

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3

(1/02)

THIS SPACE FOR OFFICE USE

100846576

07-23-2018

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		
	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
07/16/18	ENTERTAINMENT SOFTWARE ASSN 601 Massachusetts Ave NW, Washington, DC 20001		X		\$250.00	\$250.00
	Occupation					
07/16/18	CALPORTLAND 2025 E FINANCIAL WAY GLENORA, CA 91741		X		\$300.00	\$300.00
	Occupation					
07/16/18	WA BEER & WINE DISTRIBUTORS PO BOX 1631 TACOMA, WA 98401		X		\$500.00	\$500.00
	Occupation					
07/16/18	WA AFFORDABLE HOUSING COUNCIL PO BOX 1909 OLYMPIA, WA 98507		X		\$1,000.00	\$1,000.00
	Occupation					
07/16/18	WA AFFORDABLE HOUSING COUNCIL PO BOX 1909 OLYMPIA, WA 98507			X	\$1,000.00	\$1,000.00
	Occupation					
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			\$3,050.00	*See reverse for details.
		Amount from attached pages			\$1,750.00	
					\$4,800.00	

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.

4. Date of Deposit

07/20/18

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

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

Treasurer's Signature

Date

Elizabeth Hayes

07-23-2018

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Page 2

Candidate or Committee Name (Do not abbreviate. Use full name.)
DAVID HAYES (Committee to Elect Dave Hayes)

Deposit Date
07/20/18

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*
07/16/18	ALTRIA CLIENT SERVICES, INC 6601 W BROAD ST RICHMOND, VA 23230	Occupation	X		\$1,000.00	\$1,000.00
07/16/18	RAI SERVICES CO PO BOX 464 WINSTON-SALEM, NC 27102	Occupation	X		\$250.00	\$500.00
07/18/18	SABEY CORP 12201 TUKWILA INTERNATIONAL SEATTLE, WA 98168	Occupation	X		\$500.00	\$500.00
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Page Total \$1,750.00