

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3

(1/02)

THIS SPACE FOR OFFICE USE

100965346

04-27-2020

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

(Mark Klicker for State Representative)

Mailing Address

PO Box 3401

City Zip + 4 Office Sought (candidates)
 Walla Walla, WA 99362 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		
	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
04/27/20	JON BLANC PO Box 144 Dixie, WA 99329		X		\$20.00	\$30.00
		Occupation				
04/27/20	SCOTT KRIVOSHEIN 2961 Kendall Road Walla Walla, WA 99362	Krivoshein Financial Walla Walla, WA	X		\$125.00	\$125.00
		OccupationFINANCIAL ADVISOR				
04/27/20	RENEE KRIVOSHEIN 2961 Kendall Road Walla Walla, WA 99362		X		\$125.00	\$125.00
		OccupationRETIRED				
		Occupation				
		Occupation				
		Occupation				
	<input type="checkbox"/> Check here if additional pages are attached	Sub-total			\$270.00	*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.

\$270.00

4. Date of Deposit

04/27/20

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

Treasurer's Signature

Date

Daryl Hopson

04-27-2020

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