

**CASH RECEIPTS
 MONETARY
 CONTRIBUTIONS**

C3
 (1/02)

THIS SPACE FOR OFFICE USE

100996367
 AMENDS
 100981884
 09-08-2020

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
07/03/20	ALLISON ALTMAN 620 VENEZIA AVE LOS ANGELES, CA 90291	NOT EMPLOYED LOS ANGELES, CA Occupation NOT EMPLOYED	X		\$125.00	\$125.00
07/03/20	CRAIG SUTTON 2034 BLUE AVE RICHLAND, WA 99354	Occupation	X		\$100.00	\$100.00
07/03/20	JERAME CLOUGH 2309 DAVISON AVE RICHLAND, WA 99354	WRPS RICHLAND, WA Occupation HEALTH PHYSICS TECHNICIAN	X		\$25.00	\$250.95
07/03/20	CIGDEM CAPAN 1701 GRAY ST RICHLAND, WA 99352	Occupation	X		\$25.00	\$50.00
07/03/20	TIPHONY DAMES 1440 DALLES MILITARY RD WALLA WALLA, WA 99362	Occupation	X		\$100.00	\$100.00
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			\$375.00	*See reverse for details.
		Amount from attached pages			\$550.00	
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.					\$925.00	

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

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 **09-08-2020**

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Candidate or Committee Name (Do not abbreviate. Use full name.) (Friends of Justin Raffa)	Deposit Date 07/07/20
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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*
07/03/20	BRYCE EATON 2139 CRESTVIEW AVE RICHLAND, WA 99354	Occupation	<input checked="" type="checkbox"/>		\$50.00	\$50.00
07/03/20	TOM MOAK 418 W KENNEWICK AVE KENNEWICK, WA 99336	MID-COLUMBIA LIBRARIES KENNEWICK, WA Occupation LIBRARIAN	<input checked="" type="checkbox"/>		\$200.00	\$400.00
07/03/20	JOSEPH KIMMEL 2563 LAVENDER CT RICHLAND, WA 99354	WASHINGTON RIVER PROTECTION RICHLAND, WA Occupation HEALTH PHYSICS TECHNICIAN	<input checked="" type="checkbox"/>		\$200.00	\$200.00
07/03/20	CHARLES EATON 2309 DAVISON RICHLAND, WA 99352	RETIRED RICHLAND, WA Occupation RETIRED	<input checked="" type="checkbox"/>		\$50.00	\$150.00
07/03/20	ANN EATON 2309 DAVISON RICHLAND, WA 99352	RETIRED RICHLAND, WA Occupation RETIRED	<input checked="" type="checkbox"/>		\$50.00	\$150.00
		Occupation	<input type="checkbox"/>			
		Occupation	<input type="checkbox"/>			
		Occupation	<input type="checkbox"/>			
		Occupation	<input type="checkbox"/>			
		Occupation	<input type="checkbox"/>			
		Occupation	<input type="checkbox"/>			