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
100726458
10-17-2016

Candidate or Committee Name (Do not abbreviate. Use full name.)
JAMES M VOLZ (Committee to Elect Mike Volz)

Mailing Address
PO Box 10163

City	Zip + 4	Office Sought (candidates)	Election Date
Spokane, WA	99209	STATE REPRESENTATIVE	2016

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received		Amount	Total
	a. Anonymous		155.00
	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
10/09/16	SPOKANE COUNTY GOP 1102 E. 2nd Spokane, WA 99202	Occupation		X	1,000.00	1,100.00
10/10/16	PACIFIC DENTAL SERVICES 17000 Red Hill Avenue Irvine, CA 92614	Occupation		X	500.00	500.00
10/10/16	PHARMA 950 F Street NW Suite 300 Washington, DC 20004	Occupation		X	1,000.00	1,000.00
10/11/16	WASHBANKPAC 1601 5th Ave Ste 1120 Seattle, WA 98101	Occupation		X	1,000.00	1,000.00
10/12/16	WASHINGTON STATE SOCIETY OF 902 140th NE Bellevue, WA 98005	Occupation		X	950.00	950.00
		Sub-total			4,450.00	
	☒ Check here if additional pages are attached	Amount from attached pages			1,350.00	*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. 5,800.00

4. Date of Deposit
10/13/16

Treasurer's Daytime Telephone No.: (509)951-8190

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

Treasurer's Signature: James M Volz
Date: 10-17-2016

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.)
JAMES M VOLZ (Committee to Elect Mike Volz)

Deposit Date
10/13/16

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*
10/12/16	JOHN CHRISTINA 204 W. ALDERWOOD Spokane, WA 99218	SPOKANE COUNTY SPOKANE, WA Occupation FINANCE DEPUTY		X	100.00	300.00
10/13/16	BOMA PAC OF WASHINGTON STATE 1420 5th Avenue Ste 1250 Seattle, WA 98101	Occupation		X	500.00	500.00
10/13/16	PAWN 1, INC 204 N Division Spokane, WA 99202	Occupation		X	750.00	750.00
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				

Page Total 1,350.00