

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

## CASH RECEIPTS MONETARY CONTRIBUTIONS

**C3** 

THIS SPACE FOR OFFICE USE

100992422

08-17-2020

b. Candidate's personal funds deposited in the bank (include candidate loans in 1c)  c. Loans, notes, security agreements. Atlach Schedule L.  d. Miscellaneous receipts (interest, refunds, auctions, other). Attach explanation					(1/02)	0.6	5-17-2020
Mailing Address PO Box 1815 City Zip + 4 Richland, WA 99352 COUNTY COMMISSIONER  1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT Date Received  a. Anonymous			me.)				
PO Box 1815  City Zip 4 Office Sought (candidates)  Richland, WA 99352 COUNTY COMMISSIONER 2020  1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT  Date Received  a. Anonymous							
City Richland, WA 9332 COUNTY COMMISSIONER  Richland, WA 9332 COUNTY COMMISSIONER  I. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT  Date Received  a. Anonymous	_						
Richland, WA 99352  1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT  Date Received  a. Anonymous				T			
### Total    Amount   Total							
Date Received  a. Anonymous			COUNTY COMMISSIONER			2020	
Received  a. A. Anonymous	1. MONET	ARY CONTRIBUTIONS DEPOSITED IN ACCOUNT					
b. Candidate's personal funds deposited in the bank (include candidate loans in 1c)  c. Loans, notes, security agreements. Atlach Schedule L.  d. Miscellaneous receipts (interest, refunds, auctions, other). Attach explanation						Amount	Total
c. Loans, notes, security agreements. Attach Schedule L		a. Anonymous					\$30.00
d. Miscellaneous receipts (interest, refunds, auctions, other). Attach explanation		c. Loans, notes, security agreements. Attach Schedule L					
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 Employer's Name, City and State   N							
2. CONTRIBUTIONS OVER \$25.00 Date Received Contributor's Name, Address, City, State, Zip  B/11/20 CHARLENE WHITE 112 N HARVARD RD GLASSBORO, NJ 08028  Occupation  Occupation  Check here if additional pages are attached pages are attached pages are attached pages are attached sum of pages are attached and attached pages are attached to R. Deposit Tensurer's Signature  OR/13/20  CONTRIBUTIONS OVER \$25.00 Contributions of more than \$100.* Employer's Name, City and State  NOT EMPLOYED  S100.00  \$1							
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GLASSBORO, NJ 08028  GLASSBORO, NJ OccupationNOT EMPLOYED  Occupation  Occupation  Occupation  Occupation  Occupation  Occupation  Sub-total \$100.00 Amount from attached pages are attached pages are attached pages.  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.  4. Date of Deposit  OR\$/13/20  I certify that this report is true and complete to the best of my knowledge.  Treasurer's Signature  Date	08/11/20		NOT EMPL	OYED		****	****
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