



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
 (11/83)

100125988
 THIS SPACE FOR OFFICE USE

Candidate or Committee Name (Do not abbreviate. Use full name.)
 GRACE PAUL M

Mailing Address
 18405 AURORA AVE N, SUITE H-126

City: SHORELINE WA 98133 Zip + 4: Office Sought (candidates): SHORELINE CITY COUNC

06/06/2005

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received		Amount	Total
	a. Anonymous.....	\$ 0.00	\$ 0.00
	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.....	\$ 0.00	
	d. Miscellaneous receipts (interest, refunds, auctions, other). Attach explanation.....	\$ 0.00	
	e. Small contributions \$25.00 or less not itemized and number of persons giving (persons).....	\$ 125.00	

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	P R I	G E N	Amount	Aggregate* Total
05/01/2005	ATKINSON GRETCHEN 2148 N 183RD PLACE SHORELINE WA 98133			X	\$ 50.00	\$ 50.00
		Occupation				
05/02/2005	BURMAN DAVID & DEEANN 18238 RIDGEFIELD RD NW SHORELINE WA 98177			X	\$ 100.00	\$ 100.00
		Occupation				
05/02/2005	AGID PAUL 1925 14TH AVE E SEATTLE WA 98112			X	\$ 50.00	\$ 50.00
		Occupation				
05/02/2005	STONE LISA 1925 14TH AVE E SEATTLE WA 98112			X	\$ 50.00	\$ 50.00
		Occupation				
05/03/2005	LEDELL MARJORIE 8828 238TH ST SW, #B2 EDMONDS WA 98026			X	\$ 60.00	\$ 60.00
		Occupation				
	<input type="checkbox"/> Check here if additional pages are attached				Sub-total \$ 435.00	*See next page for details.
					Amount from attached pages \$ 268.00	

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.
 \$ 703.00

4. Date of Deposit: 05/05/2005

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

Treasurer's Signature: BRYCE GLORIA Date: _____

Treasurer's Daytime Telephone No.: (206) 542-7395

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

100125988

Page 1

Candidate or Committee Name (Do not abbreviate. Use full name.) GRACE PAUL M	Deposit Date 05/05/2005
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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	P R I	G E N	Amount	Aggregate Total*
05/04/2005	KIYONAGA COLLEEN 16235 6TH AVE NW SHORELINE WA 98177			X	\$ 50.00	\$ 50.00
		Occupation				
05/04/2005	WOODS RICK & JENNIFER 715 N 193RD PLACE SHORELINE WA 98133			X	\$ 100.00	\$ 100.00
		Occupation				
05/04/2005	TSOMING TOM & SUSANNE 20024 2ND AVE NW SHORELINE WA 98177			X	\$ 118.00	\$ 118.00
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		Occupation				
		Occupation				
		Occupation				

Page Total \$ 268.00