

Treasurer's Daytime Telephone No.:

## CASH RECEIPTS MONETARY CONTRIBUTIONS

**C3** 

THIS SPACE FOR OFFICE USE

110052577

10-10-2021

Candidate or Committee Name (Do r	not abbreviate. Use full name.)	-
(Committee to Re-Elect	Ed Orcutt)	
Mailing Address		
PO Box 1280		
City	Zip + 4	Office Sought (candidates)
Kalama WA	98625	STATE REPRESENTATIVE

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 Contributor's Name, Address, City, State, Zip **Total** Received х 09/29/21 WA STATE AUTO DEALERS PAC 621 SW GRADY WAY \$1,000.00 \$1,000.00 RENTON, WA 98057 Occupation Х 09/29/21 BOATMAN FAMILY PROPERTIES, LLC PO BOX 67 \$200.00 \$200.00 KALAMA, WA 98625 Occupation Occupation Occupation Occupation Sub-total \$1,200.00 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. \$1,200.00 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 09/29/21

Edmund Orcutt

10-10-2021