

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3

(1/02)

THIS SPACE FOR OFFICE USE

100972766

06-05-2020

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		
06/02/20	e. Small contributions \$25.00 or less not itemized and number of persons giving <u>1</u> (persons)	\$25.00	

2. CONTRIBUTIONS OVER \$25.00

Date Received	Contributor's Name, Address, City, State, Zip	Contributions of more than \$100:*	P R I	G E N	Amount	Aggregate* Total
06/02/20	WILLIAM AKIN 316 SE 9th Street College Place, WA 99324		X		\$50.00	\$50.00
	Occupation					
06/02/20	LINDA AKIN 316 SE 9th Street College Place, WA 99324		X		\$50.00	\$50.00
	Occupation					
06/02/20	DELORES BENNINGTON 984 Frog Hollow Road Walla Walla, WA 99362		X		\$50.00	\$50.00
	Occupation					
06/02/20	DAN DRUMHELLER 1408 Sturm Avenue Walla Walla, WA 99362	Dan R Drumheller Walla Walla, WA	X		\$125.00	\$125.00
	Occupation	SELF EMPLOYED				
06/02/20	ROBERT BERGEVIN FARMING, INC. 814 Home Avenue Walla Walla, WA 99362		X		\$250.00	\$250.00
	Occupation					
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			\$550.00	*See reverse for details.
		Amount from attached pages			\$4,500.00	

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.

\$5,050.00

4. Date of Deposit

06/02/20

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

Treasurer's Signature

Date

Daryl Hopson

06-05-2020

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

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

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

Deposit Date
06/02/20

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 Occupation	P R I	G E N	Amount	Aggregate Total*
06/02/20	DEAN DERBY 1682 Corkrum Road Walla Walla, WA 99362	Corkrum Farm Walla Walla, WA Occupation FARMER	X		\$250.00	\$250.00
06/02/20	SHARI CORKRUM DERBY 1682 Corkrum Road Walla Walla, WA 99362	Corkrum Farm Walla Walla, WA Occupation FARMER	X		\$250.00	\$250.00
06/02/20	MICHAEL MURR 5760 North Bay Road Miami Beach, FL 33140	Michael Murr Miami Beach, FL Occupation SELF EMPLOYED	X		\$1,000.00	\$1,000.00
06/02/20	MICHAEL MURR 5760 North Bay Road Miami Beach, FL 33140	Michael Murr Miami Beach, FL Occupation SELF EMPLOYED		X	\$1,000.00	\$1,000.00
06/02/20	EVA MURR 5760 North Bay Road Miami Beach, FL 33140	, Occupation RETIRED	X		\$1,000.00	\$1,000.00
06/02/20	EVA MURR 5760 North Bay Road Miami Beach, FL 33140	, Occupation RETIRED		X	\$1,000.00	\$1,000.00
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				

Page Total \$4,500.00