



# CASH RECEIPTS MONETARY CONTRIBUTIONS

# C3

(1/02)

**THIS SPACE FOR OFFICE USE**

100839794

06-22-2018

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

CECILY HAZELRIGG-HERNANDEZ (Committee to Elect Cecily Hazelrigg)

Mailing Address

PO BOX 32594

City

Zip + 4

| Office Sought (candidates) |
|----------------------------|
| <b>APPEALS COURT JUDGE</b> |

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:<br>Employer's Name, City and State | P<br>R<br>I | G<br>E<br>N | Amount   | Aggregate*<br>Total |
|---------------|--|--|-------------|-------------|----------|---------------------|
| 06/19/18      | LEIF JOHNSON<br>17431 W BIG LAKE BLVD<br>MOUNT VERNON, WA 98274-8381 |  | X           |             | \$100.00 | \$100.00            |
|               |  | Occupation   |             |             |          |                     |
|               |  |  |             |             |          |                     |
|               |  | Occupation   |             |             |          |                     |
|               |  |  |             |             |          |                     |
|               |  | Occupation   |             |             |          |                     |
|               |  |  |             |             |          |                     |
|               |  | Occupation   |             |             |          |                     |
|               |  |  |             |             |          |                     |
|               |  | Occupation   |             |             |          |                     |
|               |  |  |             |             |          |                     |
|               |  | Sub-total  |             |             | \$100.00 |                     |
|               |  | Amount from attached pages   |             |             | \$0.00   |                     |
|               | <input type="checkbox"/> Check here if additional pages are attached |  |             |             |          | *See reverse        |

## 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.

4. Date of Deposit

06/21/18

Treasurer's Daytime Telephone No.: (206) 335-8815

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

Treasurer's Signature

Date \_\_\_\_\_

ANDY LO

06-22-2018