

EXPENDITURES CONTINUATION SHEET (Attachment to Schedule A)

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

Report Date

CHANDLER BRUCE Q SURPLUS ACCT

07/31/2008

Date Paid	Vendor or Recipient (Name and Address)	Code	Purpose of Expense and/or Description	Amount
09/10/2007	POSTMASTER POST OFFICE ZILLAH WA 98953		POSTAGE	\$ 123.00
09/13/2007	BOY SCOUTS OF AMERICA 10 N 10TH AVE YAKIMA WA 98902		EVENT	75.00

SCHEDULE
to C4**A**
(11/93)**CASH RECEIPTS AND EXPENDITURE**Candidate or Committee Name (Do not abbreviate. Use full name.)
CHANDLER BRUCE Q SURPLUS ACCTReport Date
07/31/2008

1. CASH RECEIPTS (Contributions) which have been reported on C3. List each deposit made since last C4 report was submitted.

Date of deposit	Amount	Date of deposit	Amount	Date of deposit	Amount	Total deposits
						0.00

2. TOTAL CASH RECEIPTS

Enter also 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 description is generally needed.

The exceptions are:

- 1) If expenditures are in-kind or earmarked contributions to a candidate or committee or independent expenditures that benefit a candidate or committee, identify the candidate or committee in the Description block;
- 2) When reporting payments to vendors for travel expenses, identify the traveler and travel purpose in the Description block; and
- 3) If expenditures are made directly or indirectly to compensate a person or entity for soliciting signatures on a statewide initiative or referendum petition, use code "V" and provide the following information on an attached sheet: name and address of each person/entity compensated, 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
 L - Literature, Brochures, Printing
 B - Broadcast Advertising (Radio, TV)
 N - Newspaper and Periodical Advertising
 O - Other Advertising (yard signs, buttons, etc.)
 V - Voter Signature Gathering

P - Postage, Mailing Permits
 S - Surveys and Polls
 F - Fundraising Event Expenses
 T - Travel, Accommodations, Meals
 M - Management/Consulting Services
 W - Wages, Salaries, Benefits
 G - General Operation and Overhead

3. EXPENDITURES

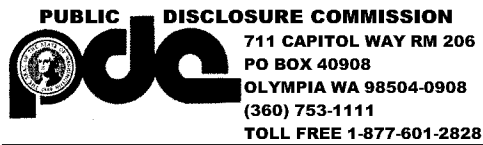
- a) Expenditures of \$50 or less, including those from petty cash, need not be itemized. Add up these expenditures and show the total in the amount column on the first line below.
- b) Itemize each expenditure of more than \$50 by date paid, name and address of vendor, code/description, and amount.
- c) For each payment to a candidate, campaign worker, PR firm, advertising agency or credit card company, attach a list of detailed expenses or copies of receipts/invoices supporting the payment.

Date Paid	Vendor or Recipient (Name and Address)	Code	Purpose of Expense and/or Description	Amount
09/01/2007	EXPENSES OF \$50 OR LESS	A		\$ 0.00
09/30/2007	CHANDLER BRUCE Q P.O. BOX 1108 ZILLAH WA 98953		FUEL	347.23
09/30/2007	CHANDLER BRUCE Q P.O. BOX 1108 ZILLAH WA 98953		MEALS	199.74
09/04/2007	MARRIOTT CITY CENTER 220 S STATE STREET SALT LAKE CITY UT 84111		HOTEL IN SALT LAKE CITY	101.44
09/19/2007	CENTRAL WASHINGTON STATE FAIR 1301 S FAIR AVE YAKIMA WA 98901		EVENT FEE	60.00
09/04/2007	THE US GRANT A LUXURY 326 BROADWAY SAN DIEGO CA 92101		HOTEL IN SAN DIEGO	144.84
09/05/2007	SEATTLE NAVY LEAGUE 2200 ALASKAN WAY SEATTLE WA 98121		EVENT	65.00

Total from attached pages \$ 198.00

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ 1,116.25



SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4 (3/97)	PDC OFFICE USE
	AMENDMENT

Candidate or Committee Name (Do not abbreviate. Include full name)				07/31/2008
CHANDLER BRUCE Q SURPLUS ACCT				
Mailing Address		City		
P.O. BOX 1108		ZILLAH		
Zip + 4 98953	Office Sought (Candidates) STATE REPRESENTATIVE		2008	*For PACs, Parties & Caucus Committees: During this report period, did the committee make an independent expenditure (i.e., an expense not considered a contribution) supporting or opposing a state or local candidate?
Report Period Covered	From (last C-4) 09/01/2007	To (end of period) 09/30/2007	Final Report? Yes No X	

RECEIPTS		*See next page	Yes	No	X
1. Previous total cash and in kind contributions (From line 8, last C-4) (if beginning a new campaign or calendar year, see instruction booklet)					
		\$		30,715.93	
2. Cash received (From line 2, Schedule A)		\$		0.00	
3. In kind contributions received (From line 1, Schedule B)				0.00	
4. Total cash and in kind contributions received this period (Line 2 plus 3)				0.00	
5. Loan principal repayments made (From line 2, Schedule L)	(0.00)		
6. Corrections (From line 1 or 3, Schedule C) Show + or (-)	+	0.00			
7. Net adjustments this period (Combine line 5 & 6) Show + or (-)	+			0.00	
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)				30,715.93	
9. Total pledge payments due (From line 2, Schedule B)		0.00			

EXPENDITURES				
10. Previous total cash and in kind expenditures (From line 17, last C-4) (If beginning a new campaign or calendar year, see instruction booklet)				5,781.85
11. Total cash expenditures (From line 4, Schedule A)			1,116.25	
12. In kind expenditures (goods & services) (From line 1, Schedule B)			0.00	
13. Total cash and in kind expenditures made this period (Line 11 plus line 12)				1,116.25
14. Loan principal repayments made (From line 2, Schedule L)	(0.00)	
15. Corrections (From line 2 or 3, Schedule C) Show + or (-)	+	0.00		
16. Net adjustments this period (Combine lines 14 & 15) Show + or (-)	+			0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)				6,898.10

CANDIDATES ONLY				CASH SUMMARY	
Won	Lost	Unopposed	Name not on ballot		
Primary election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18. Cash on hand (Line 8 minus line 17) [Line 18 should equal your bank account balance(s) plus your petty cash balance.]
General election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	19. Liabilities: (Sum of loans and debts owed)
Treasurer's Daytime Telephone No.: (509) 575-1040				20. Balance (Surplus or deficit) (Line 18 minus line 19)	

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 BRUCE CHANDLER	Date	Treasurer's Signature WENTZ ANGELA	Date