

**CASH RECEIPTS
 MONETARY
 CONTRIBUTIONS**

C3
 (1/02)

THIS SPACE FOR OFFICE USE
 100841312
 07-02-2018

Candidate or Committee Name (Do not abbreviate. Use full name.)
NORMA SMITH (Friends of Norma Smith)

Mailing Address
PO Box 270

City: **Clinton, WA** Zip + 4: **98236** Office Sought (candidates): **STATE REPRESENTATIVE** Election Date: **2018**

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received		Amount	Total
	a. Anonymous		\$130.00
	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	P R I	G E N	Amount	Aggregate* Total
06/27/18	CREIGHTON HOLT 1442 N Veaux Loop Norfolk, VA 23509	ADS, Inc. Virginia Beach, VA OccupationBUSINESS DEVELOPMENT MANAGER	X		\$250.00	\$250.00
06/27/18	SANDRA HULST 10486 Sterling Rd Sedro Woolley, WA 98284	Occupation	X		\$50.00	\$50.00
06/27/18	CHRIS CANLIS 2576 Aurora Ave N Seattle, WA 98109	Self Employed Seattle, WA OccupationRESTAURANT OWNER	X		\$800.00	\$800.00
06/27/18	KEVIN DUFFY 7204 123rd Ave SE Newcastle, WA 98056	Occupation	X		\$5.00	\$12.50
06/27/18	GERALDINE DUFFY 7204 123rd Ave SE Newcastle, WA 98056	Occupation	X		\$5.00	\$12.50
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total Amount from attached pages			\$1,110.00 \$450.00	*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.					\$1,560.00	

4. Date of Deposit: **06/28/18**

Treasurer's Daytime Telephone No.: **(253)988-2455**

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

Treasurer's Signature: **Tom Perry** Date: **07-02-2018**

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.)
NORMA SMITH (Friends of Norma Smith)

Deposit Date
06/28/18

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		Amount	Aggregate Total*
			<input checked="" type="checkbox"/>	<input type="checkbox"/>		
06/27/18	JAMES CRAFT 6386 Bay Rd Freeland, WA 98249	Occupation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	\$50.00	\$50.00
06/27/18	ANITA CRAFT 6386 Bay Rd Freeland, WA 98249	Occupation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	\$50.00	\$50.00
06/27/18	DENNIS JOHNSON 6466 Humphrey Rd Clinton, WA 98236	Occupation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	\$50.00	\$50.00
06/27/18	GLORIA JOHNSON 6466 Humphrey Rd Clinton, WA 98236	Occupation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	\$50.00	\$50.00
06/27/18	REBECCA BOGARD 2607 Western Ave Apt 701 Seattle, WA 98121	Bogard & Johnson LLC Olympia, WA Occupation ATTORNEY/LOBBYIST	<input checked="" type="checkbox"/>	<input type="checkbox"/>	\$250.00	\$250.00
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		