

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

## CASH RECEIPTS **MONETARY** CONTRIBUTIONS

THIS SPACE FOR OFFICE USE 110064924

12-09-2021

(Committee to Re-Elect Ed Orcutt) Mailing Address PO Box 1280 City Zip + 4Office Sought (candidates) **Election Date** STATE REPRESENTATIVE 2022 Kalama, WA 98625 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 11/12/21 WA HOSPITALITY ASSOC PAC 510 PLUM ST SE, SUITE 200 \$1,000.00 \$1,000.00 OLYMPIA, WA 98501 Occupation Х 11/12/21 WA BEVERAGE ASSOCIATION PAC PO Box 7326 \$1,000.00 \$1,000.00 OLYMPIA, WA 98507 Occupation Occupation Occupation Occupation Sub-total \$2,000.00 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. \$2,000.00 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 11/12/21 Edmund Orcutt 12-09-2021 Treasurer's Daytime Telephone No.: