

**CASH RECEIPTS
 MONETARY
 CONTRIBUTIONS**

C3
 (1/02)

THIS SPACE FOR OFFICE USE
 100856614
 09-07-2018

Candidate or Committee Name (Do not abbreviate. Use full name.)
SEIU HEALTHCARE 1199 NW PAC

Mailing Address
15 S GRADY WAY SUITE 200

City RENTON, WA	Zip + 4 98057	Office Sought (candidates)	Election Date 2018
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1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received	Description	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
08/29/18	SEIU HEALTHCARE 1199 NW 15 SOUTH GRADY WAY #200 RENTON, WA 98057				\$250,000.00	\$707,085.54
	Occupation					
	Occupation					
	Occupation					
	Occupation					
	Occupation					
	<input type="checkbox"/> Check here if additional pages are attached	Sub-total			\$250,000.00	*See reverse for details.
		Amount from attached pages			\$0.00	

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.

\$250,000.00

4. Date of Deposit 08/29/18	I certify that this report is true and complete to the best of my knowledge	
Treasurer's Daytime Telephone No.: (425)917-1199	Treasurer's Signature ROBIN WYSS	Date 09-07-2018