

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3

(1/02)

THIS SPACE FOR OFFICE USE

100980522

07-06-2020

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		\$30.00
	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
06/29/20	COLETTE DEHAAN 1354 JONAGOLD DR RICHLAND, WA 99352	PSD PASCO, WA OccupationTEACHER	X		\$50.00	\$125.00
06/30/20	JAMIE GOAD 111 SUMMIT LOOP ELTOPIA, WA 99330	CALTECH RICHLAND, WA OccupationFINANCIAL ANALYST	X		\$125.00	\$125.00
06/30/20	KYLA HAREN 1430 UNIVERSITY ST WALLA WALLA , WA 99362	Occupation	X		\$25.00	\$25.00
06/30/20	KIRK WILLIAMSON 527 N REED ST KENNEWICK, WA 99336	BENTON-FRANKLIN COMMUNITY HEALTH ALLIANCE KENNEWICK, WA OccupationPROGRAM MANAGER	X		\$100.00	\$200.00
		Occupation				
	<input type="checkbox"/> Check here if additional pages are attached	Sub-total Amount from attached pages			\$300.00 \$0.00	*See reverse for details.
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.					\$300.00	

4. Date of Deposit

07/02/20

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

Skye White

Date

07-06-2020