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
100740826
01-10-2017

Candidate or Committee Name (Do not abbreviate. Use full name.)
Nicole Macri (Friends of Nicole Macri)

Mailing Address
PO Box 9100

City	Zip + 4	Office Sought (candidates)	Election Date
Seattle, WA	98109	STATE REPRESENTATIVE	2016

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received		Amount	Total
12/09/16	a. Anonymous	0.00	230.00
12/09/16	b. Candidate's personal funds deposited in the bank (include candidate loans in 1c)	0.00	0.00
	c. Loans, notes, security agreements. Attach Schedule L		
	d. Miscellaneous receipts (interest, refunds, auctions, other). Attach explanation		
12/09/16	e. Small contributions $25.00 or less not itemized and number of persons giving 0 (persons)	0.00	

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
12/05/16	WA State Auto Dealers PAC 621 Southwest Grady Way Renton, WA 98057	Occupation		X	1,000.00	1,000.00
12/07/16	WA Refuse & Recycling Assn PAC 4160 6th Avenue Southeast Ste Lacey, WA 98503	Occupation		X	500.00	500.00
12/07/16	Delta Dental PO Box 75688 Seattle, WA 98175	Occupation		X	500.00	1,000.00
12/09/16	University of WA Edu Cmte 1501 Capitol Way South Ste 203 Olympia, WA 98501	Occupation		X	500.00	500.00
12/09/16	WA Beer & Wine Distributors PO Box 86 Olympia, WA 98507	Occupation		X	1,000.00	1,000.00
	☒ Check here if additional pages are attached	Sub-total			3,500.00	
		Amount from attached pages			1,300.00	

*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. 4,800.00

4. Date of Deposit
12/09/16

Treasurer's Daytime Telephone No.: (206) 718-8600

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

Treasurer's Signature: Jason Bennett
Date: 01-10-2017

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.)
Nicole Macri (Friends of Nicole Macri)

Deposit Date
12/09/16

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*
12/09/16	PEMCO Mutual Insurance Co 1300 Dexter Avenue North Seattle, WA 98109	Occupation		X	300.00	300.00
12/09/16	WA Medical PAC 2033 6th Avenue Suite 1100 Seattle, WA 98121	Occupation		X	1,000.00	1,000.00
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Page Total 1,300.00