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
100718508
09-05-2016

Candidate or Committee Name (Do not abbreviate. Use full name.)
TIM PROBST (Tim Probst)

Mailing Address
PO Box 87936

City	Zip + 4	Office Sought (candidates)	Election Date
Vancouver, WA	98687	STATE SENATOR	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
08/30/16	NARAL PRO-CHOICE WA PAC 811 First Ave, Ste 456 Seattle, WA 98104	Occupation		X	750.00	750.00
08/30/16	TEAMSTERS LOCAL 117 14675 Interurban Ave S, Ste Seattle, WA 98168	Occupation		X	1,000.00	1,000.00
08/30/16	CENTRAL LABOR COUNCIL PO Box 61929 Vancouver, WA 98666	Occupation		X	250.00	250.00
08/30/16	SARAH EARL ANDERSON 16321 NE 24th St Vancouver, WA 98684	Occupation		X	5.00	5.00
08/30/16	GAIL BERGERON 16606 NE 102nd Ave Battle Ground, WA 98604	Occupation		X	50.00	50.00
	☒ Check here if additional pages are attached	Sub-total			2,055.00	
		Amount from attached pages			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. 2,555.00

4. Date of Deposit
08/30/16

Treasurer's Daytime Telephone No.: (360)609-3527

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

Treasurer's Signature: Marsha Manning
Date: 09-05-2016

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.)
TIM PROBST (Tim Probst)

Deposit Date
08/30/16

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*
08/30/16	PAUL CHRISTENSEN 205 E 11th St, Ste 200 Vancouver, WA 98660	Real Vest Corporation Vancouver, WA Occupation BUSINESS MAN		X	500.00	500.00
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				

Page Total 500.00