PUBLIC	DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 TOLL FREE 1-877-601-2828	CASH RECI MONETARY CONTRIBU	/	<b>C3</b>	THIS SPACE FOR OFFICE USE 110062924 12-01-2021	
	or Committee Name (Do not abbreviate.				-	
	TOMIKO SANTOS (Sharon To	miko Santos 202	21-2022)		_	
Mailing Add	dress Ainier Ave S #502					
		Zip + 4	Office Sought (cano	Office Sought (candidates) STATE REPRESENTATIVE		e
Seattle, WA		98118				2022
1. MONETA	ARY CONTRIBUTIONS DEPOSITED IN	ACCOUNT				
Date Received					Amount	Total
	a. Anonymous					
	b. Candidate's personal funds depos	ited in the bank (include c	andidate loans in 1c)			
			,			
1 / 2 0 / 0 1	c. Loans, notes, security agreements. Attach Schedule L					
1/30/21	d. Miscellaneous receipts (interest, refunds, auctions, other). Attach explanation				\$0.14	
	e. Small contributions \$25.00 or less BUTIONS OVER \$25.00	not itemized and number	of persons giving (	persons)		
Date Received	Contributor's Name, Address, City,		ions of more than \$100: <sup>*</sup> r's Name, City and State	PG RE IN	Amount	Aggregate <sup>*</sup> Total
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation	Occupation			
	Check here if additional	Sub-total Amount from			\$0.14	
	pages are attached			ed pages	\$0.00	*See reverse
	FUNDS RECEIVED AND DEPOSITED O Ints 1 and 2 above. Enter this amount in I		INT		\$0.14	for details.
4. Date of D			I certify that this report is	true and comple	te to the best of my	knowledge
11/	30/21		Treasurer's Signature		[	Date
	Daytime Telephone No.: (206)601	-2448	Jeanne Legault		1	2-01-2021

## Statement of Miscellaneous Receipts Attachment to Form C3

## **Candidate or Committee Name** SHARON TOMIKO SANTOS (Sharon Tomiko Santos 2021-2022)

Date Received	Payee's Name, Address, City, State, Zip	Description	Amount
11/30/21	Bank Accounts	Bank Interest	\$0.14
	1		

Deposit Date

\$0.14 Subtotal this page \_