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
100718920
09-06-2016

Candidate or Committee Name (Do not abbreviate. Use full name.)
ANNA M RIVERS (Friends of Ann Rivers)

Mailing Address
PO BOX 957

| City | Zip + 4 | Office Sought (candidates) | Election Date |
|---|---|---|---|
| La Center, WA | 98629 | 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 | BLAINE K HIRAI<br>PO Box 695<br>Quincy, WA 98848 | Self<br>Quincy, WA<br>Occupation FARMER | | X | 1,000.00 | 1,000.00 |
| 08/30/16 | DEEP CELL INDUSTRIES<br>5301 Beacon Ave S<br>Seattle, WA 98108 | Occupation | | X | 250.00 | 250.00 |
| 08/30/16 | FRENCHMAN COULEE, LLC<br>PO Box 21231<br>Seattle, WA 98111 | Occupation | | X | 1,000.00 | 1,000.00 |
| 08/30/16 | FIGURE EIGHT INC<br>1191 2nd Avenue Ste. 1500<br>Seattle, WA 98101 | Occupation | | X | 1,000.00 | 1,000.00 |
| 08/30/16 | GARVEY SCHUBER LAW FIRM<br>1191 Second Avenue<br>Seattle, WA 98101 | Occupation | | X | 1,000.00 | 1,000.00 |
| | ☒ Check here if additional pages are attached | Sub-total | | | 4,250.00 | |
| | | Amount from attached pages | | | 750.00 | *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. 5,000.00

4. Date of Deposit
08/30/16

Treasurer's Daytime Telephone No.: (360)931-3403

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

Treasurer's Signature: Fred Rivers

Date: 09-06-2016

# RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)



Candidate or Committee Name (Do not abbreviate. Use full name.)
ANNA M RIVERS (Friends of Ann Rivers)

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 | PEMCO MUTUAL INSURANCE COMPANY<br>1300 Dexter Avenue N<br>Seattle, WA 98109 | Occupation | | X | 750.00 | 750.00 |
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Page Total 750.00