100297823

EXPENDITURES CONTINUATION SHEET (Attachment to Schedule A)

Page 1

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

MCKENNA ROBERT M SURPLUS ACCT

03/02/2009

Date Paid	Vendor or Recipie (Name and Addres		Code	Purpose of Expense and/or Description	Amount
02/03/2009	KNIGHTS OF COLUMBUS 141 - 156TH AVE SE	A 98007	W	MEMBERSHIP	\$ 40.00
02/04/2009	COSTCO - TUMWATER 5500 LITTLEROCK RD TUMWATER W	A 98512	F	FOOD COST	43.24
02/19/2009	GAUL ROBERT R 121 ROSE MARIE DRIVE CHEHALIS W	A 98532	G	REIMB SEE DETAIL BELOW	61.87
02/19/2009	WAGNER'S EUROPEAN BAK 1013 CAPITOL WAY S OLYMPIA W	ERY A 98501	F	FOOD COST - 46.32	0.00
02/19/2009	SAFEWAY - CENTRALIA 1129 HARRISON AVE CENTRALIA W	A 98531	F	FOOD COST - 9.48	0.00
02/19/2009	SAFEWAY - CENTRALIA 1129 HARRISON AVE CENTRALIA W	A 98531	F	FOOD COST - 6.07	0.00

Page Total \$ 145.11

CASH RECEIPTS AND EXPENDITURE

SCHEDULE to C4



Report Date

MCKENNA ROBERT M SURPLUS ACCT

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

03/02/2009

1.	CASH RECEIPTS	(Contributions) which have to	peen reported on C3.	List each deposit made since la	st C4 report was submitted.

Date	e of deposit	Amount	Date of deposit	Amount	Date of deposit	Amount	То	tal deposits
		0.00	null	0.00		0.00		
		0.00	null	0.00		0.00		
		0.00	null	0.00				
2.	TOTAL CASH RECEIPTS				Enter a	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:

- If expenditures are in-kind or earmarked contributions to a candidate or committee or independent expenditures that benefit a candidate or committee, 1) 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; and 2)
- If expenditures are made directly or indirectly to compensate a person or entity for soliciting signatures on a statewide initiative or referendum petition, 3) 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..
- Itemize each expenditure of more than \$50 by date paid, name and address of vendor, code/description, and amount.
- 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.

	Vendor or Recipient		Purpose of Expense			
Date Paid	(Name and Address)	Code	and/or Description	Amount		
02/28/2009	EXPENSES OF \$50 OR LESS			\$ 0.00		
02/25/2009	KING CTY SEXUAL ASSAULT RESOURCE PO BOX 300 RENTON WA 98057	CTR.C	DONATION	100.00		
02/03/2009	BELLEVUE ROTARY FOUNDATION PO BOX 523 BELLEVUE WA 98009	C	DONATION	100.00		
02/18/2009	LEMON GRASS RESTAURANT 212 - 4TH AVE W OLYMPIA WA 98501	F	FOOD COST	34.70		
02/23/2009	ANTHONY'S HEARTHFIRE - OLYMPIA 1675 MARINE DR NE OLYMPIA WA 98501	F	FOOD COST	15.47		
02/19/2009	ROBERTO'S 7619 SE 27TH MERCER ISLAND WA 98040	F	FOOD COST	12.21		
02/09/2009	CITY PICNICS PO BOX 2534 OLYMPIA WA 98507	F	FOOD COST	200.00		
			Total from attached names	\$ 145.11		

Total from attached pages

Enter also on line 11 of C4

607.49



SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4(3/97)

PDC OFFICE USE

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

MCKENNA ROBERT M SURPLUS ACCT								03/02/2009		
Mailing Address										
Zip + 4 980066318		Committees: Duake an independer								
Report Period	From (last C-4)	To (end	d of period)	Final Report?	<u>expe</u>	nditure (i.e., an expense	not con	sidered a contribution		
Covered	02/01/2009	02/28/	Yes No X	supporting or opposing a state or local candidate?						
RECEIPTS				'	∸ *See	next page	Yes	No X		
	otal cash and in kind contribung a new campaign or calenc			et)			\$	29,591.16		
2. Cash rece	_									
3. In kind co	ntributions received (From lin	ne 1, Schedule	В)			0.00				
4. Total cash	n and in kind contributions red	ceived this peri	od (Line 2 plus	; 3)				0.00		
5. Loan princ	cipal repayments made (Fron	n line 2, Schedi	ule L)		(0.00)			
6. Correction	ns (From line 1 or 3, Schedul	e C)		Show + or	(-)	+ 0.00	-			
7. Net adjus	tments this period (Combine	line 5 & 6)				Show + or (-)	+	0.00		
8. Total cash	n and in kind contributions du	ıring campaign	(Combine line	s 1, 4 & 7)				29,591.16		
9. Total pled	ge payments due (From line	2, Schedule B)		0.00						
EXPENDITURE	S									
10. Previous t (If beginni	otal cash and in kind expend ing a new campaign or calend	litures (From lin dar year, see in	ne 17, last C-4) struction book	let)				15,199.14		
11. Total cash	n expenditures (From line 4, §	Schedule A)				607.49				
12. In kind ex	penditures (goods & services	s) (From line 1,	Schedule B)			0.00	-			
13. Total cash	n and in kind expenditures ma	ade this period	(Line 11 plus li	ine 12)				607.49		
14. Loan princ	cipal repayments made (Fron	n line 2, Schedi	ule L)		(0.00)			
15. Correction	ns (From line 2 or 3, Schedul	e C)		Show + or	(-)	+ 0.00	<u>-</u>			
16. Net adjustments this period (Combine lines 14 & 15)								0.00		
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)								15,806.63		
CANDIDATES ONLY Name not Won Lost Unopposed on ballot 18. Cash on hand (Line 8 minus line 17)								13,784.53		
Primary election								0.00)	
	ytime Telephone No.:					,				
20. Balance (Surplus or deficit) (Line 18 minus line 19)								13,784.53		
CERTIFICATIO	N: I certify that the information	herein and on ac	companying scl	nedules and attachments	is true ar	nd correct to the best of my l	knowledg	е.		
Candidate's Sigr		Date		Treasurer's Signatu				Date		
MCKENNA ROE	3		HIME NORM							