

# CASH RECEIPTS MONETARY CONTRIBUTIONS

## C3

(1/02)

THIS SPACE FOR OFFICE USE

100854508

08-27-2018

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

**TOM SEGUINE (Committee to Elect Tom SeGuine)**

Mailing Address

**P. O. Box 2734**

City

**Mount Vernon, WA**

Zip + 4

**98273**

Office Sought (candidates)

**APPEALS COURT JUDGE**

Election Date

**2018**

### 1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received		Amount	Total
	a. Anonymous .....		
08/27/18	b. Candidate's personal funds deposited in the bank (include candidate loans in 1c).....	\$4,000.00	\$17,708.10
08/27/18	c. Loans, notes, security agreements. Attach Schedule L .....	\$6,000.00	
	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:*	P R I	G E N	Amount	Aggregate* Total
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Sub-total			\$10,000.00	*See reverse for details.
	<input type="checkbox"/> Check here if additional pages are attached	Amount from attached pages			\$0.00	

### 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.

**\$10,000.00**

4. Date of Deposit

**08/27/18**

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

Treasurer's Signature

Date

**Richard A Rekdal**

**08-27-2018**

Treasurer's Daytime Telephone No.: **(425) 658-1400**

LOANS

Candidate or Committee Name

Report Date

~~TOM SEGUINE (Committee to Elect Tom SeGuine)~~

1. MONETARY OR IN-KIND LOAN RECEIVED. Loans are considered contributions and are subject to any applicable limit.

Date Loaned 08/27/18	Lender's Name and Address  TOM SEGUINE P. O. Box 2734 Mount Vernon, WA 98273	<div>P R I</div> <div>G E N</div>	Amount of Loan  \$6,000.00	Annual Interest Rate  0%	Repayment Schedule	Date Due
If monetary loan, also include this amount on line 1c, C3 report. If in-kind loan, itemize in Part 1 of Schedule B.		→			Lender's Occupation and Name, City & State of Employer	
Name and Address of Each Loan Endorser, Co-Signer		<div>P R I</div> <div>G E N</div>	Amount Liable For (Same as Loan Amount)	Aggregate Total	Endorser's Occupation and Name, City, & State of Employer	

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