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
100713360
08-01-2016

Candidate or Committee Name (Do not abbreviate. Use full name.)
STEPHEN P THARINGER (Tharinger for State Representative)

Mailing Address
PO Box 834

City	Zip + 4	Office Sought (candidates)	Election Date
Sequim, WA	98382	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		
	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
08/01/16	WA STATE PODIATRIC MEDICAL 2150 N 107th St, Se 205 SEATTLE, WA 98133	Occupation	X		200.00	200.00
08/01/16	OLYMPIC RESOURCE MANAGEMENT 19950 7TH AVE NE, SUITE 200 POULSBO, WA 98370	Occupation	X		200.00	200.00
08/01/16	WASHINGTON TEAMSTERS 14675 INTERURBAN AVE S, SUITE TUKWILA, WA 98168	Occupation	X		500.00	500.00
08/01/16	SOUTHERN GLAZER'S WINE AND 2400 SW 145th Ave, Ste 300 Miramar, FL 33027	Occupation	X		1,000.00	1,000.00
08/01/16	SOUTHERN GLAZER'S WINE AND 2400 SW 145th Ave, Ste 300 Miramar, FL 33027	Occupation		X	1,000.00	1,000.00
	☒ Check here if additional pages are attached	Sub-total			2,900.00	
		Amount from attached pages			1,000.00	*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. 3,900.00

4. Date of Deposit
08/01/16

Treasurer's Daytime Telephone No.: (360)683-6480

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

Treasurer's Signature	Date
Yvonne Yokota	08-01-2016

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.)
STEPHEN P THARINGER (Tharinger for State Representative)

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	WA STATE AUTO DEALERS PAC 621 SW Grady Way Renton, WA 98057	Occupation	X		50.00	1,000.00
08/01/16	WA STATE AUTO DEALERS PAC 621 SW Grady Way Renton, WA 98057	Occupation		X	950.00	950.00
		Occupation				
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Page Total 1,000.00