PUBLIC DISCLOSURE COMMISSION
711 CAPITOL WAY RM 206
PO BOX 40908
OLYMPIA WA 98504-0908
(360) 753-1111
TOLL FREE 1-877-601-2828

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3
(1/02)

THIS SPACE FOR OFFICE USE
100836874

06-11-2018

Candidate or Committee Name (Do not abbreviate. Use full name.)
SCOTT MCMULLEN (Citizens to Elect Scott McMullen)

Mailing Address
2005 S. 15th St

City	Zip + 4	Office Sought (candidates)	Election Date
Mount Vernon, WA	**98274**	**STATE REPRESENTATIVE**	**2018**

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received		Amount	Total
	a. Anonymous		**$35.00**
	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:* Employer's Name, City and State	PRI	GEN	Amount	Aggregate* Total
05/25/18	**BOBBI KREBS-MCMULLEN** **17578 Valentine Rd** **Mount Vernono, WA 98273**	, Occupation **RETIRED**	X		**$250.00**	**$250.00**
		Occupation				
		Occupation				
		Occupation				
		Occupation				
	☐ Check here if additional pages are attached	**Sub-total**			**$250.00**	
		Amount from attached pages			**$0.00**	***See reverse for details.**

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. **$250.00**

4. Date of Deposit
05/31/18

Treasurer's Daytime Telephone No.: **(425)404-9357**

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

Treasurer's Signature: **Brennan C Smith**

Date: **06-11-2018**