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
100713557
08-01-2016

Candidate or Committee Name (Do not abbreviate. Use full name.)
JOHNNY R LOVICK (Committee for John Lovick)

Mailing Address
2403 157th Place SE

City	Zip + 4	Office Sought (candidates)	Election Date
Mill Creek, WA	98012	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
07/06/16	LOCAL UNION #191, I.B.E.W. 2701 HOYT AVENUE EVERETT, WA 98201	Occupation	X		1,000.00	1,000.00
07/01/16	PUBLIC SCHOOL EMPLOYEES OF WA PO BOX 798 AUBURN, WA 98071-0798	Occupation	X		500.00	500.00
07/24/16	WASHINGTON OPTOMETRIC PO BOX 2941 OLYMPIA, WA 98507-2941	Occupation	X		300.00	300.00
07/21/16	JERRY ELROD 602 SW 293RD ST FEDERAL WAY, WA 98023	TNT FIREWORKS TACOMA, WA Occupation PRESIDENT	X		250.00	250.00
07/21/16	MUCKELSHOOT INDIAN TRIBE 39015 172ND AVE SE AUBURN, WA 98092	Occupation	X		1,000.00	1,000.00
	☒ Check here if additional pages are attached	Sub-total Amount from attached pages			3,050.00 1,200.00	*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. 4,250.00

4. Date of Deposit
07/29/16

Treasurer's Daytime Telephone No.: (425)328-4990

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

Treasurer's Signature: Sabrina Combs

Date: 08-01-2016

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.)
JOHNNY R LOVICK (Committee for John Lovick)

Deposit Date
07/29/16

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*
07/21/16	SWINOMISH TRIBAL COMMUNITY 11404 MOORAGE WAY LA CONNER, WA 98257	Occupation	X		1,000.00	1,000.00
07/21/16	WA ORGANIZATION OF VOCATIONAL PO BOX 315 OLYMPIA, WA 98507	Occupation	X		200.00	200.00
		Occupation				
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		Occupation				
		Occupation				

Page Total 1,200.00