

**CASH RECEIPTS
 MONETARY
 CONTRIBUTIONS**

C3
 (1/02)

THIS SPACE FOR OFFICE USE
 110057405
 10-25-2021

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

Mailing Address
PO BOX 61762

City: **VANCOUVER, WA** Zip + 4: **98666** Office Sought (candidates): **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
10/26/21	ELI LILLY & CO Lilly Corporate Center Indianapolis, IN 46285		X		\$500.00	\$500.00
		Occupation				
10/26/21	CIGNA 900 Cottage Rd, B6LPA Bloomfield, CT 06002		X		\$500.00	\$500.00
		Occupation				
10/26/21	WA STATE AUTO DEALERS PAC 621 SW Grady Way Renton, WA 98057		X		\$1,000.00	\$1,000.00
		Occupation				
10/26/21	PREMERA PO Box 327 Seattle, WA 98111		X		\$1,000.00	\$1,000.00
		Occupation				
10/26/21	SABEY CORP 12201 Tukwila Int'l Blvd, 4th Seattle, WA 98168		X		\$500.00	\$500.00
		Occupation				
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			\$3,500.00	*See reverse for details.
		Amount from attached pages			\$500.00	

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.

\$4,000.00

4. Date of Deposit: **10/26/21**

Treasurer's Daytime Telephone No.: **(360)609-3527**

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

Treasurer's Signature: **MARSHA MANNING** Date: **10-25-2021**

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

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

Deposit Date
10/26/21

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*
10/26/21	BRISTOL MYERS SQUIBB PO Box 25277 Tampa, FL 33622	Occupation	X		\$500.00	\$500.00
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