

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4
(3/97)

PDC OFFICE USE
100309169

06-05-2009

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

McKenna-AG - Surplus

Mailing Address

6021 - 118th SE

City

Bellevue, WA

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)

05/01/09

To (end of period)

05/31/09

Final Report?

Yes No X

RECEIPTS

*See next page

Yes

No

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)		18,447.46
11. Total cash expenditures (From line 4, Schedule A)		1,130.27
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)		1,130.27
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)		19,577.73

CANDIDATES ONLY

Name not

	Won	Lost	Unopposed	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)	10,013.43
[Line 18 should equal your bank account balance(s) plus your petty cash balance.]	
19. Liabilities: (Sum of loans and debts owed)	0.00
20. Balance (Surplus or deficit) (Line 18 minus line 19)	10,013.43

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

Norman Hime

CASH RECEIPTS AND EXPENDITURE

SCHEDULE
to C4

A

(11/93)

2

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

Report Date

McKenna-AG - Surplus

05/01/09

05/31/09

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
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
N/A	Expenses of \$50 or less	N/A	N/A	
05/10/09	Bellevue Rotary Foundation PO Box 523 Bellevue, WA 98009	C	Donation	250.00
05/08/09	BCC Foundation 3000 Landerholm Circle Bellevue, WA 98007	C	Donation	200.00
05/07/09	Youth Eastside Services 999 NE 164th Ave Bellevue, WA 98008	C	Donation	150.00
05/13/09	Display Gifts Inc 1618 Sullivan Ave - Ste 520 Daly City, CA 94015	G	Office Supplies	60.95
05/15/09	Bennett's Pure Food Bistro 7650 SE 27th St Mercer Island, WA 98040	F	Food Cost	41.10
05/05/09	The Aspen Institute 2010 Carmichael Rd Queenstown, MD 21658	O	Cancellation Fee	40.00

Total from attached pages \$ 388.22

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ 1,130.27

EXPENDITURES CONTINUATION SHEET (Attachment to Schedule A)

Page 3

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

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McKenna-AG - Surplus

05/01/09

05/31/09

Date Paid	Vendor or Recipient (Name and Address)	Code	Purpose of Expense and/or Description	Amount
05/21/09	Westin Seattle FB 1900 Fifth Ave Seattle, WA 98121	F	Food Cost	33.33
05/01/09	Budd Bay Cafe 525 N Columbia St Olympia, WA 98501	F	Food Cost	24.89
05/17/09	Mariners Care PO Box 4100 Seattle, WA 98194	C	Donation	250.00
05/04/09	Chief Seattle Council PO Box 440408 Seattle, WA 98114	C	Donation	80.00

Page Total \$ 388.22