

# CASH RECEIPTS MONETARY CONTRIBUTIONS

## C3

(1/02)

THIS SPACE FOR OFFICE USE

110061177

11-10-2021

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

**JAMIE D PEDERSEN (PEOPLE FOR PEDERSEN)**

Mailing Address

**815 1ST AVE #111**

City

**SEATTLE, WA**

Zip + 4

**98104**

Office Sought (candidates)

**STATE SENATOR**

Election Date

**2022**

### 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:*	P R I	G E N	Amount	Aggregate* Total
11/09/21	MICHAEL THEISEN 444 36TH AVE SEATTLE, WA 98122	NORTHWEST ANESTHESIOLOGISTS SEATTLE, WA OccupationPHYSICIAN	X		\$200.00	\$200.00
11/09/21	BRIAN KNOWLES 11818 97TH LN NE APT C512 KIRKLAND, WA 98034	BAILEY-BOUSHAY SEATTLE, WA OccupationEXECUTIVE DIRECTOR	X		\$250.00	\$250.00
		Occupation				
		Occupation				
		Occupation				
		Sub-total			\$450.00	*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.

**\$450.00**

4. Date of Deposit

**11/09/21**

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

Treasurer's Signature

Date

**JEFF SABADO**

**11-10-2021**

Treasurer's Daytime Telephone No.: **(206) 757-8578**