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 RECEIPTS MONETARY CONTRIBUTIONS

C3
(1/02)

THIS SPACE FOR OFFICE USE
100438596
11-21-2011

Candidate or Committee Name (Do not abbreviate. Use full name.)
JAN E ANGEL (Committee to Elect Jan Angel)

Mailing Address
5184 SE GRANADA PL

City	Zip + 4	Office Sought (candidates)	Election Date
PORT ORCHARD, WA	98367	STATE REPRESENTATIVE	2012

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	PRI	GEN	Amount	Aggregate* Total
11/14/11	PEMCO MUTUAL INS CO 325 EASTLAKE AVE EAST SEATTLE, WA 98160	Occupation	X		250.00	250.00
11/14/11	WAL-MART STORES INC 702 SW 8TH ST BENTONVILLE, AR 72716	Occupation	X		800.00	800.00
11/15/11	WASHINGTON DENTAL SERVICE P O BOX 75688 SEATTLE, WA 98175	Occupation	X		800.00	800.00
11/15/11	GIG HARBOR REPUBLICAN WOMEN P O BOX 2683 GIG HARBOR, WA 98335	Occupation	X		800.00	800.00
11/15/11	ANHEUSER BUSCH 15800 ROSCOE BLVD VAN NUYS, CA 91406	Occupation	X		800.00	800.00
	☒ Check here if additional pages are attached	Sub-total			3,450.00	
		Amount from attached pages			50.00	*See reverse for details.

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. 3,500.00

4. Date of Deposit
11/17/11

Treasurer's Daytime Telephone No.: (360) 440-2094

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

Treasurer's Signature	Date
Lynn K Williams	11-21-2011

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.)
JAN E ANGEL (Committee to Elect Jan Angel)

Deposit Date
11/17/11

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	PRI	GEN	Amount	Aggregate Total*
11/16/11	LORRAINE S JANKORD 7115 KEY PENINSULA HWY S LONGBRANCH, WA 98351	Occupation	X		25.00	25.00
11/16/11	MARK E JANKORD 7115 KEY PENINSULA HWY S LONGBRANCH, WA 98351	Occupation	X		25.00	25.00
		Occupation				
		Occupation				
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Page Total 50.00