

**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 **Skye White** Date **06-08-2020**

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.) (Friends of Justin Raffa)	Deposit Date 06/05/20
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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*
06/03/20	DARREN MCCOY 1830 SW SCENIC HEIGHTS APT F3 OAK HARBOR, WA 98277	OAK HARBOR SCHOOLS OAK HARBOR, WA Occupation TEACHER	<input checked="" type="checkbox"/>	<input type="checkbox"/>	\$125.00	\$125.00
06/03/20	KIMBERLY RUCK 1201 HERITAGE HILLS DR SELAH, WA 98942	 Occupation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	\$50.00	\$50.00
06/03/20	MATT PATTERSON 3502 N LEVI CT KENNEWICK, WA 99338	KSD KENNEWICK, WA Occupation TEACHER	<input checked="" type="checkbox"/>	<input type="checkbox"/>	\$250.00	\$250.00
06/03/20	ERIN PATTERSON 3502 N LEVI CT KENNEWICK, WA 99338	KSD KENNEWICK, WA Occupation TEACHER	<input checked="" type="checkbox"/>	<input type="checkbox"/>	\$250.00	\$250.00
		 Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		 Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		 Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		 Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		 Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		 Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		 Occupation	<input type="checkbox"/>	<input type="checkbox"/>		