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
100715989
08-15-2016

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		
	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
08/15/16	Daniel A. Bronoske 7853 78th Ave SW Lakewood, WA 98496	West Pierce Fire & Rescue University Place, WA Occupation Firefighter		X	500.00	500.00
08/12/16	Campaign for Tribal 1110 Capital Way S Ste 404 Olympia, WA 98501	, Occupation		X	1,000.00	1,000.00
08/12/16	Daniel P. Grey PSC 450 Box 136 APO, AP 96206-0002	, Occupation		X	50.00	50.00
08/15/16	National Women's Political PO Box 94442 Seattle, WA 98124	, Occupation		X	1,000.00	1,000.00
08/15/16	Professional & Technical 2900 Eastlake Ave E #300 Seattle, WA 98102	, Occupation		X	1,000.00	1,000.00
	☒ Check here if additional pages are attached	Sub-total Amount from attached pages			3,550.00 1,150.00	*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. 4,700.00

4. Date of Deposit
08/15/16

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: 08-15-2016

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
08/15/16

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*
08/12/16	Lois M. Romer PO Box 65010 Tacoma, WA 98464	, Occupation		X	75.00	75.00
08/12/16	Nancy Schmauder PO Box 65010 University Place, WA 98464	, Occupation		X	75.00	75.00
08/15/16	West Pierce Fire Fighters 7125 Steilacoom Blvd SW Lakewood, WA 98499	, Occupation		X	1,000.00	1,000.00
		Occupation				
		Occupation				
		Occupation				
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		Occupation				
		Occupation				
		Occupation				

Page Total 1,150.00