

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3

THIS SPACE FOR OFFICE USE

100967635

05-11-2020

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)	Election Date
Walla Walla, WA	99362	STATE REPRESENTATIVE	2020

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT Date **Amount Total** Received 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 Contributions of more than \$100:* Aggregate* Date R Ε **Amount** Employer's Name, City and State Received Contributor's Name, Address, City, State, Zip Total Х 05/11/20 RAY POHS 825 Country Club Road \$100.00 \$100.00 Walla Walla, WA 99362 Occupation Х FERN POHS 05/11/20 825 Country Club Road \$100.00 \$100.00 Walla Walla, WA 99362 Occupation Occupation Occupation Occupation Sub-total \$200.00 Check here if additional Amount from \$0.00 pages are attached *See reverse attached pages 3. TOTAL FUNDS RECEIVED AND DEPOSITED OR CREDITED TO ACCOUNT for details. \$200.00 Sum of parts 1 and 2 above. Enter this amount in line 1, Schedule A to C4. 4. Date of Deposit I certify that this report is true and complete to the best of my knowledge Treasurer's Signature Date

4. Date of Deposit

05/11/20

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

05-11-2020