

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3

(1/02)

THIS SPACE FOR OFFICE USE

100944202

11-06-2019

Candidate or Committee Name (Do not abbreviate. Use full name.)

SAMUEL W HUNT (SAM HUNT FOR STATE SENATE)

Mailing Address

PO BOX 2573

City

OLYMPIA, WA

Zip + 4

98507-2573

Office Sought (candidates)

STATE SENATOR

Election Date

2020

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 | | |
| | 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:* | P R I | G E N | Amount | Aggregate* Total |
|--|---|------------------------------------|-------------|-------------|----------|---------------------------|
| 11/05/19 | IRON WORKERS DISTRICT COUNCIL 110 Main Street Suite 100 Edmonds, WA 98020 | | X | | \$500.00 | \$500.00 |
| | Occupation | | | | | |
| 11/05/19 | JOE DOWNING 2806 33rd TRL NE Olympia, WA 98506 | Port of Olympia Olympia, WA | X | | \$200.00 | \$200.00 |
| | Occupation | PORT COMMISSIONER | | | | |
| 11/05/19 | WILLIAM LYNCH 8845 Adams Ln. NW Olympia, WA 98502 | , | X | | \$50.00 | \$150.00 |
| | Occupation | RETIRED | | | | |
| 11/05/19 | HARRIET GADBAW 1625 Sylvester ST SW Olympia, WA 98501 | | X | | \$50.00 | \$50.00 |
| | Occupation | | | | | |
| 11/05/19 | MARK STENSANGER 3616 Wishkah RD Aberdeen, WA 98520 | | X | | \$100.00 | \$100.00 |
| | Occupation | | | | | |
| | <input type="checkbox"/> Check here if additional pages are attached | Sub-total | | | \$900.00 | *See reverse for details. |
| | | Amount from attached pages | | | \$0.00 | |
| 3. TOTAL FUNDS RECEIVED AND DEPOSITED OR CREDITED TO ACCOUNT | | | | | \$900.00 | |
| Sum of parts 1 and 2 above. Enter this amount in line 1, Schedule A to C4. | | | | | | |

4. Date of Deposit

11/06/19

Treasurer's Daytime Telephone No.: **(206)999-6776**

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

Treasurer's Signature

STEVEN DREW J

Date

11-06-2019