

## SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

**C4**(3/97)

PDC OFFICE USE 100821176

03-12-2018

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

| MEGAN N RICHIE (Mega<br>Mailing Address  | n Richie Surp                                       | lus Accoun  | ıt)             |   | City                                 |                     |               |
|--|---|---|-----------------|---|--------------------------------------|---------------------|---------------|
| 1915 Washington Way  |   |   |                 |   | Longview, WA                         |                     |               |
| Zip + 4         Office Sought (Cancellance)           98632         CITY COUNCIL |   | ,   |                 | *For PACs, Parties & Caucusthis report period, did the committe |                                      |                     |               |
| Report Period From (last 0   | C-4) To (e  | nd of period)   | Final Re        | port?   | expenditure (i.e., an expens         |                     |               |
| Covered 02/01/   | 18 02   | 2/28/18   | Yes N           | lo X  | supporting or opposing a state       | <u>e or local c</u> | andidate?     |
| RECEIPTS   |   |   |                 |   | *See next page                       | Yes                 | No            |
| Previous total cash and in I     (if beginning a new campai                      | kind contributions (From gn or calendar year, se    | n line 8, last C-4)<br>e instruction boo  | )<br>oklet)     |   |                                      | \$                  | \$1,203.68    |
| 2. Cash received (From line 2  | , Schedule A)                                       |   |                 |   | ···· \$ \$0.00                       | -                   |               |
| 3. In kind contributions receive   | ed (From line 1, Schedu                             | ule B)  |                 |   | \$0.00                               | -                   |               |
| 4. Total cash and in kind cont   | ributions received this p                           | period (Line 2 plu  | us 3)           |   |                                      |                     | \$0.00        |
| 5. Loan principal repayments   | made (From line 2, Sch                              | nedule L)   |                 |   | \$0.00                               | <u>-</u>            |               |
| 6. Corrections (From line 1 or   | 3, Schedule C)                                      |   | S               | now + or (  | \$0.00                               | <u>-</u>            |               |
| 7. Net adjustments this period   | 7. Net adjustments this period (Combine line 5 & 6) |   |                 |   |                                      |                     | \$0.00        |
| 8. Total cash and in kind cont   | ributions during campai                             | gn (Combine line  | es 1, 4 & 7) .  |   |                                      |                     | \$1,203.68    |
| Total pledge payments due  | (From line 2, Schedule                              | e B)  | ę               | 0.00  |                                      |                     |               |
| EXPENDITURES   |   | l   |                 |   |                                      |                     |               |
| <ol><li>Previous total cash and in I<br/>(If beginning a new campai</li></ol>    | kind expenditures (Fron<br>gn or calendar year, se  | n line 17, last C-4<br>e instruction boo  | 4)<br>oklet)    |   |                                      |                     | \$0.00        |
| 11. Total cash expenditures (F   | rom line 4, Schedule A)                             |   |                 |   | ··· \$100.74                         | <u> </u>            |               |
| 12. In kind expenditures (goods & services) (From line 1, Schedule B)            |   |   |                 |   | 1                                    |                     |               |
| 13. Total cash and in kind expenditures made this period (Line 11 plus line 12)  |   |   |                 |   |                                      | \$100.74            |               |
| 14. Loan principal repayments made (From line 2, Schedule L)                     |   |   |                 |   | <u>!</u>                             |                     |               |
| 15. Corrections (From line 2 or  | 3, Schedule C)                                      |   | Sl              | now + or (  | -) \$0.00                            | <u>.</u>            |               |
| 16. Net adjustments this period (Combine lines 14 & 15)                          |   |   |                 |   |                                      |                     | \$0.00        |
| 17. Total cash and in kind expe  | enditures during campa                              | ign (Combine line   | es 10, 13 and   | d 16)   |                                      |                     | \$100.74      |
| CANDIDATES ONLY  Name not  CASH SUMMARY  |   |   |                 |   |                                      |                     |               |
| Won Lost   | Unopposed on ballot                                 | 18. Cash on hand (Line 8 minus line 17)  [Line 18 should equal your bank account balance(s) plus your petty cash ba |                 |   |                                      |                     | \$1,102.94    |
| Primary election General election  |   | 19. Liabilities: (Sum of loans and debts owed)  |                 |   |                                      |                     | <b>\$0.00</b> |
| Treasurer's Daytime Telephone No.:   |   |   |                 | 18 minus line 10\   |                                      |                     |               |
| 20. Balance (Surplus or deficit) (Line 18 minus line 19)                         |   |   |                 | 10 minus inte 19/   |                                      | \$1,102.94          |               |
| CERTIFICATION: I certify that the  | information herein and on                           | accompanying sch  | nedules and att | achments is   | s true and correct to the best of my | knowledge.          |               |
| Candidate's Signature  |   |   |                 |   | e                                    |                     | Date          |
| MEGAN RICHIE 03/12/18 Melissa D Th   |   |   |                 | D The   | ompson                               |                     | 03/12/18      |

## **CASH RECEIPTS AND EXPENDITURE**

SCHEDULE to C4

| Candidate of Committee Name (Do not appreviate. Use full name.) |                       |                            |                     |                          | IX.                      | Report Date        |  |  |  |
|---|-----------------------|----------------------------|---------------------|--------------------------|--------------------------|--------------------|--|--|--|
| MEGAN N RICHIE  | (Megan Rich           | ie Surplus Acco            | unt)                |                          | 02/01/18                 | 02/28/18           |  |  |  |
| 1. CASH RECEIPTS  | (Contributions) which | h have been reported on    | C3. List each dep   | osit made since last C4  | report was submitted.    | _                  |  |  |  |
| Date of deposit   | Amount                | Date of deposit            | Amount              | Date of deposit          | Amount                   | Total deposits     |  |  |  |
|   |                       |                            |                     |                          |                          |                    |  |  |  |
|   |                       |                            |                     |                          |                          |                    |  |  |  |
|   |                       |                            |                     |                          |                          |                    |  |  |  |
|   |                       |                            |                     |                          |                          |                    |  |  |  |
| 2. TOTAL CASH RE  | CEIPTS                |                            |                     | Enter al                 | so on line 2 of C4       | \$0.00             |  |  |  |
| CODES FOR CLA   |                       | ITURES: If one of the foll | lowing codes is use | ed to describe an expend | liture, no other descrip | otion is generally |  |  |  |

- 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;
- When reporting payments to vendors for travel expenses, identify the traveler and travel purpose in the Description block; and 2)
- 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 | A  | Amount   |
|-----------|---|------|---------------------------------------|----|----------|
| N/A       | Expenses of \$50 or less  | N/A  | N/A                                   |    |          |
| 02/08/18  | MELISSA D THOMPSON<br>186 MORNING STAR DR<br>SILVERLAKE, WA 98645 |      | Returned Contribution from Campaign   |    | \$100.74 |
|           |   |      |                                       |    |          |
|           |   |      |                                       |    |          |
|           |   |      |                                       |    |          |
|           |   |      |                                       |    |          |
|           |   |      |                                       |    |          |
|           |   |      |                                       |    |          |
|           | •   | •    | Total from attached pages             | \$ | \$0.00   |

Enter also on line 11 of C4

\$100.74