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
100723189
09-29-2016

Candidate or Committee Name (Do not abbreviate. Use full name.)
ANNETTE CLEVELAND (Annette Cleveland For State Senate)

Mailing Address
1111 Main Street Ste 400

City	Zip + 4	Office Sought (candidates)	Election Date
Vancouver, WA	98660	STATE SENATOR	2016

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received		Amount	Total
	a. Anonymous		135.00
	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
09/27/16	WA OSTEOPATHIC PHYSICIANS & PO Box 16486 Seattle, WA 98116	Occupation		X	250.00	250.00
09/27/16	ANN VARKADOS 405 West 35th Street Vancouver, WA 98660	City of Vancouver Vancouver, WA Occupation EDUCATION CONSULTANT		X	100.00	200.00
09/27/16	WASHINGTON CONSERVATION VOTERS PO Box 1907 Seattle, WA 98111	Occupation		X	1,000.00	1,000.00
09/27/16	INSURANCE & FINANCIAL ADVISORS 17111 Eugene St SW Rochester, WA 98579	Occupation		X	1,000.00	1,000.00
09/27/16	PROPERTY CASUALTY INSURERS 8700 West Bryn Mawr Ave, Suite Chicago, IL 60631	Occupation		X	500.00	500.00
	☒ Check here if additional pages are attached	Sub-total Amount from attached pages			2,850.00 700.00	*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
09/27/16

Treasurer's Daytime Telephone No.: (360)695-1120

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

Treasurer's Signature: Linda W McLain

Date: 09-29-2016

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.)
ANNETTE CLEVELAND (Annette Cleveland For State Senate)

Deposit Date
09/27/16

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*
09/27/16	UNITED FOOD AND COMMERCIAL PO Box 23555 Tigard, OR 97281	Occupation		X	500.00	500.00
09/27/16	RESCARE INC 9901 Linn Station Road Louisville, KY 40223	Occupation		X	200.00	200.00
		Occupation				
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		Occupation				

Page Total 700.00