

**CASH RECEIPTS
 MONETARY
 CONTRIBUTIONS**

C3
 (1/02)

THIS SPACE FOR OFFICE USE
 100910456
 06-11-2019

Candidate or Committee Name (Do not abbreviate. Use full name.)
(Citizens for Jami Lund)

Mailing Address
PO Box 1734

City: **Centralia, WA** Zip + 4: **98531** Office Sought (candidates): **SCHOOL DIRECTOR** Election Date: **2019**

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).....		
06/05/19	c. Loans, notes, security agreements. Attach Schedule L	\$208.47	
	d. Miscellaneous receipts (interest, refunds, auctions, other). Attach explanation		
06/11/19	e. Small contributions \$25.00 or less not itemized and number of persons giving <u>2</u> (persons)	\$50.00	

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
06/05/19	COLLEEN MORSE 909 H St Centralia, WA 98531			X	\$100.00	\$100.00
	Occupation					
06/11/19	TYLER WHITWORTH 10915 Tempo Lk Dr Tenino, WA 98589			X	\$100.00	\$100.00
	Occupation					
06/11/19	DERWIN CHRISTIANSEN 2223 Summit Lake Shore Dr NW Olympia, WA 98502			X	\$30.00	\$30.00
	Occupation					
06/11/19	MICHAEL STROHBACH 104 Vega Pl Chehalis, WA 98532			X	\$50.00	\$50.00
	Occupation					
06/11/19	MARGARET STROHBACH 104 Vega Pl Chehalis, WA 98532			X	\$50.00	\$50.00
	Occupation					
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			\$588.47	*See reverse for details.
		Amount from attached pages			\$100.00	

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.

\$688.47

4. Date of Deposit: **06/11/19**

Treasurer's Daytime Telephone No.:

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

Treasurer's Signature: **Jami Lund** Date: **06-11-2019**

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.)
(Citizens for Jami Lund)

Deposit Date
06/11/19

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*
06/11/19	TOM DUFFY 732 W. Roanoke St Centralia, WA 98531	Occupation		X	\$50.00	\$50.00
06/11/19	AMY DUFFY 732 W. Roanoke St Centralia, WA 98531	Occupation		X	\$50.00	\$50.00
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LOANS

SCHEDULE TO C3 OR C4

L
(12/99)

Candidate or Committee Name

Report Date

~~(Citizens for Jami Lund)~~

1. MONETARY OR IN-KIND LOAN RECEIVED. Loans are considered contributions and are subject to any applicable limit.

Date Loaned	Lender's Name and Address	P R I	G E N	Amount of Loan	Annual Interest Rate	Repayment Schedule	Date Due
06/05/19	JAMI LUND PO Box 1734 Centralia, WA 98531		X	\$208.47	0%		
<p>If monetary loan, also include this amount on line 1c, C3 report. If in-kind loan, itemize in Part 1 of Schedule B.</p>							
Name and Address of Each Loan Endorser, Co-Signer		P R I	G E N	Amount Liable For (Same as Loan Amount)	Aggregate Total	Lender's Occupation and Name, City & State of Employer	
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