

**CASH RECEIPTS
 MONETARY
 CONTRIBUTIONS**

C3
 (1/02)

THIS SPACE FOR OFFICE USE
 100995995
 09-06-2020

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
09/03/20	Onneta L Adams 1516 Goethals Drive Richland, WA 99354	Retired ,		X	\$50.00	\$50.00
		OccupationRetired				
09/03/20	Anne M Doyle 1929 West 10th Avenue Kennewick, WA 99336	Professional Realty Services International Kennewick, WA		X	\$100.00	\$100.00
		Occupationrealtor				
09/03/20	Susan M McGath 709 Lupine Drive Moses Lake, WA 98837	Retired ,		X	\$200.00	\$200.00
		OccupationRetired				
09/03/20	Shalimar Pedersen 2207 Nut Tree Loop Southeast Olympia, WA 98501			X	\$100.00	\$100.00
		Occupation				
09/03/20	Martha Schilling 924 Bonnie Brae Street Walla Walla, WA 99362	Retired ,		X	\$100.00	\$100.00
		OccupationRetired				
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			\$550.00	*See reverse for details.
		Amount from attached pages			\$1,750.00	
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.					\$2,300.00	

4. Date of Deposit: **09/03/20**

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: **09-06-2020**

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.) Danielle Garbe Reser (Friends Of Danielle Garbe Reser)	Deposit Date 09/03/20
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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*
09/03/20	Teamsters Local 174 14675 Interurban Avenue South Tukwila, WA 98168	Occupation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$1,000.00	\$1,000.00
09/03/20	WA Conservation Voters Action 300 LENORA ST PMB 364 Seattle, WA 98121	Occupation	<input type="checkbox"/>	<input checked="" type="checkbox"/>	\$750.00	\$750.00
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		
		Occupation	<input type="checkbox"/>	<input type="checkbox"/>		