

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4(3/97)

PDC OFFICE USE 100836157

06-10-2018

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

MARK A MILOSCIA (Milo	oscia Surplus F	unds Acco	ount)						
Mailing Address 30720 19th Ave S						City Federal	Way, WA		
Zip + 4 98003	Office Sought (Candid		Electi 201 9	ion Da	te				mittees: During an independent
Report Period From (last C-	-4) To (end	of period)	Final	Repor	t?	expenditure	(i.e., an expense	e not consid	ered a contribution)
Covered 03/01/1	.8 05/3	31/18	Yes	No	x	supporting o	r opposing a stat	e or local ca	<u>ndidate</u> ?
RECEIPTS			•			*See next pa	age	Yes	No
Previous total cash and in ki (if beginning a new campaig	nd contributions (From ling n or calendar year, see in	ne 8, last C-4) nstruction book	det)					\$	\$20,200.28
2. Cash received (From line 2,	Schedule A)					··· _ \$	\$0.31	-	
3. In kind contributions receive	d (From line 1, Schedule	B)					\$0.00	<u>-</u>	
4. Total cash and in kind contri	butions received this per	od (Line 2 plus	s 3)						\$0.31
5. Loan principal repayments n	nade (From line 2, Sched	ule 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 campaign	(Combine line	s 1, 4 & 7	")					\$20,200.59
9. Total pledge payments due	(From line 2, Schedule B)		\$0.	.00				
EXPENDITURES									
Previous total cash and in ki (If beginning a new campaig	nd expenditures (From lin n or calendar year, see in	ne 17, last C-4 nstruction book) klet)						\$16,441.08
11. Total cash expenditures (Fro	om line 4, Schedule A)						\$785.31		
12. In kind expenditures (goods	& services) (From line 1,	Schedule B) .					\$0.00	1	
13. Total cash and in kind exper	nditures made this period	(Line 11 plus	line 12)						\$785.31
14. Loan principal repayments n	nade (From line 2, Sched	ule L)					\$0.00	<u>!</u>	
15. Corrections (From line 2 or 3	3, Schedule C)			. Show	/ + or (-)	\$0.00	<u>.</u>	
16. Net adjustments this period	(Combine lines 14 & 15)						Show + or (-)		\$0.00
17. Total cash and in kind exper	nditures during campaign	(Combine line	s 10, 13 a	and 16	6)				\$17,226.39
CANDIDATES ONLY Won Lost		ASH SUMMA			a lina i	4 7 \			\$2,974.20
	onopposed on ballot						etty cash balance.]		ŞZ,3/4.20
Primary election		9. Liabilities: (Sum of lo	ans aı	nd deb	ots owed)			\$0.00
Treasurer's Daytime Telephone		0 Polones (0:	iroliio or -	lofic:≠\	/l inc	10 minus line	10)		•
(253)988-2455		o. Daiance (St	urpius of (Jencit)	(Line	10 minus line	19)		\$2,974.20
CERTIFICATION: I certify that the in		companying sche					ct to the best of my	knowledge.	
Candidate's Signature	Date		Treasure	er's Si	gnatur	е			Date
MARK MILOSCIA	06/1	0/18	Tom Pe	errv				0	6/10/18

CASH RECEIPTS AND EXPENDITURE

SCHEDULE

05/31/18

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

Report Date

IARK A	MILOSCIA	(Miloscia	Surplus	Funds	Account)			03/0	1/18
							 _		

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 04/20/2018 \$0.18 \$0.13 05/18/2018

\$ TOTAL CASH RECEIPTS Enter also on line 2 of C4 \$0.31

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;
- 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

Enter also on line 11 of C4 \$

\$785.31

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..
- 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	
03/15/18	CARE NET OF PUGET SOUND 1924 S Cedar St Tacoma, WA 98405		Donation	\$50.00
03/22/18	PIERCE COUNTY REPUBLICAN PARTY 4218 S Steele St Ste 304 Tacoma, WA 98409		Event fee	\$67.50
04/26/18	PROJECTO HONDURAS 1925 S 341st Pl Federal Way, WA 98003		Donation	\$25.00
05/07/18	HYATT REGENCY HOTEL 900 Bellevue Way NE Bellevue, WA 98004		Lodging	\$227.66
05/31/18	SOUTH SOUND REPUBLICANS 4509 Kennedy Ave SE Auburn, WA 98092		Event fee	\$45.00
05/21/18	KOREAN SCHOOL OF FEDERAL WAY PO Box 3923 Federal Way, WA 98063		Donation	\$100.00
			Total from attached pages	\$ \$270.15

EXPENDITURES CONTINUATION SHEET (Attachment to Schedule A)

Page 3 Candidate or Committee Name (Do not abbreviate. Use full name.)

MARK A MILOSCIA (Miloscia Surplus Funds Account)

Report Date

05/31/18

03/01/18

Date Paid	Vendor or Recipient (Name and Address)	Code	Purpose of Expense and/or Description	Amount
05/14/18	BECU 31411 Pacific Hwy S Federal Way, WA 98003		Bank fee	\$3.00
05/14/18	WASHINGTON STATE TREASURER PO Box 40200 Olympia, WA 98504		Reimb - ALEC: Dues	\$100.00
05/14/18	WASHINGTON STATE TREASURER PO Box 40200 Olympia, WA 98504		Reimb - Roanoke Conference: Registration	\$120.00
05/14/18	WASHINGTON STATE TREASURER PO Box 40200 Olympia, WA 98504		Reimb - Mileage reimbursement	\$47.15