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
100856271
09-05-2018

Candidate or Committee Name (Do not abbreviate. Use full name.)
TIMOTHY M SHELDON (Committee to Elect Tim Sheldon)

Mailing Address
P.O. Box 399

City	Zip + 4	Office Sought (candidates)	Election Date
Hoodsport, WA	**98548**	**STATE SENATOR**	**2018**

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
08/30/18	MIKE SWANSON 1058 State Rt 4 Naselle, WA 98638	Occupation		X	$100.00	$100.00
08/30/18	ROBERT JUNGERS PO Box 183 cathlamet, WA 98612	wakiacum county PUD Wakiacum , WA Occupation COMMISSIONER		X	$1,000.00	$1,000.00
08/30/18	ASSOCIATED GENERAL CONTRACTORS 1200 WESTLAKE AVE. N SUITE 301 SEATTLE, WA 98109	Occupation		X	$1,000.00	$1,000.00
08/30/18	WA ASSOC. OF VEHICLE SUBAGENTS BOX 625 BOTHELL, WA 98041	Occupation		X	$500.00	$500.00
08/30/18	CASCADE LICENSE AGENCY, INC. 2504 Main St. PO BGox 3042 Union Gap, WA 98903	Occupation		X	$150.00	$150.00
	☒ Check here if additional pages are attached	Sub-total Amount from attached pages			$2,750.00 $3,150.00	*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. **$5,900.00**

4. Date of Deposit
08/31/18

Treasurer's Daytime Telephone No.: **(360)490-0351**

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

Treasurer's Signature: **Timothy M Sheldon** Date: **09-05-2018**

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.)
TIMOTHY M SHELDON (Committee to Elect Tim Sheldon)

Deposit Date
08/31/18

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*
08/30/18	PORT ORCHARD LICENSE AGENY 1703 Sedgwick Rd Port Orchard, WA 98366	Occupation		X	$200.00	$200.00
08/30/18	PACKAGES EXPRESS POSTAL CENTER, 2103 HARRISON AVE. NW OLYMPIA, WA 98502	Occupation		X	$200.00	$200.00
08/30/18	DONALD ARSENAULT PO Box 1492 Tacoma, WA 98401	Realtor Tacoma, WA Occupation REALTOR		X	$250.00	$250.00
08/30/18	MANUFACTURED HOUSING 509 E. 12TH, SU 7 OLYMPIA, WA 98501	Occupation		X	$500.00	$500.00
08/30/18	WROA 3301 Rucker Ave Everett, WA 98201	Occupation		X	$1,000.00	$1,000.00
08/30/18	BOMA OF WASHINGTON 1420 5TH AVE., STE 1250 SEATTLE, WA 98101	Occupation		X	$1,000.00	$1,000.00
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				

Page Total $3,150.00