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
100713251
08-01-2016

Candidate or Committee Name (Do not abbreviate. Use full name.)
MICHAEL PELLICCIOTTI (People for Pellicciotti)

Mailing Address
PO Box 26236

City	Zip + 4	Office Sought (candidates)	Election Date
Federal Way, WA	98093	STATE REPRESENTATIVE	2016

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received		Amount	Total
	a. Anonymous		100.00
	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
07/30/16	WA MACHINISTS COUNCIL MNPL 9125 15TH PL S SEATTLE, WA 98108	Occupation	X		1,000.00	1,000.00
07/30/16	MARY MORRISSEY 2648 E 44TH ST TULSA, OK 74105	Occupation	X		50.00	50.00
08/01/16	CHRISTIE HEDMAN 2100 THIRD AVE #1205 SEATTLE, WA 98121	Occupation	X		100.00	100.00
08/01/16	WA OCCUPATIONAL THERAPY PAC 2738 SW 314TH ST FEDERAL WAY, WA 98023	Occupation	X		150.00	150.00
08/01/16	ROGER LONE 1241 SW 296TH ST FEDERAL WAY, WA 98023	Occupation	X		12.50	12.50
	☒ Check here if additional pages are attached	Sub-total			1,312.50	
		Amount from attached pages			12.50	*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. 1,325.00

4. Date of Deposit
08/01/16

Treasurer's Daytime Telephone No.: (206)218-3108

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

Treasurer's Signature	Date
Abbot Taylor	08-01-2016

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.)
MICHAEL PELLICCIOTTI (People for Pellicciotti)

Deposit Date
08/01/16

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*
08/01/16	TRACY LONE 1241 SW 296TH ST FEDERAL WAY, WA 98023	Occupation	X		12.50	12.50
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				

Page Total 12.50