

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3

(1/02)

THIS SPACE FOR OFFICE USE

100884657

02-11-2019

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

NORMA SMITH (Friends of Norma Smith)

Mailing Address

PO Box 270

City	Zip + 4	Office Sought (candidates)
Clinton, WA	98236	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		
01/31/19	d. Miscellaneous receipts (interest, refunds, auctions, other). Attach explanation	\$0.01	
	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			\$0.01	*See reverse for details.
	<input type="checkbox"/> Check here if additional pages are attached	Amount from attached pages			\$0.00	
					\$0.01	

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

01/31/19

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

Date

Tom Perry

02-11-2019

Statement of Miscellaneous Receipts Attachment to Form C3

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Candidate or Committee Name
NORMA SMITH (Friends of Norma Smith)

Deposit Date

Date Received	Payee's Name, Address, City, State, Zip	Description	Amount
01/31/19	Bank Accounts ,	Bank Interest	\$0.01

Subtotal this page \$0.01