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
100735960
11-28-2016

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
11/08/16	MOTOR VEHICLE SOFTWARE 29219 Canwood St., Ste 205 Augora Hills, CA 91301	Occupation		X	1,000.00	1,000.00
11/08/16	WASTE CONNECTIONS, INC. 3 WATERWAY SQUARE PLACE, SUITE THE WOODLANDS, TX 77380	Occupation		X	250.00	250.00
11/08/16	TESORO COMPANIES 19100 RIDGEWAY PARKWAY SAN ANTONIO, TX 78259	Occupation		X	500.00	500.00
11/08/16	WASHINGTON PHYSICAL THERAPY 1855 1ST ST. CHENEY, WA 99004	Occupation		X	500.00	500.00
11/08/16	ELI LILLY AND COMPANY 603 STEWART STREET, SUITE 1014 SEATTLE, WA 98101	Occupation		X	250.00	250.00
	☒ Check here if additional pages are attached	Sub-total			2,500.00	
		Amount from attached pages			200.00	

*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. 2,700.00

4. Date of Deposit
11/08/16

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: 11-28-2016

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
11/08/16

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*
11/08/16	CONSUMER FIREWORKS SAFETY 16526 Shore Drive NE Lake Forest Park, WA 98155	Occupation		X	200.00	200.00
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				

Page Total 200.00