

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3

(1/02)

THIS SPACE FOR OFFICE USE

110070242

01-11-2022

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

(People for Amber Waldref)

Mailing Address

PO Box 4812

City

Spokane, WA

Zip + 4

99220

Office Sought (candidates)

COUNTY COMMISSIONER

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:*	P R I	G E N	Amount	Aggregate* Total
01/07/22	KAREN BYRD 424 E Sinto Avenue Spokane, WA 99202	Providence Hospital Spokane, WA OccupationRN	X		\$250.00	\$250.00
01/07/22	DAVID CAMP 2729 W. Westover Rd. Spokane, WA 99208	Occupation	X		\$100.00	\$100.00
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
	<input type="checkbox"/> Check here if additional pages are attached	Sub-total			\$350.00	*See reverse for details.
		Amount from attached pages			\$0.00	

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.

\$350.00

4. Date of Deposit

01/11/22

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

Treasurer's Signature

Date

Kandace Watkins

01-11-2022

Treasurer's Daytime Telephone No.: (509)995-7702