

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3

(1/02)

THIS SPACE FOR OFFICE USE

110066394

12-13-2021

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

STEVE HOBBS (Committee to Elect Steve Hobbs)

Mailing Address

3309 114th Dr NE

City

Lake Stevens, WA

Zip + 4

98258

Office Sought (candidates)

SECRETARY OF STATE

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: Employer's Name, City and State	P R I N T	G E N	Amount	Aggregate* Total
12/07/21	JUSTICE FOR ALL PAC 1809 SEVENTH AVE SUITE 1500 SEATTLE, WA 98101		X		\$1,000.00	\$1,500.00
	Occupation					
12/08/21	WA ASSN OF VEHICLE SUBAGENTS PO BOX 625 BOTHELL, WA 98041		X		\$1,000.00	\$1,000.00
	Occupation					
12/08/21	ALLSTATE INSURANCE 2775 SANDERS ROAD NORTHBROOK, IL 60062		X		\$1,000.00	\$1,000.00
	Occupation					
12/08/21	INLANDBOATMENS UNION 1711 W. NICKERSON ST. SUITE D SEATTLE, WA 98119		X		\$1,000.00	\$1,000.00
	Occupation					
12/08/21	CLC AUTO LICENSING 9611 STATE AVE STE F MARYSVILLE, WA 98270		X		\$500.00	\$500.00
	Occupation					
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			\$4,500.00	*See reverse for details.
		Amount from attached pages			\$800.00	
					\$5,300.00	

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.

4. Date of Deposit

12/09/21

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

Treasurer's Signature

Date

Andy Lo

12-13-2021

Treasurer's Daytime Telephone No.: **(206) 335-8815**

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

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Candidate or Committee Name (Do not abbreviate. Use full name.) STEVE HOBBS (Committee to Elect Steve Hobbs)	Deposit Date 12/09/21
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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*
12/08/21	SHANE COX PO BOX 3042 YAKIMA, WA 98903	CASCADE LICENSE AGENCY UNION GAP, WA Occupation AGENT	<input checked="" type="checkbox"/>	<input type="checkbox"/>	\$500.00	\$500.00
12/08/21	ANITA MORENO MARCELO 17403 139TH AVE NE WOODINVILLE, WA 98072	WOODINVILLE LICENSE AGENCY WOODINVILLE, WA Occupation OWNER	<input checked="" type="checkbox"/>	<input type="checkbox"/>	\$300.00	\$300.00
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
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		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		

Page Total \$800.00