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
100366648
07-13-2010

Candidate or Committee Name (Do not abbreviate. Use full name.)
TIMM ORMSBY (People For Timm Ormsby)

Mailing Address
PO Box 2177

City	Zip + 4	Office Sought (candidates)	Election Date
Spokane, WA	99210-2177	STATE REPRESENTATIVE	2010

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
07/12/10	WASHINGTON EDUCATION PO Box 9100 Federal Way, WA 98063-9100	Occupation	X		800.00	800.00
07/12/10	WASHINGTON SCHOOL PRINCIPALS PO Box 553 Olympia, WA 98507	Occupation	X		300.00	300.00
07/12/10	WASHINGTON ASSOCIATION OF PO Box 719 Olympia, WA 98507	Occupation	X		400.00	400.00
07/12/10	WA PUBLIC EMPLOYEES PO Box 7159 Olympia, WA 98507	Occupation	X		400.00	400.00
07/12/10	WASHINGTON BEVERAGE 2210 Black Lake Blvd. SW Olympia, WA 98512	Occupation	X		800.00	800.00
	☒ Check here if additional pages are attached	Sub-total			2,700.00	
		Amount from attached pages			200.00	

*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. 2,900.00

4. Date of Deposit
07/13/10

Treasurer's Daytime Telephone No.: (509)532-0156

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

Treasurer's Signature: James Headley
Date: 07-13-2010

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.)
TIMM ORMSBY (People For Timm Ormsby)

Deposit Date
07/13/10

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*
07/12/10	MCBRIDE PUBLIC AFFAIRS LLC 3300 Oldstead Ct SE Olympia, WA 98501-3817	Occupation	X		200.00	200.00
		Occupation				
		Occupation				
		Occupation				
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		Occupation				

Page Total 200.00