

CASH RECEIPTS MONETARY CONTRIBUTIONS

99362

THIS SPACE FOR OFFICE USE

100975341

06-10-2020

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

FRANCES CHVATAL (Elect Frances Chvatal)

Mailing Address

PO Box 53

Walla Walla, WA

City Zip + 4

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)								
	e. Small contributions \$25.00 or less not itemized and number of persons giving (persons)								
2. CONTR Date Received	LIBUTIONS OVER \$25.00 Contributor's Name, Address, City, State, Zip		ions of more than \$100 r's Name, City and Stat	IN.	G E N	Amount	Aggregate [*] Total		
05/13/20	TRACY WILLIAMS	Self Em	ployed	х					
	2114 W Johannsen Rd Spokane, WA 99208	Walla Walla, WA				\$100.00	\$190.00		
		Occupation	CONSULTANT						
05/16/20	GAYLE SEE 827 Smith Dr College Place, WA 99324			х		\$16.00	\$48.00		
		Occupation							
05/16/20	NORM OSTERMAN 1032 Pomona St Walla Walla, WA 99362			х		\$50.00	\$50.00		
05/17/20	JUDITH JOHANNESEN 1615 Sanford Ave Richland, WA 99354	Battello Richland		х		\$20.00	\$195.00		
		Occupation	OccupationMANAGEMENT PROFESSOR						
05/17/20	DON SCHWERIN 2921 MUD CREEK RD WAITSBURG, WA 99361	Not Emp	loyed	X	1 -	\$175.00	\$650.00		
				Sub-t	otal	\$361.00			
	Check here if additional pages are attached			Amount fached pa	-	\$150.00	*See reverse		
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.						\$511.00	for details.		
4. Date of	Deposit		•		nd comp	mplete to the best of my knowledge			
05.	/18/20		Treasurer's Signature	ŧ		Į	Date		

Treasurer's Daytime Telephone No.: (206)682-7328

Josie Olsen

06-10-2020

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Page 2 Candidate or Committee Name (Do not abbreviate. Use full name.) Deposit Date FRANCES CHVATAL (Elect Frances Chvatal) 05/18/20 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*
	MARTIN SMITH 2255 Crosshaven Dr Walla Walla, WA 99362	Occupation	х		\$50.00	\$50.00
05/18/20	SUZIE DAVIS 36 Cherokee St Walla Walla, WA 99362	Occupation	х		\$50.00	\$50.00
	CARMA CARLILE 824 Ankeny St Walla Walla, WA 99362	Occupation	х		\$50.00	\$50.00
		Occupation				
		Occupation				
		Occupation				
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		Occupation				
		Occupation				

Page Total ____ \$150.00