PUBLIC DISCLOSURE COMMISSION
711 CAPITOL WAY RM 206
PO BOX 40908
OLYMPIA WA 98504-0908
(360) 753-1111
TOLL FREE 1-877-601-2828

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3
(1/02)

THIS SPACE FOR OFFICE USE
100735196
11-14-2016

Candidate or Committee Name (Do not abbreviate. Use full name.)
THOMAS E DENT (Committee to Re-Elect Tom Dent State Representative)

Mailing Address
601 Pioneer Way #396

City	Zip + 4	Office Sought (candidates)	Election Date
Moses Lake, WA	98837	STATE REPRESENTATIVE	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	PRI	GEN	Amount	Aggregate* Total
11/08/16	FRIENDS OF WSU 227 BELLEVUE WAY NE #580 BELLEVUE, WA 98004	Occupation		X	500.00	500.00
11/08/16	WA ANGLERS FOR CONSERVATION P O BOX 14160 OLYMPIA, WA 98511	Occupation		X	500.00	500.00
		Occupation				
		Occupation				
		Occupation				
		Sub-total			1,000.00	
	☐ Check here if additional pages are attached	Amount from attached pages			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. 1,000.00

4. Date of Deposit
11/08/16

Treasurer's Daytime Telephone No.: (509) 765-6926

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

Treasurer's Signature	Date
Dayna Dent	11-14-2016