

**CASH RECEIPTS
 MONETARY
 CONTRIBUTIONS**

C3
 (1/02)

THIS SPACE FOR OFFICE USE
 100915200
 07-08-2019

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).....		
	c. Loans, notes, security agreements. Attach Schedule L		
	d. Miscellaneous receipts (interest, refunds, auctions, other). Attach explanation		
07/05/19	e. Small contributions \$25.00 or less not itemized and number of persons giving <u>2</u> (persons)	\$25.00	

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
07/05/19	JEREMY CORWIN 605 Byrd St Centralia, WA 98531	Corwin Health Physics Centralia, WA OccupationHEALTH PHYSICIST		X	\$125.00	\$125.00
07/05/19	LAURIE CORWIN 605 Byrd St Centralia, WA 98531	, OccupationHOMEMAKER		X	\$125.00	\$125.00
		Occupation				
		Occupation				
		Occupation				
		Occupation				
	<input type="checkbox"/> Check here if additional pages are attached	Sub-total			\$275.00	*See reverse for details.
		Amount from attached pages			\$0.00	

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.

\$275.00

4. Date of Deposit: **07/08/19**

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: **07-08-2019**