

# CASH RECEIPTS MONETARY CONTRIBUTIONS

## C3

(1/02)

THIS SPACE FOR OFFICE USE

110072528

02-08-2022

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

**LELACH RAVE (Friends of Dr. Lelach Rave)**

Mailing Address

**P.O. Box 27113**

City

**Seattle, WA**

Zip + 4

**98165**

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
01/30/22	JOSH LABELLE 911 PINE STREET SEATTLE, WA 98101	SEATTLE THEATRE GROUP SEATTLE, WA OccupationARTS ADMINISTRATION	X		\$250.00	\$250.00
		Occupation				
		Occupation				
		Occupation				
		Occupation				
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		Occupation				
	<input type="checkbox"/> Check here if additional pages are attached	Sub-total Amount from attached pages			\$250.00 \$0.00	*See reverse for details.
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.					\$250.00	

4. Date of Deposit

**02/01/22**

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

Treasurer's Signature

Date

**Andy Lo**

**02-08-2022**

Treasurer's Daytime Telephone No.: **(206) 335-8815**