

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3

(1/02)

THIS SPACE FOR OFFICE USE

100973398

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 N T	G E N	Amount	Aggregate* Total
06/01/20	TOM MOAK 418 W KENNEWICK AVE KENNEWICK, WA 99336	MID-COLUMBIA LIBRARIES KENNEWICK, WA OccupationLIBRARIAN	X		\$200.00	\$200.00
06/01/20	TANYA KNICKERBOCKER 3204 SHARON WAY YAKIMA, WA 98902	Occupation	X		\$50.00	\$50.00
06/01/20	BENJAMIN STUERMER 559 FRNAKLIN ST RICHLAND, WA 99354	Occupation	X		\$100.00	\$100.00
06/01/20	ADEL MCCARTHY 652 SPRINGLAKE DR FRANKLIN, TN 37064	Occupation	X		\$50.00	\$50.00
06/01/20	SHERRY DANIELSON 1727 HORN AVE RICHLAND, WA 99354	Occupation	X		\$50.00	\$50.00
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			\$450.00	*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.

\$1,125.00

4. Date of Deposit

06/02/20

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)

Page 2

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

Deposit Date
06/02/20

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*
06/01/20	DONNA GLASS 303 SPRING ST RICHLAND, WA 99354	INDIA PARTNERS EUGENE, OR Occupation PROGRAM COORDINATOR	X		\$250.00	\$250.00
06/01/20	MIRIAM KERZNER 510 NEWCOMER ST RICHLAND, WA 99354	Occupation	X		\$50.00	\$50.00
06/01/20	KATHY PAYNE 156 RIO SENDA ST UMATILLA, OR 97882	NOT EMPLOYED UMATILLA, OR Occupation NOT EMPLOYED	X		\$125.00	\$125.00
06/01/20	CHRISTINE GAMBINO 9508 ERINSBROOK DR RALEIGH, NC 27617	Occupation	X		\$75.00	\$75.00
06/01/20	BENITA BROWN 220 WALLACE ST RICHLAND, WA 99354	Occupation	X		\$100.00	\$100.00
06/01/20	SALLY ROSE 465 BLINE RD YAKIMA, WA 98908	Occupation	X		\$50.00	\$50.00
06/01/20	GISELLE WYERS 18529 29TH AVE NE LAKE FOREST PARK, WA 98155	Occupation	X		\$25.00	\$25.00
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				

Page Total \$675.00