

**CASH RECEIPTS
 MONETARY
 CONTRIBUTIONS**

C3
 (1/02)

THIS SPACE FOR OFFICE USE
 100995733
 09-04-2020

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: Employer's Name, City and State	P R I	G E N	Amount	Aggregate* Total
08/29/20	KATHLEEN DRECKTRAH 1854 RODAO DR RIVER FALLS , WI 54022	NOT EMPLOYED RIVER FALLS, WI Occupation NOT EMPLOYED		X	\$50.00	\$50.00
08/30/20	ROBERT WILLIS 308 ATKINSON RD WILMINGTON, DE 19804	RED BRICK REALTY WILMINGTON, DE Occupation GENERAL CONTRACTOR		X	\$50.00	\$50.00
08/30/20	SARA SPRINGER 733 SNYDER ST RICHLAND, WA 99354	Occupation		X	\$20.00	\$20.00
08/30/20	LISBETH VANCE 1032 ALLEWHITE DR RICHLAND, WA 99352	NOT EMPLOYED RICHLAND, WA Occupation NOT EMPLOYED		X	\$950.00	\$1,000.00
08/30/20	KATHY PAYNE 156 RIO SENDA ST UMATILLA , OR 97882	NOT EMPLOYED UMATILLA, OR Occupation NOT EMPLOYED		X	\$100.00	\$100.00
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			\$1,170.00	*See reverse for details.
		Amount from attached pages			\$270.00	
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.					\$1,440.00	

4. Date of Deposit **09/02/20**

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 **09-04-2020**

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.)
(Friends of Justin Raffa)

Deposit Date
09/02/20

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*
08/30/20	BARBARA HILDEBRANT 1106 COTTONWOOD RICHLAND, WA 99354	Occupation		X	\$20.00	\$20.00
08/31/20	KIRK WILLIAMSON 527 N REED ST KENNEWICK, WA 99336	BENTON-FRANKLIN COMMUNITY KENNEWICK, WA Occupation PROGRAM MANAGER		X	\$100.00	\$100.00
08/31/20	KAITLIN WALTERS 4815 KALAHARI DR PASCO, WA 99301	Occupation		X	\$50.00	\$50.00
08/31/20	LISA RICHMOND 6061 LAUREL DR WEST RICHLAND, WA 99353	NOT EMPLOYED WEST RICHLAND, WA Occupation NOT EMPLOYED		X	\$100.00	\$100.00
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