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
100724992
10-10-2016

Candidate or Committee Name (Do not abbreviate. Use full name.)
NORMA SMITH (Friends of Norma Smith)

Mailing Address
PO Box 270

City	Zip + 4	Office Sought (candidates)	Election Date
Clinton, WA	98236	STATE REPRESENTATIVE	2016

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received		Amount	Total
	a. Anonymous		70.00
	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
10/05/16	COUNCIL OF POLICE POLITICAL 200 Union Ave SE Olympia, WA 98501	Occupation		X	500.00	500.00
10/05/16	USAA PO Box 34330 San Antonio, TX 78265	Occupation		X	500.00	500.00
10/05/16	RICHARD RAPORT 133 Melissa St Camano Island, WA 98282	Occupation		X	50.00	50.00
10/05/16	CAROLYN RAPORT 133 Melissa St Camano Island, WA 98282	Occupation		X	50.00	50.00
10/05/16	INLANDBOATMEN'S UNION PSR 1711 W Nickerson St Ste D Seattle, WA 98119	Occupation		X	100.00	100.00
	☒ Check here if additional pages are attached	Sub-total			1,200.00	
		Amount from attached pages			950.00	*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. 2,150.00

4. Date of Deposit
10/05/16

Treasurer's Daytime Telephone No.: (253)988-2455

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

Treasurer's Signature: Tom Perry

Date: 10-10-2016

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.)
NORMA SMITH (Friends of Norma Smith)

Deposit Date
10/05/16

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*
10/05/16	AT&T SERVICES, INC. 16331 NE 72nd Way Redmond, WA 98052	Occupation		X	950.00	950.00
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
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		Occupation				

Page Total 950.00