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
100799220
11-06-2017

Candidate or Committee Name (Do not abbreviate. Use full name.)
JOE SCHMICK (People for Joe Schmick)

Mailing Address
P.O. BOX 620

City	Zip + 4	Office Sought (candidates)	Election Date
COLFAX, WA	99111	STATE REPRESENTATIVE	2018

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
06/06/17	NOVARTIS FINANCE CORPORATION 6201 SOUTH FREEWAY WR-57 FORT WORTH, TX 76134	Occupation	X		1,000.00	1,000.00
09/28/17	WASHINGTON HOSPITAL PAC 300 ELLIOTT AVE. WEST, SUITE SEATTLE, WA 98119	Occupation	X		1,000.00	1,000.00
09/28/17	MONSANTO COMPANY 800 NORTH LINDBERGH SAINT LOUIS, MO 63167	Occupation	X		500.00	500.00
10/02/17	WASHINGTON STATE AUTO DEALERS P.O. BOX 58170 SEATTLE, WA 98138	Occupation	X		500.00	500.00
10/11/17	WASHINGTON HEALTH CARE 303 CLEVELAND AVE SE, STE 208 TUMWATER, WA 98501	Occupation	X		1,000.00	1,000.00
	☒ Check here if additional pages are attached	Sub-total			4,000.00	
		Amount from attached pages			550.00	*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. 4,550.00

4. Date of Deposit
11/01/17

Treasurer's Daytime Telephone No.: (509)397-3121

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

Treasurer's Signature: FREDA MILLER

Date: 11-06-2017

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.)
JOE SCHMICK (People for Joe Schmick)

Deposit Date
11/01/17

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*
10/12/17	INLAND POWER AND LIGHT COMPANY 10110 W HALLETT RD SPOKANE, WA 99224	Occupation	X		250.00	250.00
10/24/17	GRANT W HARDAN OD, PLLC 9671 N NEVADA ST. STE 210 SPOKANE, WA 99218	Occupation	X		100.00	100.00
10/10/17	LARRY D MORGAN 102 HAYWARD RD PULLMAN, WA 99163	Occupation	X		50.00	50.00
10/10/17	CHERYL MORGAN 102 HAYWARD RD PULLMAN, WA 99163	Occupation	X		50.00	50.00
10/24/17	RICHARD E KELLOG N 14926 LTL SPOKANE RVR DR SPOKANE, WA 99208	Occupation	X		50.00	50.00
10/24/17	SUSAN M KELLOGG N 14926 LTL SPOKANE RVR DR SPOKANE, WA 99208	Occupation	X		50.00	50.00
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				

Page Total 550.00