

**CASH RECEIPTS  
 MONETARY  
 CONTRIBUTIONS**

**C3**  
 (1/02)

THIS SPACE FOR OFFICE USE  
 100985000  
 07-20-2020

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 .....		
	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
07/13/20	JACQUELINE NISHINO 10036 NE 130th Ln #2 Kirkland, WA 98034		X		\$20.00	\$55.00
		Occupation				
07/15/20	REBECCA FRANCIK 3114 W Wilcox Dr Pasco, WA 99301	Pasco School District Pasco, WA	X		\$50.00	\$175.00
		OccupationTEACHER				
07/15/20	MICHAEL KELCY 1379 Detour Rd Walla Walla, WA 99362	Not Employed Walla Walla, WA	X		\$500.00	\$500.00
		OccupationNOT EMPLOYED				
07/16/20	GAYLE SEE 827 Smith Dr College Place, WA 99324	Not Employed ,	X		\$16.00	\$130.00
		OccupationNOT EMPLOYED				
07/17/20	JUDITH JOHANNESSEN 1615 Sanford Ave Richland, WA 99354	Battelle PNWD Richland, WA	X		\$20.00	\$395.00
		OccupationMANAGEMENT PROFESSOR				
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			\$606.00	*See reverse for details.
		Amount from attached pages			\$175.00	
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.					\$781.00	

4. Date of Deposit: **07/17/20**

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: **07-20-2020**

# RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.) <b>FRANCES CHVATAL (Elect Frances Chvatal)</b>	Deposit Date <b>07/17/20</b>
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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*
07/17/20	DON SCHWERIN 2921 Mud Creek Rd Waistburg, WA 99361	Not Employed WAITSBURG, WA  Occupation <b>NOT EMPLOYED</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	\$175.00	\$1,000.00
		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"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		