

CASH RECEIPTS MONETARY CONTRIBUTIONS

THIS SPACE FOR OFFICE USE

110046787

09-10-2021

Candidate or Committee Name (Do	not abbreviate. Use full name.)		
(Committee to Elect Pe	eter Abbarno)		
Mailing Address			
PO Box 94			
City	Zip + 4	Office Sought (candidates)	Election Dat
Centralia, WA	98531	STATE REPRESENTATIVE	2022

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT Date **Amount Total** Received 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 Contributions of more than \$100:* Aggregate* Date R Ε **Amount** Employer's Name, City and State Received Contributor's Name, Address, City, State, Zip Total х 08/19/21 SUSAN GONZALES 115 SE Westside Dr \$60.00 \$60.00 Chehalis, WA 98532 Occupation Occupation Occupation Occupation Occupation Sub-total \$60.00 Check here if additional Amount from \$0.00 pages are attached *See reverse attached pages 3. TOTAL FUNDS RECEIVED AND DEPOSITED OR CREDITED TO ACCOUNT for details. \$60.00 Sum of parts 1 and 2 above. Enter this amount in line 1, Schedule A to C4. 4. Date of Deposit I certify that this report is true and complete to the best of my knowledge Treasurer's Signature Date

08/20/21

Fred Rider

09-10-2021

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