

**CASH RECEIPTS  
 MONETARY  
 CONTRIBUTIONS**

**C3**  
 (1/02)

THIS SPACE FOR OFFICE USE  
 100962608  
 04-06-2020

Candidate or Committee Name (Do not abbreviate. Use full name.)  
**(Mark Klicker for State Representative)**

Mailing Address  
**PO Box 3401**

City **Walla Walla, WA** Zip + 4 **99362** Office Sought (candidates) **STATE REPRESENTATIVE** 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 .....		
04/06/20	e. Small contributions \$25.00 or less not itemized and number of persons giving <u>1</u> (persons)	\$10.00	

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
04/06/20	AGRICOUNTING 1644 Plaza Way #116 Walla Walla, WA 99362		X		\$250.00	\$250.00
	Occupation					
04/06/20	GINA HARTZEIM 1504 SE Larch Drive College Place, WA 99324		X		\$50.00	\$50.00
	Occupation					
04/06/20	DAVE HARTZEIM 1504 SE Linda Drive College Place, WA 99324		X		\$50.00	\$50.00
	Occupation					
	<input type="checkbox"/> Check here if additional pages are attached				Sub-total \$360.00 Amount from attached pages \$0.00	*See reverse for details.
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.					\$360.00	

4. Date of Deposit **04/06/20**

Treasurer's Daytime Telephone No.: **(509)525-1664**

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

Treasurer's Signature **Daryl Hopson** Date **04-06-2020**