

**CASH RECEIPTS
 MONETARY
 CONTRIBUTIONS**

C3
 (1/02)

THIS SPACE FOR OFFICE USE

100770717

06-22-2017

Candidate or Committee Name (Do not abbreviate. Use full name.)
 James D Constantine (Friends of Dow Constantine)

Mailing Address
 PO Box 16285

City: Seattle, WA Zip + 4: 98116 Office Sought (candidates): COUNTY EXECUTIVE Election Date: 2017

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received		Amount	Total
	a. Anonymous	0.00	25.00
	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		
06/15/17	e. Small contributions \$25.00 or less not itemized and number of persons giving <u>41</u> (persons)	74.75	

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
06/20/17	Maureen Brinck-Lund 7009 35th Ave NW Seattle, WA 98117-6142		X		50.00	50.00
	Occupation					
06/17/17	Pauline Cramer 7002 51st Ave NE Seattle, WA 98115-6132		X		25.00	30.00
	Occupation					
06/18/17	Pauline Cramer 7002 51st Ave NE Seattle, WA 98115-6132		X		5.00	30.00
	Occupation					
06/21/17	Johan Ellstrom 241 Indian Ln Media, PA 19063-4717		X		50.00	50.00
	Occupation					
06/20/17	Natasha Jones 7429 S 128th St Seattle, WA 98178-4347	King County Seattle, WA	X		10.00	670.00
	Occupation	Director of Customer Service				
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			214.75	*See reverse for details.
		Amount from attached pages			125.00	

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.

339.75

4. Date of Deposit

06/21/17

Treasurer's Daytime Telephone No.: (206) 382-5552

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

Treasurer's Signature

Date

Philip Lloyd

06-22-2017

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.) James D Constantine (Friends of Dow Constantine)	Deposit Date 06/21/17
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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*
06/20/17	Mary O Nichols 11220 19th Dr SE Everett, WA 98208-5284	Shuttlepark2 Airport Parking Tukwila, WA Occupation <u>Owner</u>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	25.00	125.00
06/21/17	Stephanie Wallach 7620 NE 12th St Medina, WA 98039-3119	, Occupation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	100.00	100.00
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		