

**CASH RECEIPTS
 MONETARY
 CONTRIBUTIONS**

C3
 (1/02)

THIS SPACE FOR OFFICE USE
 100960828
 03-10-2020

Candidate or Committee Name (Do not abbreviate. Use full name.)
FRANCES CHVATAL (Elect Frances Chvatal)

Mailing Address
PO Box 53

City Walla Walla, WA Zip + 4 99362 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		
Various	e. Small contributions \$25.00 or less not itemized and number of persons giving <u>4</u> (persons)	\$55.00	

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
02/01/20	DAVID FOGARTY 1680 CAMBRIDGE DR WALLA WALLA, WA 99362	Not Employed WALLA WALLA, WA Occupation RETIRED	X		\$200.00	\$200.00
02/02/20	NORMA HERNANDEZ &05 SE 4TH ST COLLEGE PLACE, WA 99324	Occupation	X		\$100.00	\$100.00
02/02/20	LINDA HERBERT 621 PLEASANT ST WALLA WALLA, WA 99362	Occupation	X		\$100.00	\$100.00
02/02/20	ORMAND HILDERBRAND 1003 BOYER AVE WALLA WALLA, WA 99362	Occupation	X		\$100.00	\$100.00
02/02/20	MICHELLE LIBERTY 1825 PIKE PL WALLA WALLA, WA 99362	Occupation	X		\$50.00	\$50.00
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			\$605.00	*See reverse for details.
		Amount from attached pages			\$375.00	
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.					\$980.00	

4. Date of Deposit: **02/06/20**

Treasurer's Daytime Telephone No.: **(206)682-7328**

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

Treasurer's Signature: **Josie Olsen** Date: **03-10-2020**

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.)
FRANCES CHVATAL (Elect Frances Chvatal)

Deposit Date
02/06/20

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*
02/03/20	RONALD KAMMER 150 EAST CHESTNUT ST WALLA WALLA, WA 99362	Occupation	X		\$25.00	\$35.00
02/03/20	DON SCHWERIN 2921 MUD CREEK RD WAITSBURG, WA 99361	Not Employed WAITSBURG, WA Occupation RETIRED	X		\$300.00	\$300.00
02/04/20	MELODIE SELBY 209 SE 6TH ST COLLEGE PLACE, WA 99324	Occupation	X		\$50.00	\$50.00
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