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 100863160

10-08-2018

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

DREW MACEWEN (Drew Ma	acEwen Surplus Acc	ount)			
Mailing Address P.O. Box 651				City Union, WA	
Zip + 4 98592	Office Sought (Candidates) STATE REPRESENTA		ion Date	*For PACs, Parties & Cau	
Report Period From (last C-	4) To (end of pe	riod) Final	Report?	expenditure (i.e., an expense	not considered a contribution)
Covered 09/01/1	8 09/30/2	18 Yes	No X	supporting or opposing a state	e or local candidate?
RECEIPTS		<u> </u>		*See next page	Yes No
Previous total cash and in ki (if beginning a new campaig	nd contributions (From line 8, n or calendar year, see instruc	last C-4) ction booklet)			\$ \$23,146.00
2. Cash received (From line 2,	Schedule A)			····· \$ \$0.00	
3. In kind contributions received	d (From line 1, Schedule B)			\$0.00	
4. Total cash and in kind contri	butions received this period (L	ine 2 plus 3)		<u>-</u>	\$0.00
5. Loan principal repayments m	nade (From line 2, Schedule 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 (Con	mbine lines 1, 4 & 7	")	<u>-</u>	\$23,146.00
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 line 17 n or calendar year, see instruc	', last C-4) ction booklet)		<u>-</u>	\$18,054.15
11. Total cash expenditures (Fro	om line 4, Schedule A)			\$3,000.00	
12. In kind expenditures (goods	& services) (From line 1, Scho	edule B)		\$0.00	
13. Total cash and in kind exper	nditures made this period (Line	e 11 plus line 12)		<u>-</u>	\$3,000.00
14. Loan principal repayments m	nade (From line 2, Schedule L)		 \$0.00	
15. Corrections (From line 2 or 3	3, Schedule C)		. Show + or	(-) \$0.00	
16. Net adjustments this period	(Combine lines 14 & 15)			Show + or (-)	\$0.00
17. Total cash and in kind exper	nditures during campaign (Cor	mbine lines 10, 13 a	and 16)		\$21,054.15
CANDIDATES ONLY		SUMMARY		4-1	å0 001 0F
Won Lost				ance(s) plus your petty cash balance.]	\$2,091.85
Primary election		abilities: (Sum of lo	ans and de	bts owed)	\$0.00
Treasurer's Daytime Telephone I				40 ' " 45'	
(360)789-5807	20. Ba	alance (Surplus or o	deficit) (Line	18 minus line 19)	\$2,091.85
CERTIFICATION: I certify that the in	nformation herein and on accompa				
Candidate's Signature	Date	Treasure	er's Signatu	re	Date
DREW MACEWEN	10/08/1	L8 Cherry	v L Pen	tony	10/08/18

CASH RECEIPTS AND EXPENDITURE

SCHEDULE to C4

F	1	
(11	/93)	

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

Report Date

Caradate of Committee Name (Bornet appreviate. Coc fair name.)										
DREW	MACEWEN	(Drew	MacEwen	Surplus	Account)			09/01/18	<u> </u>	09/30/18
1. (ASH RECEIP	ΓS (Contr	ibutions) whic	h have been	reported on C3.	List each dep	osit made since last (C4 report was submitte	d.	
Date	of deposit		Amount	Date of dep	osit	Amount	Date of deposit	Amount		Total deposits
2. 1	OTAL CASH F	RECEIPTS	3				Ente	r also on line 2 of C4 _	<u>\$</u>	\$0.00
	ODES FOR C			ITURES: If or	ne of the following	ng codes is use	ed to describe an expe	enditure, no other desc	riptio	n is generally

- If expenditures are in-kind or earmarked contributions to a candidate or committee or independent expenditures that benefit a candidate or 1) 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..
- 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
Date Faid	(Name and Address)	Code	and/or Description		AIIIOUIII
N/A	Expenses of \$50 or less	N/A	N/A		
_					
09/28/18	HOUSE REPUBLICAN ORGANIZATIONAL P.O. Box 7222 Olympia, WA 98507		contribution		\$3,000.00
		•	Total from attached page	s \$	\$0.00

Enter also on line 11 of C4

\$3,000.00