

**CASH RECEIPTS  
 MONETARY  
 CONTRIBUTIONS**

**C3**  
 (1/02)

THIS SPACE FOR OFFICE USE  
 110076703  
 03-10-2022

Candidate or Committee Name (Do not abbreviate. Use full name.)  
**(Joy for Washington)**

Mailing Address  
**po box 354**

City **carson, WA** Zip + 4 **98610** Office Sought (candidates) **STATE REPRESENTATIVE** Election Date **2022**

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

| Date Received |                                                                                                  | Amount | Total   |
|---------------|--------------------------------------------------------------------------------------------------|--------|---------|
|               | a. Anonymous .....                                                                               |        | \$48.00 |
|               | 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:<br>Employer's Name, City and State | P<br>R<br>I | G<br>E<br>N | Amount   | Aggregate*<br>Total       |
|---------------|----------------------------------------------------------------------|----------------------------------------------------------------------|-------------|-------------|----------|---------------------------|
| 02/28/22      | BOB TALENT<br>PO Box 335<br>Stevenson, WA 98648                      |                                                                      |             | X           | \$200.00 | \$300.00                  |
|               |                                                                      | Occupation RETIRED                                                   |             |             |          |                           |
|               |                                                                      | Occupation                                                           |             |             |          |                           |
|               |                                                                      | Occupation                                                           |             |             |          |                           |
|               |                                                                      | Occupation                                                           |             |             |          |                           |
|               |                                                                      | Occupation                                                           |             |             |          |                           |
|               | <input type="checkbox"/> Check here if additional pages are attached | Sub-total                                                            |             |             | \$200.00 | *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.

\$200.00

4. Date of Deposit **02/28/22**

Treasurer's Daytime Telephone No.: **(360)771-0099**

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

Treasurer's Signature **Krystal Patton** Date **03-10-2022**