

# CASH RECEIPTS MONETARY CONTRIBUTIONS

## C3

(1/02)

THIS SPACE FOR OFFICE USE

110046782

09-10-2021

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

(Committee to Elect Peter Abbarno)

Mailing Address

PO Box 94

City Zip + 4 Office Sought (candidates)  
 Centralia, WA 98531 STATE REPRESENTATIVE

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 .....		
	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
08/10/21	RANDAL LARSON PO BOX 1134 WOODLAND, WA 98674		X		\$250.00	\$250.00
		Occupation RETIRED				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
	<input type="checkbox"/> Check here if additional pages are attached	Sub-total			\$250.00	*See reverse for details.
		Amount from attached pages			\$0.00	
					\$250.00	

### 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.

4. Date of Deposit

08/10/21

Treasurer's Daytime Telephone No.: (360) 706-7137

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

Treasurer's Signature

Date

Fred Rider

09-10-2021