PUBLIC DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 TOLL FREE 1-877-601-2828

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4(3/97)

PDC OFFICE USE 100807559 AMENDS 100747546 01-09-2018

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

JOSEPH F FAIN (Joe Fa	in Surplus Fu	ınds Accou	nt)					
Mailing Address PO Box 7809					City Covington,	WA		
Zip + 4 98042	Office Sought (Cand		Election 2018	on Date	*For PACs, Part			
Report Period From (last C-4	1) To (er	d of period)	Final	Report?	expenditure (i.e., a	an expense	not consid	dered a contribution)
Covered 01/01/1'	7 01	/31/17	Yes	No X	supporting or oppos	sing a state	or local ca	andidate?
RECEIPTS			'		*See next page		Yes	No
Previous total cash and in kir (if beginning a new campaign	nd contributions (From n or calendar year, see	line 8, last C-4) instruction bool	klet)			·····	\$	\$73,790.90
2. Cash received (From line 2, S	Schedule A)				··· _ \$	\$0.00		
3. In kind contributions received	I (From line 1, Schedu	le B)				\$0.00		
4. Total cash and in kind contrib	outions received this p	eriod (Line 2 plu	ıs 3)					\$0.00
5. Loan principal repayments m						\$0.00		
6. Corrections (From line 1 or 3.	, Schedule C)			Show + or (-)	\$0.00		
7. Net adjustments this period (Combine line 5 & 6)				Shov	w + or (-) _		\$0.00
8. Total cash and in kind contrib	outions during campaig	gn (Combine line	es 1, 4 & 7)				\$73,790.90
9. Total pledge payments due (l	From line 2, Schedule	B)		\$0.00				
EXPENDITURES								
Previous total cash and in kir (If beginning a new campaigr	nd expenditures (From n or calendar year, see	line 17, last C-4 e instruction boo	1) klet)					\$0.00
11. Total cash expenditures (Fro	m line 4, Schedule A)				···\$	185.72		
12. In kind expenditures (goods 8	& services) (From line	1, Schedule B).				\$0.00		
13. Total cash and in kind expend	ditures made this perio	od (Line 11 plus	line 12)					\$185.72
14. Loan principal repayments m	ade (From line 2, Sch	edule 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	5)			Show	w + or (-) _		\$0.00
17. Total cash and in kind expen-	ditures during campai	gn (Combine line	es 10, 13 a	ınd 16)				\$185.72
CANDIDATES ONLY	Name not	CASH SUMMA	ARY	-				\$107.12
	Jnopposed on ballot				17)nce(s) plus your petty cash			\$73,605.18
Primary election		19. Liabilities:	(Sum of lo	ans and deb	ots owed)			\$0.00
Treasurer's Daytime Telephone N (253)988-2455	lo.:	20. Balance (Se	urplus or d	eficit) (Line	18 minus line 19)			\$73,605.18
CERTIFICATION: I certify that the int	formation beroin and an	accompanying sob	edules and	attachmonto i	s true and correct to the	heet of my	nowledge	<u> </u>
Candidate's Signature	Date	accompanying SCN		er's Signatur		s nest of filly K	nowieuge.	Date
JOSEPH FAIN	01,	/09/18	Tom Pe	erry			(01/09/18

CASH RECEIPTS AND EXPENDITURE

SCHEDULE to C4

F	1	
(11	/93)	

2

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

Report Date

JOSEPH F FAIN (Joe Fain Su	plus Funds	Account)		01/01/17	01/31/17
1. CASH RECEIPTS ((Contributions) whic	h have been reporte	ed on C3. List each dep	osit made since last C4	report was submitte	ed.
Date of deposit	Amount	Date of deposit	Amount	Date of deposit	Amount	Total deposits
2. TOTAL CASH REC	EIPTS			Enter a	lso 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 <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

Enter also on line 11 of C4

\$185.72

- F Fundraising Event Expenses
- T Travel, Accommodations, Meals M Management/Consulting Services
- W Wages, Salaries, Benefits
- G General Operation and Overhead

3. EXPENDITURES

4. TOTAL CASH 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	
01/03/17	YOUMAIL, INC. 2441 W La Palma Ave Anaheim, CA 92801		Cell Vmail	\$29.99
01/10/17	ADOBE SYSTEMS INC 345 PARK AVE SAN JOSE, CA 95110		Software	\$10.85
01/18/17	JOSEPH F FAIN PO Box 7809 Covington, WA 98042		Reimburse cell charges	\$42.00
01/23/17	JOSEPH F FAIN PO Box 7809 Covington, WA 98042		Reimburse Citrix client management software	\$90.94
01/26/17	UBERCONFERENCE 100 California St San Francisco, WA 94111		Software	\$11.94
			Total from attached pages	\$ \$0.00