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
100500087
AMENDS
100474657
11-01-2012

Candidate or Committee Name (Do not abbreviate. Use full name.)
ROBERT A HASWGAWA MR (Bob Hasegawa for State Senate)

Mailing Address
3121 16th Ave. So.

City	Zip + 4	Office Sought (candidates)	Election Date
Seattle, WA	98144	STATE SENATOR	2012

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received		Amount	Total
	a. Anonymous		137.00
	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
06/25/12	MARTHA KOESTER 10015 2nd Ave S Seattle, WA 98168	Occupation	X		20.00	70.00
06/25/12	WARREN YEE 5912 23rd Ave S Seattle, WA 98108	Occupation	X		50.00	50.00
06/25/12	STEVEN WALKER PO Box 3654 Seattle, WA 98124	Occupation	X		50.00	50.00
06/25/12	L WENDLAND 201 Union Ave SE Renton, WA 98059	, Occupation RETIRED	X		40.00	140.00
06/25/12	HOBE WILLIAMS 19080 NE Woodinville Duvall Rd Woodinville, WA 98077	Occupation	X		20.00	20.00
	☒ Check here if additional pages are attached	Sub-total			180.00	
		Amount from attached pages			1,320.00	*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. 1,500.00

4. Date of Deposit
06/25/12

Treasurer's Daytime Telephone No.: (206)245-7741

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

Treasurer's Signature: Frank R Kiuchi

Date: 11-01-2012

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.)
ROBERT A HASWGAWA MR (Bob Hasegawa for State Senate)

Deposit Date
06/25/12

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*
06/25/12	LINDA HARMATTA 17030 106th Ave SW Renton, WA 98055	Washington State Hospital SEATTLE, WA Occupation ACCOUNTANT	X		200.00	200.00
06/25/12	MITZI VERLINDE 5237 57th Ave S Seattle, WA 98118	Occupation	X		100.00	100.00
06/25/12	GERALDINE VENTURA 15185 Sunwood Blvd Tukwila, WA 98188	Occupation	X		20.00	60.00
06/25/12	CAMPAIGN FOR SELF RELIANCE BY 1110 Capitol Way S. Suite 404 Olympia, WA 98501	Occupation	X		900.00	900.00
06/25/12	UPTHEPAC PO BOX 13543 DES MOINES, WA 98198	Occupation	X		100.00	100.00
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				

Page Total 1,320.00