

# CASH RECEIPTS MONETARY CONTRIBUTIONS

# C3

(1/02)

THIS SPACE FOR OFFICE USE

100794751

10-20-2017

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 .....		
	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 N T	G E N E R A L	Amount	Aggregate* Total
10/17/17	Richard Altig 10025 111th Ave NE Kirkland, WA 98033-5138	American Income Life - Altig Redmond, WA OccupationExecutive		X	1,000.00	1,000.00
10/17/17	Josh Ayala 717 NW 73rd St Seattle, WA 98117-4954	King Seattle, WA OccupationExecutive Producer		X	500.00	500.00
10/12/17	William Bain 2033 1st Ave, Apt 2 Seattle, WA 98121-2132	Self Seattle, WA OccupationConsultant		X	200.00	200.00
10/11/17	Shelly Brown Reiss 5734 26th Ave NE Seattle, WA 98105-5506	Self Seattle, WA OccupationAttorney		X	100.00	100.00
10/10/17	Diane R Ezell 1845 S Lane St Seattle, WA 98144-2907	, Occupation		X	35.00	35.00
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			1,835.00	*See reverse for details.
		Amount from attached pages			1,356.00	

## 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.

3,191.00

4. Date of Deposit

10/17/17

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

Treasurer's Signature

Date

Philip Lloyd

10-20-2017

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

# RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

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Candidate or Committee Name (Do not abbreviate. Use full name.) James D Constantine (Friends of Dow Constantine)	Deposit Date 10/17/17
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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*
10/16/17	Darcy Jaffe 9820 Triton Dr NW Seattle, WA 98117-2543	Harborview Medical Center Seattle, WA Occupation Chief Nursing Officer	<input type="checkbox"/>	<input checked="" type="checkbox"/>	500.00	500.00
10/17/17	Elaine Nonneman 226 21st Ave E Seattle, WA 98112-5317	Self Seattle, WA Occupation Grantmaker/investor	<input type="checkbox"/>	<input checked="" type="checkbox"/>	500.00	500.00
10/13/17	Elaine Phelps 17238 10th Ave NW Shoreline, WA 98177-3713	None Shoreline, WA Occupation Retired	<input type="checkbox"/>	<input checked="" type="checkbox"/>	250.00	275.00
10/14/17	Irene Stewart 5622 41st Ave SW Seattle, WA 98136-1507	City of Seattle Seattle, WA Occupation Project Manager	<input type="checkbox"/>	<input checked="" type="checkbox"/>	50.00	100.00
10/13/17	Janet E Wainwright 4001 SW Cloverdale St Seattle, WA 98136-2363	None Seattle, WA Occupation Retired	<input type="checkbox"/>	<input checked="" type="checkbox"/>	56.00	56.00
		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"/>		
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		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		

Page Total 1,356.00