

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3

(1/02)

THIS SPACE FOR OFFICE USE

100991061

08-10-2020

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:*	P R I	G E N	Amount	Aggregate* Total
07/31/20	KIRK WILLIAMSON 527 N REED ST KENNEWICK, WA 99336	BENTON-FRANKLIN COMMUNITY HEALTH ALLIANCE KENNEWICK, WA	X		\$100.00	\$300.00
		OccupationPROGRAM MANAGER				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
	<input type="checkbox"/> Check here if additional pages are attached	Sub-total			\$100.00	*See reverse for details.
		Amount from attached pages			\$0.00	

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.

\$100.00

4. Date of Deposit

08/04/20

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

Treasurer's Signature

Date

Skye White

08-10-2020

Treasurer's Daytime Telephone No.: **(509)554-7208**