

Treasurer's Daytime Telephone No.:

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3

THIS SPACE FOR OFFICE USE

110040283

08-10-2021

08-10-2021

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

(Committee to Re-Elect Ed Orcutt)

Mailing Address

PO Box 1280

City Zip + 4 Office Sought (candidates) Election Date State REPRESENTATIVE 2022

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

| Date Received | | | | | | Amount | Total |
|---|---|----------------------------|---|--|-------------|--------------|---------------------|
| | a. Anonymous | | | | | | |
| | b. Candidate's personal funds deposited in the ba | | | | | | |
| | c. Loans, notes, security agreements. Attach Schedule L | | | | | | |
| | d. Miscellaneous receipts (interest, refunds, aucti | | | | | | |
| 07/30/21 | e. Small contributions \$25.00 or less not itemized | s) | \$45.00 | | | | |
| 2. CONTR | IBUTIONS OVER \$25.00 | | | | | | |
| Date Received | Contributor's Name, Address, City, State, Zip | | tions of more than \$100:* er's Name, City and State | P R I | G E N | Amount | Aggregate* Total |
| 07/30/21 | CHRIS CLOWE | | | х | | | |
| | 699 Salmon Creek Rd Mossyrock, WA 98564 | | | | | \$100.00 | \$100.00 |
| | | Occupation | r | | | | |
| 07/30/21 | LANNY CAWLEY PO BOX 1144 WOODLAND, WA 98674 | | | х | | \$50.00 | \$50.00 |
| | | Occupation | | | | | |
| 07/30/21 | THOMAS KIRKWOOD 896 Park Ave E Tenino, WA 98589 | | | х | | \$100.00 | \$100.00 |
| | | Occupation | | | | | |
| 07/30/21 | THOMAS FOX PO BOX 311 ETHEL, WA 98542 | | | X | | \$100.00 | \$100.00 |
| | | Occupation | | 1 1 | | | |
| 07/30/21 | JERRY OLSON 250 WILLIAMS RD ARIEL, WA 98603 | | | Х | | \$50.00 | \$50.00 |
| | | Occupation | | | | | |
| | | | | Sub-to | - | \$445.00 | |
| | Check here if additional pages are attached | Amount from attached pages | | | \$50.00 | *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. | | | | | \$495.00 | for details. | |
| 4. Date of Deposit | | | | ertify that this report is true and complete to the best of my knowledge | | | |
| 07/30/21 | | | Treasurer's Signature | | | | Date |

Edmund Orcutt

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

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

Page 2

Page Total \$50.00

Deposit Date

| (Committee | 07/30/21 | | | | | |
|--|---|---------------------------------|--|---|---------|---------------------|
| 2. CONTRIBUTIONS OVER \$25.00 Contributions of more than \$100:* P G R E | | | | | | Aggregate Total* |
| Date Received | Contributor's Name, Address, City, State, Zip | Employer's Name, City and State | l v | N | Amount | Total* |
| 07/30/21 | PATRICIA OLSON 250 WILLIAMS RD | | Х | 1 | | |
| | ARIEL, WA 98603 | | | | \$50.00 | \$50.00 |
| | , | Occupation | | | | |
| | | | | | | |
| | | | | | | |
| | | Occupation | _ | | | |
| | | | | | | |
| | | | | | | |
| | | Occupation | | | | |
| | | | | | | |
| | | | | | | |
| | | Occupation | | | | |
| | | | | | | |
| | | | | , | | |
| | | Occupation | | | | |
| | | Occupation | | | | |
| | | | | | | |
| | | | | | | |
| | | Occupation | | | | |
| | | | | | | |
| | | | | | | |
| | | Occupation | | | | |
| | | | | | | |
| | | | | | | |
| | | Occupation | | | | |
| | | | | | | |
| | | | | | | |
| | | Occupation | | | | |
| | | 2227 | | | | |
| | | | Į . | | | |
| | | | | | | |
| | | Occupation | | | | |
| | | | | 1 | | |
| | | | | | | |
| | | Occupation | | | | |