

**CASH RECEIPTS  
 MONETARY  
 CONTRIBUTIONS**

**C3**  
 (1/02)

THIS SPACE FOR OFFICE USE  
 100985998  
 07-27-2020

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:*<br>Employer's Name, City and State | P<br>R<br>I | G<br>E<br>N | Amount             | Aggregate*<br>Total       |
|--|--|---|-------------|-------------|--------------------|---------------------------|
| 07/20/20   | IVAR HUSA<br>208 PINETREE LN<br>RICHLAND, WA 99352                   | NOT EMPLOYED<br>RICHLAND, WA<br>Occupation NOT EMPLOYED               | X           |             | \$125.00           | \$125.00                  |
|  |  | Occupation  |             |             |                    |                           |
|  |  | Occupation  |             |             |                    |                           |
|  |  | Occupation  |             |             |                    |                           |
|  |  | Occupation  |             |             |                    |                           |
|  | <input type="checkbox"/> Check here if additional pages are attached | Sub-total<br>Amount from attached pages                               |             |             | \$125.00<br>\$0.00 | *See reverse for details. |
| 3. TOTAL FUNDS RECEIVED AND DEPOSITED OR CREDITED TO ACCOUNT<br>Sum of parts 1 and 2 above. Enter this amount in line 1, Schedule A to C4. |  |   |             |             | \$125.00           |                           |

4. Date of Deposit **07/22/20**

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 **07-27-2020**