

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3

(1/02)

THIS SPACE FOR OFFICE USE

100732043

10-31-2016

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

LAURIE DOLAN (Friends of Laurie Dolan)

Mailing Address

4315 78th Ave SW

City	Zip + 4	Office Sought (candidates)
Olympia, WA	98512	STATE REPRESENTATIVE

Election Date
2016

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
10/29/16	WASHINGTON PHYSICAL THERAPY 1855 1st St Cheney, WA 99004		<input type="checkbox"/>	X	500.00	500.00
	Occupation					
10/29/16	JZK, INC PO Box 1210 Yelm, WA 98597		<input type="checkbox"/>	X	1,000.00	1,000.00
	Occupation					
			<input type="checkbox"/>			
	Occupation					
			<input type="checkbox"/>			
	Occupation					
			<input type="checkbox"/>			
	Occupation					
	<input type="checkbox"/> Check here if additional pages are attached	Sub-total			1,500.00	*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.

1,500.00

4. Date of Deposit

10/31/16

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

Treasurer's Signature

Date

James L Carrick

10-31-2016

Treasurer's Daytime Telephone No.: (509) 999-2105