

# RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

100123231

Page 1

Candidate or Committee Name (Do not abbreviate. Use full name.) MCGLASHAN KEITH A	Deposit Date 04/06/2005
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## 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*
04/06/2005	SCOTT B. DIANE 18502 - 6TH AVE. SHORELINE WA 98177			X	\$ 100.00	\$ 100.00
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Page Total \$ 100.00