| FOR CONTRACT OF CONTRACT. | E COMMISSION CAPITOL WAY RM 206 OX 40908 MPIA WA 98504-0908) 753-1111 L FREE 1-877-601-2828 | CASH REC MONETAR CONTRIBU | Y | C3 | 10 AM 10 | ACE FOR OFFICE USE 0996374 ENDS 0982067 -08-2020 | |
|---|---|---------------------------------|---|----------------------------|----------------------|--|--|
| Candidate or Committee | Name (Do not abbreviate. | Use full name.) | | | _ | | |
| (Friends of Jus | tin Raffa) | | | | | | |
| Mailing Address | | | | | | | |
| PO Box 1815 | | | | | | | |
| City | | Zip + 4 | | Office Sought (candidates) | | Election Date | |
| Richland, WA | | 99352 | COUNTY COMMIS | COUNTY COMMISSIONER | | | |
| 1. MONETARY CONTRIE | UTIONS DEPOSITED IN | ACCOUNT | | | | | |
| Date Received | | | | | Amount | Total | |
| a Anonym | OUS | | | | | \$30.00 | |
| | | | | | | | |
| b. Candida | te's personal funds depos | sited in the bank (include of | candidate loans in 1c) | | | | |
| c. Loans, r | notes, security agreements | s. Attach Schedule L | | | | | |
| d Miscella | neous receipts (interest r | efunds auctions other) | Attach explanation | | | | |
| | | | | | | | |
| e. Small co 2. CONTRIBUTIONS OVE | ontributions \$25.00 or less | not itemized and number | r of persons giving | (persons) | | | |
| Date Received Contributor's Name, Address, City, State, Zip | | | tions of more than \$100: [*] er's Name, City and State | PG RE IN | Amount | Aggregate [*] Total | |
|)7/09/20 KATHLEEN | | | · · · | x | | | |
| | ERSON RD | | | | \$10.00 \$10.00 | | |
| SLIPPERY | ROCK, PA 16057 | | | | | | |
| | | Occupation | 1 | | | | |
| 07/09/20 ROSEMARI | E OUIRK | | | х | | | |
| | GRASS LOOP | | | | \$25.00 | \$25.00 | |
| RICHLAND | , WA 99354 | | | | | | |
| | | Occupation | 1 | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | Occupation | 1 | | | | |
| | | | | | | | |
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| | | | | | | | |
| | | Occupation | Occupation | | | | |
| | | • | | | | | |
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| | | | | | | | |
| | | | | | | | |
| | Occupation Sub-total | | | Sub-total | \$35.00 | | |
| Check | | | Amount from | | | | |
| | are attached | | attached pages | | \$0.00 | *See reverse | |
| 3. TOTAL FUNDS RECEI Sum of parts 1 and 2 abo | VED AND DEPOSITED O ove. Enter this amount in | | UNT | | \$35.00 | for details. | |
| 4. Date of Deposit | | | I certify that this report i | s true and comple | ete to the best of m | y knowledge | |
| 07/13/20 | | | Treasurer's Signature | | Date | | |
| 07/13/20 Treasurer's Daytime Telephone No.: (509)554-7208 | | | Skye White | | C | 9-08-2020 | |