

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3

(1/02)

THIS SPACE FOR OFFICE USE

100835873

06-09-2018

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

DAVID HAYES (Committee to Elect Dave Hayes)

Mailing Address

26910 92nd Ave NW, Ste C5 PMB 183

City	Zip + 4	Office Sought (candidates)
Stanwood, WA	98292	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		
05/16/18	e. Small contributions \$25.00 or less not itemized and number of persons giving <u>1</u> (persons)	\$20.00	

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
05/16/18	JOE UHRICH 1064 St Moritz Ct Camano Island, WA 98282		X		\$50.00	\$50.00
	Occupation					
05/14/18	STEVE REDMOND 233 N Lake Grove Rd Camano Island, WA 98282		X		\$37.50	\$37.50
	Occupation					
05/14/18	DIANA REDMOND 233 N Lake Grove Rd Camano Island, WA 98282		X		\$37.50	\$37.50
	Occupation					
05/14/18	JAMES CAMPBELL 532 MUZZALL ST SW OAK HARBOR, WA 98277		X		\$50.00	\$50.00
	Occupation					
05/14/18	BETHANY CAMPBELL 532 MUZZALL ST SW OAK HARBOR, WA 98277		X		\$50.00	\$50.00
	Occupation					
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			\$245.00	*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.

\$345.00

4. Date of Deposit

05/16/18

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

Treasurer's Signature

Date

Elizabeth Hayes

06-09-2018

Treasurer's Daytime Telephone No.: **(425) 754-9875**

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

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Candidate or Committee Name (Do not abbreviate. Use full name.) DAVID HAYES (Committee to Elect Dave Hayes)	Deposit Date 05/16/18
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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*
05/14/18	MARK ALLEN 716 Sherman St Olympia, WA 98502	Occupation	X		\$50.00	\$50.00
05/14/18	NANCY ALLEN 716 Sherman St Olympia, WA 98502	Occupation	X		\$50.00	\$50.00
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Page Total \$100.00