

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4(3/97)

PDC OFFICE USE 100835587

06-08-2018

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

JAMES T WILCOX III (C	Committee to E	Elect JT W:	ilcox Surplu	s Account)			
Mailing Address PO Box 747				City McKenna, WA			
					Cs, Parties & Caucus Committees: During t period, did the committee make an independent		
Report Period From (last C-	4) To (er	nd of period)	Final Report?		ense not considered a contribution)		
Covered 05/01/1	8 05	/31/18	Yes No X	supporting or opposing a	state or local candidate?		
RECEIPTS				*See next page	Yes No		
 Previous total cash and in kir (if beginning a new campaign 	nd contributions (From n or calendar year, see	line 8, last C-4) instruction book	slet)		**************************************		
2. Cash received (From line 2,	Schedule A)			······ \$ \$0.0	0		
3. In kind contributions received	0						
4. Total cash and in kind contrib	outions received this p	eriod (Line 2 plus	s 3)		\$0.00		
5. Loan principal repayments m	nade (From line 2, Sch	edule L)		\$0.0	0		
6. Corrections (From line 1 or 3	, Schedule C)		Show + o	r (-) \$0.0	0		
7. Net adjustments this period (\$0.00						
8. Total cash and in kind contrib	\$307,172.36						
9. Total pledge payments due (From line 2, Schedule	B)	\$0.00				
EXPENDITURES		1	7000	1			
Previous total cash and in kir (If beginning a new campaign	nd expenditures (From n or calendar year, see	line 17, last C-4 instruction book) klet)		\$301,255.33		
11. Total cash expenditures (Fro	<u>62</u>						
12. In kind expenditures (goods	00						
13. Total cash and in kind expen	\$367.62						
14. Loan principal repayments m	00						
15. Corrections (From line 2 or 3	00						
16. Net adjustments this period ((-) \$0.00						
17. Total cash and in kind expen	ditures during campai	gn (Combine line	s 10, 13 and 16)		\$301,622.95		
CANDIDATES ONLY							
Won Lost I	\$5,549.41						
Primary election					···· \$0.00		
Treasurer's Daytime Telephone No.:					·		
20. Balance (Surplus or deficit) (Line 18 minus line 19)					\$5,549.41		
CERTIFICATION: I certify that the information herein and on accompanying schedules and attachments is true and correct to the best of my knowledge.							
Candidate's Signature	Candidate's Signature Date Treasurer's Signature			ure	Date		
AMES WILCOX III 06/08/18 Jason Michau			ud	06/08/18			

CASH RECEIPTS AND EXPENDITURE

SCHEDULE to C4

Candidate or Co	Candidate or Committee Name (Do not abbreviate. Use full name.)						Report Date	
JAMES T WII	COX III (Commit	tee to Elect JT W	lilcox	Sur	plus Account)	05/01/18	05/31/18	
1. CASH RECE	EIPTS (Contributions) which	h have been reported on C3	B. List each	h depo	osit made since last C4 r	eport was submitte	d.	
Date of deposit	Amount	Date of deposit	Amo	ount	Date of deposit	Amount	Total deposits	
2. TOTAL CAS	H RECEIPTS			<u> </u>	Enter als	so on line 2 of C4	\$ \$0.00	
CODES FOR CLASSIFYING EXPENDITURES: If one of the following codes is used to describe an expenditure, no other descreeded. The exceptions are: If expenditures are in-kind or earmarked contributions to a candidate or committee or independent expenditures that benefit committee, identify the candidate or committee in the Description block; When reporting payments to vendors for travel expenses, identify the traveler and travel purpose in the Description block; If expenditures are made directly or indirectly to compensate a person or entity for soliciting signatures on a statewide initial petition, use code "V" and provide the following information on an attached sheet: name and address of each person/e amount paid each during the reporting period, and cumulative total paid all persons to date to gather signatures. CODE DEFINITIONS ON NEXT PAGE C - Contributions (monetary, in-kind & transfers) I - Independent Expenditures S - Surveys and Polls L - Literature, Brochures, Printing B - Broadcast Advertising (Radio, TV) T - Travel, Accommodat N - Newspaper and Periodical Advertising O - Other Advertising (yard signs, buttons, etc.) V - Voter Signature Gathering C - General Operation a						ditures that benefit a escription block; an a statewide initiation of each person/entignatures. Stage, Mailing Permoveys and Polls idraising Event Expert Expert Accommodation agement/Consultinges, Salaries, Ben	a candidate or d we or referendum tity compensated, nits benses ns, Meals ng Services efits	
amoui b) Itemiz c) For ea	iditures of \$50 or less, incluint column on the first line be each expenditure of more ach payment to a candidate of receipts/invoices supports.	e than \$50 by date paid, nam , campaign worker, PR firm,	ne and add	lress c	of vendor, code/description	on, and amount. ny, attach a list of o		
Date Paid		d Address)	Code		and/or Descrip		Amount	
N/A	Expenses of	\$50 or less	N/A		N/A			
05/20/18	ENZIAN INN 590 Highway 2 Leavenworth, WA	98826		Lod	ging		\$367.62	

Date Paid	(Name and Address)	Code	and/or Description	Amount
N/A	Expenses of \$50 or less	N/A	N/A	
05/20/18	ENZIAN INN 590 Highway 2 Leavenworth, WA 98826		Lodging	\$367.62
			Total from attached page	\$ \$0.00

Total from attached pages \$

\$0.00

Enter also on line 11 of C4 \$

\$367.62