



CASH RECEIPTS MONETARY CONTRIBUTIONS

C3

(1/02)

THIS SPACE FOR OFFICE USE

110046790

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
8/21/21	DIANA CARLEN 1529 N PROSPECT ST TACOMA, WA 98406		X		\$100.00	\$100.00
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Sub-total			\$100.00	
		Amount from attached pages			\$0.00	
	<input type="checkbox"/> Check here if additional pages are attached					*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.

4. Date of Deposit

08/24/21

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

Fred Rider

Date _____

09-10-2021