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
100714252
08-04-2016

Candidate or Committee Name (Do not abbreviate. Use full name.)
Steve O'Ban (Friends of Steve O'Ban)

Mailing Address
PO Box 65335

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

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received		Amount	Total
08/03/16	a. Anonymous	0.00	20.00
08/03/16	b. Candidate's personal funds deposited in the bank (include candidate loans in 1c)	0.00	0.00
	c. Loans, notes, security agreements. Attach Schedule L		
	d. Miscellaneous receipts (interest, refunds, auctions, other). Attach explanation		
08/03/16	e. Small contributions $25.00 or less not itemized and number of persons giving 0 (persons)	0.00	

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
08/02/16	Association of Washington PO Box 658 Olympia, WA 98507-0658	Occupation	X		1,000.00	1,000.00
08/02/16	Washington State Dental PAC 126 NW Canal St Seattle, WA 98107-4970	Occupation	X		50.00	1,000.00
08/02/16	Washington State Dental PAC 126 NW Canal St Seattle, WA 98107-4970	Occupation		X	1,000.00	1,000.00
08/02/16	Dart Container 500 Hogsback Rd Mason, MI 48854-8523	Occupation	X		500.00	1,000.00
08/02/16	Novartis Pharmaceuticals Corp. 6201 South Fwy WR-57 Fort Worth, TX 76134	Occupation	X		500.00	500.00
	☒ Check here if additional pages are attached	Sub-total Amount from attached pages			3,050.00 500.00	*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. 3,550.00

4. Date of Deposit
08/03/16

Treasurer's Daytime Telephone No.: (253)988-2455

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

Treasurer's Signature: Tom Perry

Date: 08-04-2016

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.)
Steve O'Ban (Friends of Steve O'Ban)

Deposit Date
08/03/16

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*
08/02/16	Pacific Dental Services 17000 Red Hill Ave Irvine, CA 92614	Occupation	X		500.00	500.00
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Page Total 500.00