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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**  (4.2023) | **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 | | | | | | |
| 2. Top ten largest sources of payments (monetary transfers or dollar value of services provided as in-kind) of $15,000 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. | | | | | | |
| **Name of Person or Organization Making Payment** | | | **Amount** | **Description, if in-kind payment**  Continued on attached sheet. | | |
| 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. | | |
| **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 | | | |

