

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3

(1/02)

THIS SPACE FOR OFFICE USE

100834740

06-05-2018

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

DAVID M PAUL (Friends of Dave Paul)

Mailing Address

PO Box 387

City Zip + 4 Office Sought (candidates)
Oak Harbor, WA 98277 STATE REPRESENTATIVE

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		
	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 N T	G E N E R A L	Amount	Aggregate* Total
05/11/18	MARTHA ANAMOSA PO Box 1070 Langley, WA 98260		X		\$100.00	\$100.00
	Occupation					
05/11/18	JANICE PICKARD 1075 Burchell Rd Coupeville, WA 98239		X		\$100.00	\$100.00
	Occupation					
05/11/18	DAVID JOHNSON 6695 Cliffordsville Rd Clinton, WA 98236		X		\$50.00	\$50.00
	Occupation					
05/11/18	JOHN BARNEY 4170 Beach Dr Freeland, WA 98249		X		\$100.00	\$100.00
	Occupation					
05/11/18	JACK TINGSTAD 508 Broadway Coupeville, WA 98239	Not Employed Coupeville, WA	X		\$200.00	\$200.00
	Occupation	RETIRED				
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			\$550.00	*See reverse for details.
		Amount from attached pages			\$120.00	
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.					\$670.00	

4. Date of Deposit

05/11/18

Treasurer's Daytime Telephone No.: (206) 682-7328

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

Treasurer's Signature

Date

Jay Petterson

06-05-2018

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

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Candidate or Committee Name (Do not abbreviate. Use full name.)
DAVID M PAUL (Friends of Dave Paul)

Deposit Date
05/11/18

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*
05/11/18	JEROME ROSEN PO Box 536 Coupeville, WA 98239	Self Employed Coupeville, WA Occupation THERAPIST	X		\$20.00	\$120.00
05/11/18	LINDA BAINBRIDGE 4459 Towhee Ln Greenbank, WA 982535	Occupation	X		\$100.00	\$100.00
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Page Total \$120.00