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
100723196
09-29-2016

Candidate or Committee Name (Do not abbreviate. Use full name.)
LIZ S PIKE (Friends to Elect Liz Pike)

Mailing Address
PO Box 662

City	Zip + 4	Office Sought (candidates)	Election Date
Camas, WA	98607	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
09/25/16	PETER BASCETTA 11507 NE 185th St. Battle Ground, WA 98604	, Occupation RETIRED		X	50.00	50.00
09/25/16	ERIC TEMPLE 9632 Vineyard Crest Bellevue, WA 98004	Portland Vancouver Junction Railroas Bellevue, WA Occupation PRESIDENT		X	1,000.00	1,000.00
09/25/16	OUTCOMES BY LEVY LLC 15619 62nd Place NE Kenmore, WA 980282	Occupation		X	75.00	75.00
09/25/16	WASHINGTON FOREST PROTECTION 724 COLUMBIA St. NW Suite 250 Olympia, WA 98501	Occupation		X	500.00	500.00
09/25/16	WA STATE VETERINARY MEDICINE 8024 Bracken Pl SE Snoqualmie, WA 98065	Occupation		X	500.00	500.00
	☒ Check here if additional pages are attached	Sub-total Amount from attached pages			2,125.00 2,700.00	*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. 4,825.00

4. Date of Deposit
09/25/16

Treasurer's Daytime Telephone No.: (360)281-8720

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

Treasurer's Signature: Liz S Pike

Date: 09-29-2016

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.)
LIZ S PIKE (Friends to Elect Liz Pike)

Deposit Date
09/25/16

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*
09/25/16	WA AFFORDABLE HOUSING COUNCIL PO BOX 1909 OLYMPIA, WA 98507	Occupation		X	1,000.00	1,000.00
09/25/16	GERALD VINCENT 2844 NW Lacamas Drive Camas, WA 98607	, Occupation RETIRED		X	200.00	200.00
09/25/16	WASHINGTON STATE DENTAL PAC 126 NW CANAL ST. SEATTLE, WA 98107	Occupation		X	1,000.00	1,000.00
09/25/16	PACIFIC CORP / PACIFIC 825 NE MULTNOMAH PORTLAND, OR 97232	Occupation		X	500.00	500.00
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				

Page Total 2,700.00