

# CASH RECEIPTS MONETARY CONTRIBUTIONS

## C3

(1/02)

THIS SPACE FOR OFFICE USE

100973394

06-08-2020

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

(Friends of Justin Raffa)

Mailing Address

PO Box 1815

City

Richland, WA

Zip + 4

99352

Office Sought (candidates)

COUNTY COMMISSIONER

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
06/03/20	JILLIAN WILLIS 320 ATKINSON RD WILMINGTON, DE 19803	BREW HA HA! WILMINGTON, DE OccupationDIRECTOR OF OPERATIONS	X		\$125.00	\$125.00
06/03/20	DOUGLAS BATEMAN 3105 S JOHNSON PL KENNEWICK, WA 99337	Occupation	X		\$100.00	\$100.00
06/03/20	ASHLEY LUKSIC 1352 KENSINGTON WAY RICHLAND, WA 99337	Occupation	X		\$100.00	\$100.00
06/03/20	TESSA HAMILTON 2205 W GRAND RONDE AVE KENNEWICK, WA 99336	Occupation	X		\$20.00	\$20.00
06/03/20	KIMBERLY KEEL 316 S BUCHANAN CT KENNEWICK, WA 99336	NOT EMPLOYED KENNEWICK, WA OccupationNOT EMPLOYED	X		\$200.00	\$200.00
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			\$545.00	*See reverse for details.
		Amount from attached pages			\$675.00	
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.					\$1,220.00	

4. Date of Deposit

06/05/20

Treasurer's Daytime Telephone No.: (509)554-7208

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

Treasurer's Signature

Date

Skye White

06-08-2020

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

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Candidate or Committee Name (Do not abbreviate. Use full name.)  
(Friends of Justin Raffa)

Deposit Date  
06/05/20

## 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*
06/03/20	DARREN MCCOY 1830 SW SCENIC HEIGHTS APT F3 OAK HARBOR, WA 98277	OAK HARBOR SCHOOLS OAK HARBOR, WA Occupation <b>TEACHER</b>	X		\$125.00	\$125.00
06/03/20	KIMBERLY RUCK 1201 HERITAGE HILLS DR SELAH, WA 98942	Occupation	X		\$50.00	\$50.00
06/03/20	MATT PATTERSON 3502 N LEVI CT KENNEWICK, WA 99338	KSD KENNEWICK, WA Occupation <b>TEACHER</b>	X		\$250.00	\$250.00
06/03/20	ERIN PATTERSON 3502 N LEVI CT KENNEWICK, WA 99338	KSD KENNEWICK, WA Occupation <b>TEACHER</b>	X		\$250.00	\$250.00
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Page Total \$675.00