

**CASH RECEIPTS
 MONETARY
 CONTRIBUTIONS**

C3
 (1/02)

THIS SPACE FOR OFFICE USE

100802189

12-04-2017

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	G E N	Amount	Aggregate* Total
11/21/17	Kenneth Alhadeff 1752 NW Market St, # 808 Seattle, WA 98107-5264	Self Seattle, WA Occupation: Business Owner		X	500.00	500.00
11/21/17	James C Causey 8011 SE 71st St Mercer Island, WA 98040-5307	Causey Wright Seattle, WA Occupation: Mediator		X	500.00	800.00
11/17/17	Barbara Malone 1531 10th Ave E Seattle, WA 98102-4210	None Seattle, WA Occupation: Homemaker		X	500.00	1,000.00
11/21/17	Lorne McConachie 1723 NE Naomi Pl Seattle, WA 98115-6828	Bassetti Architects Seattle, WA Occupation: Architect		X	100.00	350.00
11/22/17	Chris Mefford 4712 NE 60th St Seattle, WA 98115-7608	Community Attributes Inc Seattle, WA Occupation: Consultant		X	250.00	1,000.00
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			1,850.00	*See reverse for details.
		Amount from attached pages			275.00	

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.

2,125.00

4. Date of Deposit

11/23/17

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

12-04-2017

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 11/23/17
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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*
11/22/17	Heather Mefford 4712 NE 60th St Seattle, WA 98115-7608	University of Washington Seattle, WA Occupation Professor	<input type="checkbox"/>	<input checked="" type="checkbox"/>	250.00	250.00
11/21/17	Linda Wells 5000 California Ave SW, Apt 305 Seattle, WA 98136-1266	King County Seattle, WA Occupation Program Manager	<input type="checkbox"/>	<input checked="" type="checkbox"/>	25.00	75.00
		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"/>		
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