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| **PUBLIC DISCLOSURE COMMISSION**  **711 CAPITOL WAY RM 206**  **PO BOX 40908**  **OLYMPIA WA 98504-0908**  **(360) 753-1111**  **TOLL FREE 1-877-601-2828** | | **Incidental Committee**  **Payments and Political Expenditures Report** | **C8**  (2/2020) | **PDC OFFICE USE** |
| Name of Incidental Committee | | | | |
| Attention (Identify person to whom inquiries about the report should be directed.) | | | Email | |
| Mailing Address | | | Telephone  (   )   - | |
| City | State | | Zip + 4       - | |
| Reporting From (last C-8) To (end of period)  Period              Covered | | | | |
| |  |  |  | | --- | --- | --- | | **Name of Person or Organization Making Payment** | **Amount** | **Description, if in-kind payment** | | Continued on attached sheet. |   2. Top ten largest sources of payments (monetary transfers or dollar value of services provided as in-kind) of $10,000 or more to Incidental Committee during the current calendar year, if changed since last C-8 report. Include sources tied as the tenth largest, if any. | | | | |
| 3. Monetary or In-kind contributions from Incidental Committee to a candidate or political committee during the reporting period.   |  |  |  | | --- | --- | --- | | **Name of Recipient Candidate or Political (e.g. ballot measure) Committee** | **Amount** | **Date and Description, if in-kind contribution** | | Continued on attached sheet. | | | | | |

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| **Certification: I certify that this report is true, complete and correct to the best of my knowledge. I acknowledge that the email address herein constitutes the official address for purposes of all communications with the Commission, and that I must notify the Commission of any change to that address within ten days.**  Printed Name and Title of Officer or Leader: | Signature of Officer or Leader Date |