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 100851685

08-09-2018

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

DREW MACEWEN (Drew I							
Mailing Address City P.O. Box 651 Union, W							
Zip + 4 98592	Office Sought (Cand	,	Election Date 2018	*For PACs, Parties & Caucus Committees: During this report period, did the committee make an independen			
Report Period From (last (C-4) To (er	nd of period)	Final Report?	expenditure (i.e., an expens	e not considered a contribution)		
Covered 06/01/	18 06	/30/18	Yes No X	supporting or opposing a stat	<u>te or local candidate</u> ?		
RECEIPTS				*See next page	Yes No		
Previous total cash and in (if beginning a new campa	kind contributions (From ign or calendar year, see	line 8, last C-4) e instruction boo	klet)		\$ \$13,146.00		
2. Cash received (From line 2	2, Schedule A)			···· \$ \$0.00	-		
3. In kind contributions receive	red (From line 1, Schedu	ıle B)		\$0.00	-		
4. Total cash and in kind con	tributions received this p	eriod (Line 2 plu	s 3)		\$0.00		
5. Loan principal repayments made (From line 2, Schedule L)				\$0.00	-		
6. Corrections (From line 1 or	3, Schedule C)		Show + or	(-) \$0.00	-		
7. Net adjustments this period	d (Combine line 5 & 6)			Show + or (-)	\$0.00		
8. Total cash and in kind con	tributions during campai	gn (Combine line	es 1, 4 & 7)		\$13,146.00		
9. Total pledge payments due	e (From line 2, Schedule	B)	\$0.00				
EXPENDITURES							
Previous total cash and in (If beginning a new campa	kind expenditures (From ign or calendar year, see	line 17, last C-4 e instruction boo	1) klet)		\$12,822.95		
11. Total cash expenditures (From line 4, Schedule A)					1		
12. In kind expenditures (goods & services) (From line 1, Schedule B)					1		
13. Total cash and in kind exp	enditures made this peri	od (Line 11 plus	line 12)		\$6.00		
14. Loan principal repayments made (From line 2, Schedule L)					1		
15. Corrections (From line 2 or 3, Schedule C)			Show + or	(-) \$0.00)		
16. Net adjustments this period	d (Combine lines 14 & 1	Show + or (-)	\$0.00				
17. Total cash and in kind exp	\$12,828.95						
CANDIDATES ONLY Name not CASH SUMMARY				47)	6317 0 5		
Won Lost Unopposed on ballot 18. Cash on hand (Line 8 minus line 17) [Line 18 should equal your bank account balance(\$317.05		
Primary election					\$0.00		
Treasurer's Daytime Telephone	e No.:						
(360)789-5807 20. Balance (Surplus or deficit) (Line 1				18 minus line 19)	\$317.05		
CERTIFICATION: I certify that the information herein and on accompanying schedules and attachments is true and correct to the best of my knowledge.							
Candidate's Signature	Candidate's Signature Date Treasurer's Signature				Date		
DREW MACEWEN 08/09/18 Cherry			Cherry L Pen	tony	08/09/18		

CASH RECEIPTS AND EXPENDITURE

SCHEDULE to C4

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

Report Date

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		Surplus Account)			06/01/18	06/30/18
1. CASH REC	EIPTS (Contributions) which	ch have been reported on C3	List each d	eposit made since last (C4 report was submitted.	
Date of deposit	Amount	Date of deposit	Amoun	t Date of deposit	Amount	Total deposits
2. TOTAL CAS	SH RECEIPTS			Ente	r also on line 2 of C4	\$0.00
needed. The 1) If expend comm 2) When rep 3) If expend petitic amou 3. EXPENDIT a) Exper amou b) Itemiz	e exceptions are: itures are in-kind or earman ittee, identify the candidate porting payments to vendors itures are made directly or in on, use code "V" and provid nt paid each during the rep CODE DEFINITIONS ON NEXT PAGE N O V JRES Inditures of \$50 or less, incluent column on the first line be the each expenditure of more	e than \$50 by date paid, nan	date or commitation block; y the traveler are son or entity in an attached e total paid all in-kind & transting dio, TV) I Advertising gns, buttons, or need not be in and address	and travel purpose in the for soliciting signatures sheet: name and addressons to date to gath fers) P - S - F - T - M - etc.) Retemized. Add up these as of vendor, code/desc	e Description block; and son a statewide initiative ress of each person/entity rer signatures. Postage, Mailing Permits Surveys and Polls Fundraising Event Exper Travel, Accommodations Management/Consulting Wages, Salaries, Benef General Operation and expenditures and show tription, and amount.	or referendum v compensated, s nses s, Meals g Services its Overhead the total in the
	ach payment to a candidate s of receipts/invoices suppo	e, campaign worker, PR firm orting the payment.	, advertising a	gency or credit card co	mpany, attach a list of de	tailed expenses or
		r Recipient		Purpose of		
Date Paid	(Name ar	nd Address)	Code	and/or Des	scription	Amount
N/A	Expenses of	\$50 or less	N/A	N/A		\$6.00
	1				l l	

			Total from attached pages	\$ \$0.00
4. TOTAL CASH EXPENDITURES			Enter also on line 11 of C4	\$6.00