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
100740916
01-10-2017

Candidate or Committee Name (Do not abbreviate. Use full name.)
PAUL S GRAVES (People for Paul Graves)

Mailing Address
PO Box 417

City	Zip + 4	Office Sought (candidates)	Election Date
Fall City, WA	98024	STATE REPRESENTATIVE	2016

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received		Amount	Total
	a. Anonymous		243.00
	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
12/17/16	NW CREDIT UNION ASSN CULAF 18000 International Blvd, #350 Seatac, WA 98186	Occupation		X	1,000.00	1,000.00
12/17/16	MONSANTO COMPANY 800 N lindbergh Blvd St Louis, MO 63141	Occupation		X	500.00	1,500.00
12/17/16	WA DAIRY PAC PO Box 1768 Elma, WA 98541	Occupation		X	1,000.00	1,000.00
12/17/16	WA REFUSE & RECYCLING ASSN PAC 4160 6th Ave SE, Ste 205 Lacey, WA 98503	Occupation		X	500.00	500.00
12/17/16	VULCAN, INC 505 5th Ave S, Suite 900 Seattle, WA 98104	Occupation		X	500.00	500.00
	☒ Check here if additional pages are attached	Sub-total			3,500.00	
		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. 3,600.00

4. Date of Deposit
12/19/16

Treasurer's Daytime Telephone No.: (206)818-5607

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

Treasurer's Signature: Paul S Graves
Date: 01-10-2017

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.)
PAUL S GRAVES (People for Paul Graves)

Deposit Date
12/19/16

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*
12/17/16	OUTCOMES BY LEVY LLC 15619 62nd Pl NE Kenmore, WA 98028	Occupation		X	100.00	100.00
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Page Total 100.00