

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4(3/97)

PDC OFFICE USE 100856694

09-07-2018

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

| | | • | account) | ide idii ilailie) | | | | | |
|--|---|----------------------------------|---|--|-----------------|-------------------------------|---------------------------------------|-------------|--------------|
| JOHN R MCCOY (surplus account) Mailing Address P.O. Box 1821 | | | | | | City Marysville, WA | | | |
| Zip + 4 Office Sought (Can 98270 STATE SENATOR Report Period From (last C-4) To (e | | OR 2021 t | | *For PACs, Parties & Ca this report period, did the cor expenditure (i.e., an expens | nmittee ma | ake an independent | | | |
| Covered | | 04/01/14 | , | /30/14 | Yes | No X | supporting or opposing a sta | | |
| RECEIF | PTS | 01/01/11 | | ., 30, 11 | 165 | 140 22 |] *See next page | Vaa | No |
| | | | | | | | See next page | Yes | No |
| 1. P (i | revious total if beginning a | cash and in kind new campaign | d contributions (From or calendar year, se | n line 8, last C-4 e instruction bo | 4) ooklet) | | | \$ | \$123,742.76 |
| | | | chedule A) | | | | | - | |
| 3. lr | n kind contrib | utions received | (From line 1, Schedu | ule B) | | | ···· \$0.00 | _ | |
| 4. T | otal cash an | d in kind contrib | utions received this p | period (Line 2 p | lus 3) | | | | \$0.00 |
| 5. L | oan principal | repayments ma | ade (From line 2, Sch | nedule L) | | | \$0.00 | _ | |
| 6. C | 6. Corrections (From line 1 or 3, Schedule C) | | | | | Show + or | (-) \$0.00 | - | |
| 7. N | let adjustmer | nts this period (C | Combine line 5 & 6) | | | | Show + or (-) | | \$0.00 |
| 8. T | otal cash an | d in kind contrib | utions during campai | gn (Combine li | nes 1, 4 & 7 |) | | | \$123,742.76 |
| 9. T | otal pledge p | payments due (F | rom line 2, Schedule | B) | | \$0.00 | | | |
| EXPEN | DITURES | | | | | | | | |
| 10. P (I | Previous total If beginning a | cash and in kind new campaign | d expenditures (Fron or calendar year, se | n line 17, last C e instruction bo | :-4) ooklet) | | | | \$123,737.00 |
| 11. T | otal cash exp | penditures (Fron | n line 4, Schedule A) | | | | ····· \$0.00 | <u>)</u> | |
| 12. lr | n kind expend | ditures (goods & | services) (From line | 1, Schedule B |) | | ···· \$0.00 | 1 | |
| 13. T | otal cash and | d in kind expend | litures made this per | od (Line 11 plu | ıs line 12) | | | | \$0.00 |
| 14. L | oan principal | repayments ma | ade (From line 2, Sch | nedule L) | | | \$0.00 | <u>)</u> | |
| 15. Corrections (From line 2 or 3, Schedule C) | | | | Show + or | (-) \$0.00 | <u>)</u> | | | |
| 16. N | let adjustmer | nts this period (0 | Combine lines 14 & 1 | 5) | | | Show + or (-) | | \$0.00 |
| 17. T | otal cash and | d in kind expend | litures during campa | gn (Combine li | nes 10, 13 a | and 16) | | | \$123,737.00 |
| CANDI | DATES ONL | | Name not | CASH SUMM | MARY | | | | • |
| | W | on Lost U | nopposed on ballot | | | | 17) | | \$5.76 |
| • | Primary election | | | | | ots owed) | | 40.00 | |
| | | e Telephone N | | | | | | | \$0.00 |
| (360 |)659-43 | 67 | | 20. Balance (| Surplus or d | leficit) (Line | 18 minus line 19) | | \$5.76 |
| CERTIF | FICATION: 1 | certify that the info | ormation herein and on | accompanying so | chedules and | attachments | is true and correct to the best of my | / knowledge |). |
| Candida | ate's Signatu | re | Date | | Treasure | er's Signatui | | | Date |
| JOHN MCCOY 09 | | | /07/18 | 718 Richard D Ledford | | | | 09/07/18 | |

CASH RECEIPTS AND EXPENDITURE

SCHEDULE to C4

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

Report Date

| | ` | | , | | | |
|---------------------|----------------------|--------------------------|----------------------|---------------------------|------------------------|--------------------|
| JOHN R MCCOY (su | rplus acco | unt) | | | 04/01/14 | 04/30/14 |
| 1. CASH RECEIPTS (C | Contributions) which | h have been reported or | n C3. List each dep | osit made since last C4 i | eport was submitted | |
| Date of deposit | Amount | Date of deposit | Amount | Date of deposit | Amount | Total deposits |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 2. TOTAL CASH RECEI | IPTS | | | Enter als | so on line 2 of C4 | \$ <u>\$0.0</u> 0 |
| CODES FOR CLASS | SIFYING EXPEND | ITURES: If one of the fo | llowing codes is use | ed to describe an expend | iture, no other descri | ption is generally |

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

\$0.00

- 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 | Д | mount |
|-----------|--|----------|---------------------------------------|-------|--------|
| N/A | Expenses of \$50 or less | N/A | N/A | | |
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| | | <u> </u> | Total from attached page | es \$ | \$0.00 |