

**CASH RECEIPTS
 MONETARY
 CONTRIBUTIONS**

C3
 (1/02)

THIS SPACE FOR OFFICE USE
 100979237
 06-29-2020

Candidate or Committee Name (Do not abbreviate. Use full name.)
FRANCES CHVATAL (Elect Frances Chvatal)

Mailing Address
PO Box 53

City Walla Walla, WA Zip + 4 99362 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).....		
	c. Loans, notes, security agreements. Attach Schedule L		
	d. Miscellaneous receipts (interest, refunds, auctions, other). Attach explanation		
Various	e. Small contributions \$25.00 or less not itemized and number of persons giving <u>2</u> (persons)	\$30.00	

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
06/26/20	JENNY ROMINE 1884 Rustic Pl Walla Walla, WA 99362		X		\$50.00	\$50.00
	Occupation					
06/27/20	DENOMY DAGE 1720 W Marie St Pasco, WA 99301		X		\$50.00	\$50.00
	Occupation					
06/27/20	JOHN KENNEDY 721 W 32nd Ave Kennewick, WA 99337	Columbia Basin College Pasco, WA	X		\$100.00	\$110.00
	Occupation INSTRUCTOR					
06/27/20	BRIAN DOHE 14 N Clinton St Apt 6 Walla Walla, WA 99362		X		\$50.00	\$100.00
	Occupation					
06/27/20	CARLY COBURN 2200 W Shoshone St Unit C22 Pasco, WA 99301		X		\$20.00	\$36.00
	Occupation					
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			\$300.00	*See reverse for details.
		Amount from attached pages			\$40.00	

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.

\$340.00

4. Date of Deposit **06/28/20**

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

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

Treasurer's Signature **Josie Olsen** Date **06-29-2020**

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.) FRANCES CHVATAL (Elect Frances Chvatal)	Deposit Date 06/28/20
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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*
06/27/20	LORI DOHE 703 S Park St WALLA WALLA, WA 99362	Occupation	<input checked="" type="checkbox"/>	<input type="checkbox"/>	\$20.00	\$71.00
06/28/20	EVERETT MAROON 1009 Francis Ave Walla Walla, WA 99362	Blue Mountain Heart to Heart Walla Walla, WA Occupation EXECUTIVE DIRECTOR	<input checked="" type="checkbox"/>	<input type="checkbox"/>	\$20.00	\$120.00
		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"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		