

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3

(1/02)

THIS SPACE FOR OFFICE USE

101009831

10-23-2020

Candidate or Committee Name (Do not abbreviate. Use full name.)

(Shir Regev)

Mailing Address

PO Box 306

City Zip + 4 Office Sought (candidates)
 Richland, WA 99352 STATE REPRESENTATIVE

Election Date
 2020

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received		Amount	Total
	a. Anonymous		\$160.00
	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
10/22/20	8TH LEGISLATIVE DISTRICT 1202 Thayer Dr. Richland, WA 99354			X	\$1,000.00	\$1,000.00
	Occupation					
10/21/20	SHANNA MIKAELIAN 510 Jericho Ave NE Renton, WA 98059			X	\$50.00	\$100.00
	Occupation					
10/21/20	WENDY VEYSEY 8510 W 6th Ave Kennewick, WA 99356			X	\$50.00	\$75.00
	Occupation					
10/21/20	MICHAEL WIREMAN 2435 Michael Avenue Richland, WA 99352	Brashear Electric Richland, WA		X	\$25.00	\$159.00
	Occupation	ELECTRICIAN				
10/22/20	BRUCE GLANT 5320 90th SE, 90th AVE Mercer Island, WA 98040	Seattle Iron and Metals Corp. Seattle, WA		X	\$100.00	\$350.00
	Occupation	MARKETING MANAGER				
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			\$1,225.00	*See reverse for details.
		Amount from attached pages			\$35.00	

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.

\$1,260.00

4. Date of Deposit

10/22/20

I certify that this report is true and complete to the best of my knowledge

Treasurer's Signature

Date

Shir Regev

10-23-2020

Treasurer's Daytime Telephone No.:

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

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Candidate or Committee Name (Do not abbreviate. Use full name.)
(**Shir Regev**)

Deposit Date
10/22/20

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*
10/21/20	CHRISTOPHER MURRAY 1909 DOGWOOD PL Richland, WA 99354	Occupation		X	\$35.00	\$74.00
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Page Total \$35.00