

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3

THIS SPACE FOR OFFICE USE

110061323

11-10-2021

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

(Elect Jesse Salomon)

Mailing Address

PO Box 77295

City Zip + 4

Seattle, WA 98177

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 b	ank (include o	candidate loans in 1c)			
	c. Loans, notes, security agreements. Attach Sc					
	d. Miscellaneous receipts (interest, refunds, auct					
11/09/21	e. Small contributions \$25.00 or less not itemized and number of persons giving (persons)					
2. CONTRI Date Received	BUTIONS OVER \$25.00 Contributor's Name, Address, City, State, Zip		tions of more than \$100:* er's Name, City and State	P G R E I N	Amount	Aggregate* Total
11/09/21	MARK HILLMAN 12718 4th Ave NW Seattle, WA 98177	 	Housing Authority		\$132.00	\$232.00
		Occupation	CONSTRUCTION PROJ	ECT M	ANAGER	
11/09/21	MARK HILLMAN 12718 4th Ave NW Seattle, WA 98177	Seattle Seattle	Housing Authority	x	\$100.00	\$232.00
		Occupation	OccupationCONSTRUCTION PROJECT MA			
11/09/21	ISADORE GORASHT 2338 McGilvra Blvd E Seattle, WA 98112	Not Employed Seattle, WA			\$250.00	\$250.00
		Occupation	NOT EMPLOYED			
11/09/21	JACK MALEK 20224 23rd Place NW Shoreline, WA 98177	Winderm Shoreli	ne, WA	X	\$1,000.00	\$1,000.00
		Occupation	REALTOR	x		
11/09/21	JACK MALEK 20224 23rd Place NW Shoreline, WA 98177	Windermere Shoreline, WA Occupation REALTOR			\$1,000.00	\$1,000.00
		Sub-total		\$2,507.00		
	Check here if additional pages are attached	Amount from attached pages			4	*See reverse
	FUNDS RECEIVED AND DEPOSITED OR CREDITE arts 1 and 2 above. Enter this amount in line 1, Scheo		JNT		\$2,607.00	for details.
4. Date of I	· · · · · · · · · · · · · · · · · · ·		I certify that this report is to	rue and c	omplete to the best of m	y knowledge
		Ţ	Treasurer's Signature			Date

11/10/21

Treasurer's Daytime Telephone No.: (206)678-7328

Josie Olsen 11-10-2021

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

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

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Deposit Date

(Elect Jesse	11/10	11/10/21								
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*				
11/09/21	VICKI LEGMAN 5015 Magnolia St Port Townsend, WA 98368	Occupation	х		\$100.00	\$100.00				
		Convention								
		Occupation								
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