                  |
|                 | Occupation   |  | <input type="checkbox"/>            | <input type="checkbox"/> |                |                                  |
|                 | Occupation   |  | <input type="checkbox"/>            | <input type="checkbox"/> |                |                                  |
|                 | Occupation   |  | <input type="checkbox"/>            | <input type="checkbox"/> |                |                                  |
|                 | <input type="checkbox"/> Check here if additional pages are attached               | <b>Sub-total</b>   |                                     |                          | <b>\$35.00</b> | <b>*See reverse for details.</b> |
|                 |  | <b>Amount from attached pages</b>                                      |                                     |                          | <b>\$0.00</b>  |                                  |

### 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.

**\$35.00**

4. Date of Deposit

**06/29/20**

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

Treasurer's Signature

Date

**Abbot Taylor**

**07-10-2020**

Treasurer's Daytime Telephone No.: **(206) 218-3108**