



# CASH RECEIPTS MONETARY CONTRIBUTIONS

# C3

(1/02)

**THIS SPACE FOR OFFICE USE**

110076376

03-10-2022

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
03/08/22	DAVID WILLIS 7809 NE 174TH AVE VANCOUVER, WA 98682		X		\$100.00	\$100.00
		Occupation				
03/08/22	PAULA LOZANO 218 DORFFEL DRIVE EAST SEATTLE, WA 98112		X		\$100.00	\$100.00
		Occupation				
03/08/22	RAMY OH 7715 20TH AVE NE SEATTLE, WA 98115		X		\$100.00	\$100.00
		Occupation				
03/08/22	REBECCA KOLSKY 4237 NE 90TH ST SEATTLE, WA 98125	THE EVERETT CLINIC  MILL CREEK, WA	X		\$100.00	\$400.00
		OccupationPHYSICIAN				
		Occupation				
	<input type="checkbox"/> Check here if additional pages are attached	Sub-total			\$400.00	*See reverse
		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.

4. Date of Deposit

03/10/22

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

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

Treasurer's Signature

Date \_\_\_\_\_

Andy Lo

03-10-2022