

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4(3/97)

PDC OFFICE USE

100349115

03-09-2010

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

eagan Dunn Sur	plus Ac	count				_	
Mailing Address O Box 40417					City Bellevue, WA		
		Office Squabt (Cana	lidataa)	Florier Date			
Zip + 4 8015-4417		Office Sought (Cano	iidates)	Election Date 11/05/13	*For PACs, Parties & Cau this report period, did the com	mittee mak	ke an <u>independent</u>
	rom (last C-4	1) To (er	nd of period)	Final Report?	expenditure (i.e., an expense		
Covered	02/01/10	02	/28/10	Yes No X	supporting or opposing a state	or local ca	<u>andidate</u> ?
RECEIPTS					*See next page	Yes	No
Previous total ca (if beginning a ne	sh and in kir w campaign	nd contributions (From n or calendar year, see	line 8, last C-4 e instruction boo) oklet)		\$	100,000.01
2. Cash received (F	From line 2, §	Schedule A)			··· \$ 2.60		
3. In kind contribution	ons received	(From line 1, Schedu	ile B)		0.00		
4. Total cash and ir	kind contrib	outions received this p	eriod (Line 2 plu	us 3)			2.60
5. Loan principal re	payments m	ade (From line 2, Sch	edule L)		0.00		
6. Corrections (From	m 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	n kind contrib	outions during campai	gn (Combine lin	es 1, 4 & 7)			100,002.61
9. Total pledge pay	ments due (I	From line 2, Schedule	В)	0.00			•
EXPENDITURES			•				
10. Previous total ca (If beginning a ne	sh and in kir ew campaigr	nd expenditures (From n or calendar year, see	l line 17, last C- e instruction boo	4) oklet)			7,121.61
11. Total cash exper	nditures (Fro	m line 4, Schedule A)			923.41		
12. In kind expenditu	res (goods &	& services) (From line	1, Schedule B)		0.00		
13. Total cash and ir	n kind expend	ditures made this peri	od (Line 11 plus	s line 12)			923.41
14. Loan principal re	payments m	ade (From line 2, Sch	edule L)		0.00		
15. Corrections (From	n line 2 or 3	, Schedule C)		Show + or (0.00		
16. Net adjustments	this period (Combine lines 14 & 1	5)		Show + or (-)		0.00
17. Total cash and ir	n kind expend	ditures during campai	gn (Combine lin	nes 10, 13 and 16)			8,045.02
CANDIDATES ONLY		Name not	CASH SUMM	ARY			
Won	Lost (Jnopposed on ballot			17)		91,957.59
Primary election			Line to should	requal your bank account bala	rice(s) plus your petty cash balance.j		
General election						0.00	
Treasurer's Daytime 1	elephone N	lo.:	20. Balance (S	Surplus or deficit) (Line	18 minus line 19)		91,957.59
CERTIFICATION: Local	tify that the int	formation berein and on	accompanying sol	hadulas and attachments	s true and correct to the best of my l	knowledge	
Candidate's Signature	шу шасше т	Date	accompanying scr	Treasurer's Signatur	-	Trowneage.	Date
						(03/09/10

CASH RECEIPTS AND EXPENDITURE

SCHEDULE to C4

(11/93)

2

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

Report Date

					02/01/10	02/28/10	
1. CASH RECEIPTS (Cor	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	
02/28/2010	2.60						
2. TOTAL CASH RECEIPT	rs			Enter al	so on line 2 of C4	\$ 2	6

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 <u>in-kind or earmarked contributions</u> to a candidate or committee or <u>independent expenditures</u> 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	130.61
02/02/10	Thurston County Republican 975 Carpenter Road NE Lacey, WA 98516-5560	С	Disposal of Surplus Funds	100.00
02/02/10	Shilo Inn 707 Ocean Shores Boulevard NW Ocean Shores, WA 98569-9345	Т	Lodging	313.22
02/02/10	Mercato 111 Market Street NE Olympia, WA 98501-1008	Т	Travel - Meals	53.11
02/02/10	The Homeport Restaurant 857 Point Brown Avenue NW Ocean Shores, WA 98569-9682	Т	Travel - Meals	76.60
02/20/10	North Country Pub 15 S Main Omak, WA 98841	T	Meeting/Food Expense	55.70
02/20/10	Shell - BJ's Entiat 14579 Hwy 97A Entiat, WA 98822	Т	Gas	56.58
-			Total from attached pages	f 107.50

Total from attached pages \$ 137.59

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4

923.41

EXPENDITURES CONTINUATION SHEET (Attachment to Schedule A)

Page 3

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

Report Date

02/01/10

02/28/10

Date Paid	Vendor or Recipient (Name and Address)	Code	Purpose of Expense and/or Description	Amount
02/20/10	Cottage Cafe 911 E 1st Street Cle Elum, WA 98922-1341	Т	Meeting/Expense	65.31
02/20/10	Cedar Rapids Grocery 18015 SE Rn Mp Vly Road Renton, WA 98058-8302	Т	Gas	72.28
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