| PUBLIC  | DISCLOSURE COMMISSION<br>711 CAPITOL WAY RM 206<br>PO BOX 40908<br>OLYMPIA WA 98504-0908<br>(360) 753-1111<br>TOLL FREE 1-877-601-2828 | TRIBUTIONS              |  | <b>23</b>   | THIS SPACE FOR OFFICE USE<br>100972779<br>06-05-2020 |             |                       |                                 |  |
|---|--|-------------------------|--|---|--|-------------|-----------------------|---------------------------------|--|
| Candidate   | or Committee Name (Do not abbreviate   | e. Use full nam         | e.)                                    |   |  |             |                       |                                 |  |
| (Mark )   | Klicker for State Repres   | sentative               | )                                      |   |  |             |                       |                                 |  |
| Mailing Ad  | dress  |                         |  |   |  |             |                       |                                 |  |
| PO Box  | 3401   |                         |  |   |  |             |                       |                                 |  |
|   |  | Zip + 4<br><b>99362</b> |  |   | Office Sought (candidates)<br>STATE REPRESENTATIVE   |             |                       | e                               |  |
| 1. MONET  | ARY CONTRIBUTIONS DEPOSITED II   | N ACCOUNT               |  |   |  |             |                       |                                 |  |
| Date<br>Received  |  |                         |  |   |  |             | Amount                | Total                           |  |
|   | a. Anonymous   |                         |  |   |  |             |                       | \$25.00                         |  |
| 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   |                         |  |   |  |             |                       |                                 |  |
|   | d. Miscellaneous receipts (interest,   | , refunds, auction      | ons, other). A                         | Attach explanation  |  |             |                       |                                 |  |
|   | e. Small contributions \$25.00 or les  | ss not itemized         | and number                             | of persons giving   | (person:   | s)          |                       |                                 |  |
| 2. CONTR<br>Date<br>Received  | IBUTIONS OVER \$25.00<br>Contributor's Name, Address, Cit  | v State Zin             |  | ions of more than \$100: <sup>*</sup><br>r's Name, City and State | P<br>R   | G<br>E<br>N | Amount                | Aggregate <sup>*</sup><br>Total |  |
| 06/05/20  | SARAH MCCLURE<br>89 E Langdon Road<br>Walla Walla, WA 99362  |                         | Occupation<br>Occupation<br>Occupation |   |  |             | \$50.00               | \$50.00                         |  |
|   |  |                         | Occupation                             |   |  |             |                       |                                 |  |
|   |  | Sub-total               |  |   | otal   | \$50.00     |                       |                                 |  |
| Check here if additional<br>pages are attached                                      |  |                         | Amount from<br>attached pages          |   |  |             | \$0.00                | *See reverse                    |  |
|   | FUNDS RECEIVED AND DEPOSITED arts 1 and 2 above. Enter this amount i   |                         |  | NT  |  |             | \$50.00               | for details.                    |  |
| 4. Date of Deposit  |  |                         | -                                      | I certify that this report is true and complete to the I          |  |             | ete to the best of my | y knowledge                     |  |
| 06/05/20<br>Treasurer's Daytime Telephone No.: (509)525-1664                        |  |                         |  | Treasurer's Signature<br>Daryl Hopson                             |  |             |                       | Date<br>06-05-2020              |  |