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
100940702
10-26-2019

Candidate or Committee Name (Do not abbreviate. Use full name.)
MARCUS M RICCELLI (FRIENDS OF MARCUS RICCELLI)

Mailing Address
PO BOX 1325

City: **SPOKANE, WA** | Zip + 4: **99210-1325** | Office Sought (candidates): **STATE REPRESENTATIVE** | Election Date: **2020**

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
10/11/19	NORTH PINES CHIROPRACTIC PS 1301 N Pines Road Spokane Valley, WA 99206	Occupation	X		$250.00	$250.00
10/11/19	PHARMACEUTICAL CARE MANAGEMENT 325 7th Avenue NW 9th Fl Washington, DC 20004	Occupation	X		$250.00	$250.00
10/11/19	THE BOEING COMPANY PAC 929 Long Bridge Drive Arlington, VA 22202	Occupation	X		$500.00	$500.00
10/11/19	LAWRENCE B STONE 407 E 14th Avenue Spokane, WA 99202	Play Fair Business Park Spokane, WA Occupation OWNER/DEVELOPER	X		$1,000.00	$1,000.00
10/11/19	DAY CHIROPRATIC CLINIC PS 2721 E Sprague Avenue Spokane, WA 99202	Occupation	X		$250.00	$250.00
	☒ Check here if additional pages are attached	Sub-total Amount from attached pages			$2,250.00 $2,000.00	*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. **$4,250.00**

4. Date of Deposit: **10/15/19**

Treasurer's Daytime Telephone No.: **(509)939-1897**

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

Treasurer's Signature: **BARBARA MARNEY** Date: **10-26-2019**

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.)
MARCUS M RICCELLI (FRIENDS OF MARCUS RICCELLI)

Deposit Date
10/15/19

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*
10/11/19	CREDIT UNION LEGISLATIVE ACTION 18000 Internatinal Boulevard SeaTac, WA 98188	Occupation	X		$1,000.00	$1,000.00
10/11/19	CREDIT UNION LEGISLATIVE ACTION 18000 Internatinal Boulevard SeaTac, WA 98188	Occupation		X	$1,000.00	$1,000.00
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				

Page Total **$2,000.00**