

**CASH RECEIPTS  
 MONETARY  
 CONTRIBUTIONS**

**C3**  
 (1/02)

THIS SPACE FOR OFFICE USE  
 100986844  
 07-27-2020

Candidate or Committee Name (Do not abbreviate. Use full name.)  
**Danielle Garbe Reser (Friends Of Danielle Garbe Reser)**

Mailing Address  
**PO Box 3297**

City: **Walla Walla, WA** Zip + 4: **99362** Office Sought (candidates): **STATE SENATOR** 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
07/23/20	Int'l Brotherhood of Teamsters 1700 North State Street Bellingham, WA 98225		X		\$500.00	\$500.00
		Occupation				
07/23/20	Mary Jensen 2235 Crosshaven Drive Walla Walla, WA 99362	Retired	X		\$250.00	\$250.00
		OccupationRetired				
07/23/20	Val Jensen 2235 Crosshaven Drive Walla Walla, WA 99362	Retired	X		\$250.00	\$250.00
		OccupationRetired				
07/23/20	Albert Marshall 725 Valencia Street Walla Walla, WA 99362		X		\$100.00	\$100.00
		Occupation				
07/23/20	Andrea Negrone 2901 Key Boulevard Arlington, VA 22201	Retired Arlington, VA	X		\$45.00	\$395.00
		OccupationRetired				
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			\$1,145.00	*See reverse for details.
		Amount from attached pages			\$2,000.00	
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.					\$3,145.00	

4. Date of Deposit: **07/23/20**

Treasurer's Daytime Telephone No.: **(206)745-2010**

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

Treasurer's Signature: **Jason Bennett** Date: **07-27-2020**

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

Candidate or Committee Name (Do not abbreviate. Use full name.) <b>Danielle Garbe Reser (Friends Of Danielle Garbe Reser)</b>	Deposit Date <b>07/23/20</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*
07/23/20	Teamsters Local 174 14675 Interurban Avenue South Tukwila, WA 98168	Occupation	X		\$1,000.00	\$1,000.00
07/23/20	WA St Building & Construction 215 TURNER ST NE Olympia, WA 98506	Occupation	X		\$1,000.00	\$1,000.00
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