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
100722251
09-22-2016

Candidate or Committee Name (Do not abbreviate. Use full name.)
JOE SCHMICK (PEOPLE FOR JOE SCHMICK)

Mailing Address
P.O. BOX 620

City	Zip + 4	Office Sought (candidates)	Election Date
COLFAX, WA	99111	STATE REPRESENTATIVE	2016

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received		Amount	Total
	a. Anonymous		170.00
	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
07/13/16	GENENTECH INC. 1 DNA WAY, MS 36 SOUTH SAN FRANCISCO, CA 94080	Occupation		X	500.00	500.00
07/21/16	NOVARTIS PHARMACEUTICALS CORP. ONE HEALTH PLAZA EAST HANOVER, NJ 07936-1080	Occupation		X	500.00	500.00
07/21/16	TAKEDA PHARMACEUTICALS U.S.A., ONE TAKEDA PARKWAY DEERFIELD, IL 60015	Occupation		X	500.00	500.00
08/09/16	EMS MANAGEMENT LLC 6363 S. FIDDLERS GREEN CIR GREENWOOD VILLAGE, CO 80111	Occupation		X	500.00	500.00
08/15/16	WASHINGTON ELECTRIC P.O. BOX 7219 OLYMPIA, WA 98507	Occupation		X	300.00	300.00
	☒ Check here if additional pages are attached	Sub-total			2,300.00	
		Amount from attached pages			2,800.00	

*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. 5,100.00

4. Date of Deposit
09/20/16

Treasurer's Daytime Telephone No.: (509)397-3121

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

Treasurer's Signature: Freda Miller

Date: 09-22-2016

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.)
JOE SCHMICK (PEOPLE FOR JOE SCHMICK)

Deposit Date
09/20/16

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*
08/25/16	PHYSICIANS EYEPAC 2033 6TH AVE STE 1100 SEATTLE, WA 98121	Occupation		X	1,000.00	1,000.00
08/25/16	OUR PATIENTS COME FIRST PAC 3760 SQUALICUM LAKE RD. BELLINGHAM, WA 98226-8624	Occupation		X	500.00	500.00
08/31/16	COUNCIL OF POLICE POLITICAL 200 UNION AVE. SE OLYMPIA, WA 98501	Occupation		X	250.00	250.00
09/02/16	SEIU HEALTHCARE 775NW 33615 1ST WAY SOUTH, SUITE A FEDERAL WAY, WA 98003	Occupation		X	500.00	500.00
09/07/16	RICHARD C SCHALICH 5760 W. KLAMATH RD. MESA, WA 99343	Occupation		X	50.00	50.00
09/10/16	MARK F SHAFFER P.O. BOX 5759 LACEY, WA 98509	BIAW OLYMPIA, WA Occupation SAFETY MANAGER		X	500.00	500.00
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				

Page Total 2,800.00