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 100824326

04-09-2018

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

JESSE L YOUNG (Jesse	L Young Surp	lus Accoun	t)				
Mailing Address					City		
P.O. Box 222	1000 0 11/0				Gig Harbor, WA		
Zip + 4 98335	Office Sought (Cand		2021	ion Date	*For PACs, Parties & C		
Report Period From (last C-	STATE REPRES	nd of period)		Report?	this report period, did the co expenditure (i.e., an expen		
Covered	,	. ,		•	supporting or opposing a sta		
03/01/1	.8 03	/31/18	Yes	No X			
RECEIPTS					*See next page	Yes	No
Previous total cash and in ki (if beginning a new campaig	ind contributions (From or calendar year, see	n line 8, last C-4) e instruction bool	klet)			·_\$	\$13,100.12
2. Cash received (From line 2,	Schedule A)				····· \$ \$0.00	_	
3. In kind contributions receive	d (From line 1, Schedu	ıle B)			\$0.00	_	
4. Total cash and in kind contri	butions received this p	period (Line 2 plu	s 3)				\$0.00
5. Loan principal repayments n	nade (From line 2, Sch	nedule L)			····· \$0.00	_	
6. Corrections (From line 1 or 3	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 contri	butions during campai	gn (Combine line	es 1, 4 & 7	')			\$13,100.12
9. Total pledge payments due	(From line 2, Schedule	e B)		\$0.00			
EXPENDITURES							
Previous total cash and in ki (If beginning a new campaig	ind expenditures (From In or calendar year, se	n line 17, last C-4 e instruction bool	l) klet)				\$11,915.12
11. Total cash expenditures (Fro	om line 4, Schedule A)				\$5.0	<u>0</u>	
12. In kind expenditures (goods	& services) (From line	1, Schedule B).			\$0.0	Ω	
13. Total cash and in kind exper	nditures made this peri	od (Line 11 plus	line 12)				\$5.00
14. Loan principal repayments n	nade (From line 2, Sch	nedule L)			\$0.0	<u>0</u>	
15. Corrections (From line 2 or 3	3, Schedule C)			. Show + or	(-) \$0.0	0	
16. Net adjustments this period	(Combine lines 14 & 1	5)			Show + or (-)		\$0.00
17. Total cash and in kind exper	nditures during campai	gn (Combine line	es 10, 13 a	and 16)			\$11,920.12
CANDIDATES ONLY	Name not	CASH SUMMA	RY				<u> </u>
Won Lost	Unopposed on ballot				17)ance(s) plus your petty cash balance.]		\$1,180.00
Primary election		[20 10 0.104.4	oqua. you. bo	ant account ban	anoo(o) plue your polly caon balance.		
General election		19. Liabilities:	(Sum of lo	ans and de	bts owed)		\$0.00
Treasurer's Daytime Telephone	No.:	00 Delevie (0		deficity (Lie	. 40 minus line - 40\		-
(253)235-9296 20. Balance (Surplus or deficit) (Line				: 10 minus line 19)		\$1,180.00	
CERTIFICATION: I certify that the in		accompanying sch				y knowledge	
Candidate's Signature	Date		Treasure	er's Signatu	re		Date
JESSE YOUNG	NG 04/09/18 Jason			Michau	d		04/09/18

CASH RECEIPTS AND EXPENDITURE

SCHEDULE

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

Report Date

Candidate of Committee Name (Bornet approviate: Coo fair name.)								
JESSE L YOUNG (Je	sse L You	ng Surplus Acco	unt)		03/01/18	03/31/18		
 CASH RECEIPTS (Cor 	ntributions) whic	h have been reported on	C3. List each dep	oosit made since last C4	report was submitted.			
Date of deposit	Amount	Date of deposit	Amount	Date of deposit	Amount	Total deposits		
2. TOTAL CASH RECEIP	TS			Enter a	so on line 2 of C4\$	\$0.00		
CODES FOR CLASSIF	YING EXPEND	ITURES: If one of the follo	owing codes is use	ed to describe an expend	liture, no other descrip	tion is generally		
needed. The exceptions	s are:		· ·	•		,		
1) If expenditures are in	-kind or earmar	<u>ked contributions</u> to a car	ndidate or committe	ee or <u>independent exper</u>	ditures that benefit a c	andidate or		
,	,	or committee in the Desc						
When reporting paym	nents to vendors	for travel expenses, ider	ntify the traveler an	nd travel purpose in the I	Description block; and			
If expenditures are m	ade directly or i	ndirectly to compensate a	a person or entity for	or soliciting signatures o	n a statewide initiative	or referendum		
petition, use code	e "V" and provide	e the following information	n on an attached s	heet: name and address	s of each person/entity	compensated.		

CODE **DEFINITIONS** ON NEXT PAGE

- amount paid each during the reporting period, and cumulative total paid all persons to date to gather signatures. 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

Enter also on line 11 of C4

\$5.00

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	A	Amount
N/A	Expenses of \$50 or less	N/A	N/A		\$5.00
			Total from attached pag	es \$	\$0.00