

**CASH RECEIPTS  
 MONETARY  
 CONTRIBUTIONS**

**C3**  
 (1/02)

THIS SPACE FOR OFFICE USE  
 100973395  
 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	BOYCE BURDICK 414 SNYDER ST RICHLAND, WA 99354	RETIRED RICHLAND, WA Occupation RETIRED	X		\$500.00	\$500.00
06/03/20	EDWIN FROST 609 W ALBANY AVE KENNEWICK, WA 99336	RETIRED KENNEWICK, WA Occupation RETIRED	X		\$250.00	\$250.00
06/03/20	GAIL FROST 609 W ALBANY AVE KENNEWICK, WA 99336	DSHS KENNEWICK, WA Occupation RN	X		\$250.00	\$250.00
		Occupation				
		Occupation				
	<input type="checkbox"/> Check here if additional pages are attached	Sub-total			\$1,000.00	*See reverse for details.
		Amount from attached pages			\$0.00	
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.					\$1,000.00	

4. Date of Deposit **06/03/20**

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**