

**CASH RECEIPTS  
 MONETARY  
 CONTRIBUTIONS**

**C3**  
 (1/02)

THIS SPACE FOR OFFICE USE  
 100942438  
 10-29-2019

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 .....		
10/29/19	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
10/29/19	ELIZABETH ZEPEDA Swanson Dr Centralia, WA 98531			X	\$50.00	\$50.00
	Occupation					
10/29/19	VIRGINIA GASKELL PO Box Napavine, WA 98565			X	\$100.00	\$100.00
	Occupation					
10/29/19	DALE PULLIN 3417 Cooks Hill Rd Centralia, WA 98531			X	\$125.00	\$175.00
	Occupation	RETIREED				
10/29/19	KATHY PULLIN 3417 Cooks Hill Rd Centralia, WA 98531	N/A		X	\$125.00	\$175.00
	Occupation	RETIREED				
10/29/19	MIKE BARRETT 107 N Green St Centralia, WA 98531			X	\$50.00	\$75.00
	Occupation					
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			\$500.00	*See reverse for details.
		Amount from attached pages			\$50.00	

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.

\$550.00

4. Date of Deposit: **10/29/19**

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: **10-29-2019**

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

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

Deposit Date  
**10/29/19**

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*
10/29/19	LINDA BARRETT 107 N Green St Centralia, WA 98531	Occupation		X	\$50.00	\$75.00
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