

# CASH RECEIPTS MONETARY CONTRIBUTIONS

## C3

(1/02)

THIS SPACE FOR OFFICE USE

100864610

10-15-2018

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: Employer's Name, City and State	P R I	G E N	Amount	Aggregate* Total
10/10/18	NARAL PRO-CHOICE WASHINGTON 811 1st Ave Suite 675 Seattle, WA 98104			X	\$250.00	\$251.85
	Occupation					
	Occupation					
	Occupation					
	Occupation					
	Occupation					
	<input type="checkbox"/> Check here if additional pages are attached	Sub-total			\$250.00	*See reverse for details.
		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.

\$250.00

4. Date of Deposit

10/10/18

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

Treasurer's Signature

Date

**Brennan C Smith**

10-15-2018

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