

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3

(1/02)

THIS SPACE FOR OFFICE USE

110076835

03-10-2022

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

(Friends for Julie Anderson)

Mailing Address

3801 N. 27th St., Unit 7111

City

Tacoma, WA

Zip + 4

98417

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:*	P R I	G E N	Amount	Aggregate* Total
02/24/22	LISA WALLACE 4706 W. LINCOLN AVE YAKIMA, WA 98908		X		\$100.00	\$100.00
	Occupation					
02/24/22	DAVID BOYD 8826 LAKE STEILACOOM POINT LAKEWOOD, WA 98498		X		\$100.00	\$200.00
	Occupation	RETIREED				
02/24/22	DAVID AMMONS 2920 CAPITOL BLVD SE OLYMPIA, WA 98501		X		\$50.00	\$50.00
	Occupation					
02/24/22	FRED SCHUNEMAN 3409 N 29TH ST. TACOMA, WA 98407		X		\$100.00	\$100.00
	Occupation					
02/24/22	KIM MARTIN 518 HOWARD AVE NE OLYMPIA, WA 98506		X		\$100.00	\$100.00
	Occupation					
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			\$450.00	*See reverse for details.
		Amount from attached pages			\$100.00	

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.

\$550.00

4. Date of Deposit

02/24/22

Treasurer's Daytime Telephone No.: (253)220-5590

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

Treasurer's Signature

Date

Jason Michaud

03-10-2022

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

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Candidate or Committee Name (Do not abbreviate. Use full name.)
(Friends for Julie Anderson)

Deposit Date
02/24/22

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*
02/24/22	LIZ COLLINS 1899 N HAWTHORNE TACOMA, WA 98406	Occupation	X		\$100.00	\$100.00
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Page Total \$100.00