

EXPENDITURES CONTINUATION SHEET (Attachment to Schedule A)

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

Report Date

MCKENNA ROBERT M SURPLUS ACCT

04/05/2009

Date Paid	Vendor or Recipient (Name and Address)	Code	Purpose of Expense and/or Description	Amount
03/24/2009	CHACES PANCAKE CORRAL 1606 BELLEVUE WAY SE BELLEVUE WA 98004	F	FOOD COST	\$ 14.66
03/10/2009	AMPCO PARKING 777 - 108TH AVE NE BELLEVUE WA 98004	T	PARKING	10.00
03/31/2009	BURGERVILLE USA - CENTRALIA 818 HARRISON AVE CENTRALIA WA 98531	F	FOOD COST	8.93
03/25/2009	AMPCO - MEYDENBAUER 1100 - 6TH AVE NE BELLEVUE WA 98004	T	PARKING	8.00
03/25/2009	METROPOLITAN GRILL - SEATTLE 820 - 2ND AVE SEATTLE WA 98104	F	FOOD COST	65.66
03/27/2009	TULIO RISTORANTE 1100 - 5TH AVE SEATTLE WA 98101	F	FOOD COST	59.00
03/23/2009	THE FEDERALIST SOCIETY 1015 - 18TH STREET NW - STE 425 WASHINGTON DC 20036	O	ENTRY FEE	60.00

Page Total \$ 226.25

SCHEDULE to C4

A

(11/93)

CASH RECEIPTS AND EXPENDITURE

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

Report Date

MCKENNA ROBERT M SURPLUS ACCT

04/05/2009

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

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	C - Contributions (monetary, in-kind & transfers)	P - Postage, Mailing Permits
DEFINITIONS	I - Independent Expenditures	S - Surveys and Polls
ON NEXT PAGE	L - Literature, Brochures, Printing	F - Fundraising Event Expenses
	B - Broadcast Advertising (Radio, TV)	T - Travel, Accommodations, Meals
	N - Newspaper and Periodical Advertising	M - Management/Consulting Services
	O - Other Advertising (yard signs, buttons, etc.)	W - Wages, Salaries, Benefits
	V - Voter Signature Gathering	G - General Operation and Overhead

3. EXPENDITURES

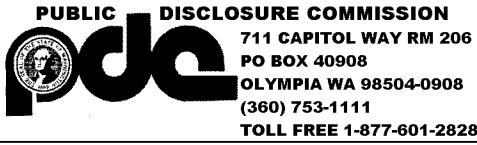
- a) Expenditures of \$50 or less, including those from petty cash, need not be itemized. Add up these expenditures and show the total in the amount column on the first line below..
- b) Itemize each expenditure of more than \$50 by date paid, name and address of vendor, code/description, and amount.
- 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
03/01/2009	EXPENSES OF \$50 OR LESS	A		\$ 0.00
03/26/2009	CHIEF SEATTLE COUNCIL PO BOX 440408 SEATTLE WA 98114	C	DONATION	250.00
03/02/2009	CHIEF SEATTLE COUNCIL PO BOX 440408 SEATTLE WA 98114	C	DONATION	100.00
03/16/2009	BUDD BAY CAFE 525 N COLUMBIA ST OLYMPIA WA 98501	F	FOOD COST	31.56
03/02/2009	GALANGA THAI CUISINE 1129 BROADWAY TACOMA WA 98402	F	FOOD COST	30.46
03/23/2009	WAGNER'S EUROPEAN BAKERY 1013 CAPITOL WAY S OLYMPIA WA 98501	F	FOOD COST	19.13
03/13/2009	HYATT-SEATTLE PARKING 721 PINE ST SEATTLE WA 98101	T	PARKING	18.00

Total from attached pages \$ 226.25

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ 675.40



SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4 (3/97)	PDC OFFICE USE
	04/05/2009

Candidate or Committee Name (Do not abbreviate. Include full name)
MCKENNA ROBERT M SURPLUS ACCT

Mailing Address: 6021 - 118TH SE
City: BELLEVUE

Zip + 4: 98006
Office Sought (Candidates): ATTORNEY GENERAL
Election Date: 2004

***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)	To (end of period)	Final Report?
	03/01/2009	03/31/2009	Yes No X

RECEIPTS

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)		\$ 29,591.16
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)		29,591.16
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)		15,806.63
11. Total cash expenditures (From line 4, Schedule A)	675.40	
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)		675.40
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)		16,482.03

CANDIDATES ONLY

	Won	Lost	Unopposed	Name not on ballot
Primary election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Treasurer's Daytime Telephone No.:
(425) 889-2400

CASH SUMMARY

18. Cash on hand (Line 8 minus line 17) [Line 18 should equal your bank account balance(s) plus your petty cash balance.]	13,109.13
19. Liabilities: (Sum of loans and debts owed)	(0.00)
20. Balance (Surplus or deficit) (Line 18 minus line 19)	13,109.13

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	Date	Treasurer's Signature	Date
		HIME NORMAN	