

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3

(1/02)

THIS SPACE FOR OFFICE USE

100861579

09-30-2018

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)
Mount Vernon, WA	98274	STATE REPRESENTATIVE

Election Date
2018

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received		Amount	Total
	a. Anonymous		\$75.00
	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:*	P R I	G E N	Amount	Aggregate* Total
10/01/18	CHARLES BENSON 14373 Laconner Whitney Rd Mount Vernon, WA 98273			X	\$50.00	\$50.00
	Occupation					
10/01/18	LABORERS LOCAL 292 2810 Lombard Ave Suite 100 Everett, WA 98201			X	\$292.00	\$292.00
	Occupation					
10/01/18	ROBERT GRAY PO Box Freeland, WA 98249			X	\$100.00	\$100.00
	Occupation					
10/01/18	JANE JAEHNING 1511 West Beach Rd Oak Harbor, WA 98277			X	\$200.00	\$200.00
	Occupation RETIRED					
10/01/18	NORMAN TAYLOR 4218 Montgomery Pl Mount Vernon, WA 98274			X	\$100.00	\$100.00
	Occupation					
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			\$742.00	*See reverse for details.
		Amount from attached pages			\$900.00	

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.

\$1,642.00

4. Date of Deposit

10/01/18

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

Treasurer's Signature

Date

Brennan C Smith

09-30-2018

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

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Page 2

Candidate or Committee Name (Do not abbreviate. Use full name.) SCOTT MCMULLEN (Citizens to Elect Scott McMullen)	Deposit Date 10/01/18
---	---------------------------------

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*
10/01/18	LEIGH POWER 210 Kineth Point PL Coupeville, WA 98239	, Occupation RETIRED	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$450.00	\$950.00
10/01/18	LAVERNE POWER 210 Kineth Point PL Coupeville, WA 98239	, Occupation RETIRED	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$450.00	\$950.00
		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"/>		
		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"/>		

Page Total \$900.00