

**CASH RECEIPTS  
 MONETARY  
 CONTRIBUTIONS**

**C3**  
 (1/02)

THIS SPACE FOR OFFICE USE  
 100968719  
 05-11-2020

Candidate or Committee Name (Do not abbreviate. Use full name.)  
**(Shir Regev)**

Mailing Address  
**PO Box 306**

City **Richland, WA** Zip + 4 **99352** 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	P R I	G E N	Amount	Aggregate* Total
04/09/20	JUDITH JOHANNESSEN 1615 Sanford Ave Richland, WA 99354		X		\$20.00	\$80.00
	Occupation					
04/12/20	ANN FRASER 65 Park Street Richland, WA 99354		X		\$10.00	\$58.00
	Occupation					
04/13/20	SHIRLEY SONNICHSEN 1150 Englewood Dr. Richland, WA 99352		X		\$18.00	\$72.00
	Occupation					
04/18/20	CARL BAKER 4501 W Lattin Ct West Richland, WA 99353	Pacific Northwest National Lab Richland, WA	X		\$36.00	\$144.00
	Occupation	ENGINEER				
04/21/20	SHEILA DWYER 86 Symons Richland, WA 99354		X		\$54.00	\$54.00
	Occupation					
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			\$138.00	*See reverse for details.
		Amount from attached pages			\$308.00	

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.

\$446.00

4. Date of Deposit **04/27/20**

Treasurer's Daytime Telephone No.:

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

Treasurer's Signature **Shir Regev** Date **05-11-2020**

# RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.) (Shir Regev)	Deposit Date 04/27/20
---	--------------------------

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*
04/27/20	ALICE ORELL 2527 Albemarle Court Richland, WA 99354	Battelle Richland, WA  Occupation <b>ENGINEER</b>	X		\$108.00	\$108.00
04/23/20	JAYNE TRACY 2688 Grayhawk Loop Richland, WA 99354	,  Occupation <b>RETIRED</b>	X		\$100.00	\$250.00
04/23/20	CHRIS TRACY 2688 Grayhawk Loop Richland, WA 99354	,  Occupation <b>RETIRED</b>	X		\$100.00	\$150.00
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				