

**CASH RECEIPTS  
 MONETARY  
 CONTRIBUTIONS**

**C3**  
 (1/02)

THIS SPACE FOR OFFICE USE  
 100837312  
 06-11-2018

Candidate or Committee Name (Do not abbreviate. Use full name.)  
**Rebecca Salda?a (People for Rebecca Salda?a)**

Mailing Address  
**PO Box 20776**

City: **Seattle, WA** Zip + 4: **98102** Office Sought (candidates): **STATE SENATOR** Election Date: **2018**

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received		Amount	Total
	a. Anonymous .....		
	b. Candidate's personal funds deposited in the bank (include candidate loans in 1c).....		
	c. Loans, notes, security agreements. Attach Schedule L .....		
<b>various</b>	d. Miscellaneous receipts (interest, refunds, auctions, other). Attach explanation .....	<b>\$263.11</b>	
	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
06/04/18	IBEW Local 77 PAC 19415 International Blvd Seatac, WA 98188-5309	,	X		\$1,000.00	\$1,000.00
	Occupation					
06/04/18	IBEW Local 77 PAC 19415 International Blvd Seatac, WA 98188-5309	,		X	\$1,000.00	\$1,000.00
	Occupation					
06/08/18	PacNW Regional Council of 25120 Pacific Hwy S, # 200 Kent, WA 98032-5436	,	X		\$300.00	\$700.00
	Occupation					
	<input type="checkbox"/> Check here if additional pages are attached					
<b>Sub-total</b>					<b>\$2,563.11</b>	<b>*See reverse for details.</b>
<b>Amount from attached pages</b>					<b>\$0.00</b>	

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.

**\$2,563.11**

4. Date of Deposit: **06/08/18**

Treasurer's Daytime Telephone No.: **(206)218-3108**

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

Treasurer's Signature: **Abbot Taylor** Date: **06-11-2018**

**Statement of Miscellaneous Receipts**  
**Attachment to Form C3**

Candidate or Committee Name  
Rebecca Saldaña (People for Rebecca Saldaña)

Deposit Date

Date Received	Payee's Name, Address, City, State, Zip	Description	Amount
06/06/18	WSFGC Headquarters House 2336 15th Ave S Seattle, WA 98144-5021	Refund of Event Space Deposit	\$200.00
06/08/18	Overnight Printing Seattle 2412 1st Ave S Seattle, WA 98134-1422	Refund for Overpayment	\$63.11

Subtotal this page \$263.11