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
100726111
AMENDS
100672500
10-14-2016

Candidate or Committee Name (Do not abbreviate. Use full name.)
Christine Kilduff (Friends of Christine Kilduff)

Mailing Address
PO Box 65431

City	Zip + 4	Office Sought (candidates)	Election Date
University Place, WA	98464	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
12/11/15	Iron Workers District Council 11620 NE Ainsworth Circle #200 Portland, OR 97220	, Occupation	X		250.00	250.00
12/11/15	SEIU Healthcare 1199NW 15 S Grady Way Ste 200 Renton, WA 98057	, Occupation	X		950.00	950.00
12/11/15	Sheet Metal Workers Local 66 11831 Beverly Park Rd Bldg B2 Everett, WA 98204	, Occupation		X	950.00	950.00
12/11/15	Sheet Metal Workers Local 66 11831 Beverly Park Rd Bldg B2 Everett, WA 98204	, Occupation	X		950.00	950.00
12/11/15	SW WA Electricians PAC #48 of PO Box 2883 Battle Ground, WA 98604	, Occupation	X		500.00	500.00
	☒ Check here if additional pages are attached	Sub-total Amount from attached pages			3,600.00 1,900.00	*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. 5,500.00

4. Date of Deposit
12/11/15

Treasurer's Daytime Telephone No.: (253)653-1427

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

Treasurer's Signature: Melissa Pfeifer

Date: 10-14-2016

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.)
Christine Kilduff (Friends of Christine Kilduff)

Deposit Date
12/11/15

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*
12/11/15	WA Optometric PAC PO Box 2941 Olympia, WA 98507	, Occupation		X	900.00	900.00
12/11/15	WA Optometric PAC PO Box 2941 Olympia, WA 98507	, Occupation	X		1,000.00	1,000.00
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Page Total 1,900.00