

**CASH RECEIPTS
 MONETARY
 CONTRIBUTIONS**

C3
 (1/02)

THIS SPACE FOR OFFICE USE
 101009016
 10-20-2020

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		\$584.00
	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
10/17/20	DANICA GARCIA 225 GREENVIEW DR RICHLAND, WA 99352			X	\$75.00	\$75.00
	Occupation					
10/17/20	CHRISTOPHER MURRAY 1909 DOGWOOD PLACE RICHLAND, WA 99354			X	\$100.00	\$100.00
	Occupation					
10/18/20	GUY JONES 1906 S EDISON ST KENNEWICK, WA 99338	SELF KENNEWICK, WA		X	\$250.00	\$250.00
	Occupation	PHYSICIAN				
10/19/20	CHARITY FINCH 11405 SARA LOOP YAKIMA, WA 98908			X	\$25.00	\$25.00
	Occupation					
	<input type="checkbox"/> Check here if additional pages are attached	Sub-total			\$450.00	*See reverse for details.
		Amount from attached pages			\$0.00	

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.

\$450.00

4. Date of Deposit **10/21/20**

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 **10-20-2020**