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
100735346
11-14-2016

Candidate or Committee Name (Do not abbreviate. Use full name.)
JOHNNY R LOVICK (Committee for John Lovick)

Mailing Address
2403 157th Place SE

City	Zip + 4	Office Sought (candidates)	Election Date
Mill Creek, WA	98012	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		
11/06/16	e. Small contributions $25.00 or less not itemized and number of persons giving 1 (persons)	25.00	

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
11/08/16	THOMAS MCBRIDE 330 OLDSTEAD CT SE OLYMPIA, WA 98501	MCBRIDE PUBLIC AFFAIRS LLC OLYMPIA, WA Occupation ATTORNEY		X	200.00	200.00
11/05/16	SQUAXIN ISLAND TRIBE 10 SE SQUAXIN LANE SHELTON, WA 98584	Occupation		X	250.00	250.00
11/07/16	KING COUNTY COURT OFFICERS 15325 SE 155TH PL Q4 RENTON, WA 98058	Occupation		X	1,000.00	1,000.00
11/03/16	JAMES SCHARF 7626 77TH PL NE MARYSVILLE, WA 98270	Occupation		X	50.00	50.00
11/03/16	NONA SCHARF 7626 77TH PL NE MARYSVILLE, WA 98270	Occupation		X	50.00	50.00
	☒ Check here if additional pages are attached	Sub-total			1,575.00	
		Amount from attached pages			100.00	*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. 1,675.00

4. Date of Deposit
11/13/16

Treasurer's Daytime Telephone No.: (425)328-4990

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

Treasurer's Signature: Sabrina Combs

Date: 11-14-2016

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.)
JOHNNY R LOVICK (Committee for John Lovick)

Deposit Date
11/13/16

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*
11/06/16	JIM STEWART 2602 CADET WAY EVERETT, WA 98208	Occupation		X	50.00	50.00
11/06/16	HELEN STEWART 2602 CADET WAY EVERETT, WA 98208	Occupation		X	50.00	50.00
		Occupation				
		Occupation				
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Page Total 100.00