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
100707362
07-11-2016

Candidate or Committee Name (Do not abbreviate. Use full name.)
Christine Kilduff (Friends of Christine Kilduff)

Mailing Address
PO Box 65431

City	Zip + 4	Office Sought (candidates)	Election Date
University Place, WA	98464	STATE REPRESENTATIVE	2016

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		
07/06/16	e. Small contributions $25.00 or less not itemized and number of persons giving 2 (persons)	50.00	

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
07/07/16	Julia A. Brown 4627 Prewstwick Ln SE Olympia, WA 98513	, Occupation	X		50.00	50.00
07/07/16	Mark O. Brown 4627 Prewstwick Ln SE Olympia, WA 98513	, Occupation	X		50.00	50.00
07/07/16	National Women's Political PO Box 94442 Seattle, WA 98124	, Occupation	X		250.00	250.00
07/05/16	Plumbers & Steamfitters Local 1328 Road 28 Pasco, WA 99301	, Occupation		X	1,000.00	1,000.00
07/05/16	Plumbers & Steamfitters Local 1328 Road 28 Pasco, WA 99301	, Occupation	X		1,000.00	1,000.00
	☒ Check here if additional pages are attached	Sub-total Amount from attached pages			2,400.00 300.00	*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. 2,700.00

4. Date of Deposit
07/07/16

Treasurer's Daytime Telephone No.: (253)653-1427

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

Treasurer's Signature: Melissa Pfeifer

Date: 07-11-2016

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.)
Christine Kilduff (Friends of Christine Kilduff)

Deposit Date
07/07/16

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*
07/07/16	WA Assoc. of Vehicle Subagents PO Box 625 Bothell, WA 98041	, Occupation	X		300.00	300.00
		Occupation				
		Occupation				
		Occupation				
		Occupation				
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Page Total 300.00