## DISCLOSURE COMMISSION PUBLIC 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**

PDC OFFICE USE 100880687

**C4** 

(3/97)

01-10-2019

						01-10-201	, y	
Candidate or Committee Name (Do	not abbreviate. Inclue a Stonier Sur	,				01 10 201		
	a sconter sur	pius Fund	s Account)	0:1-1		-		
Mailing Address PO Box 61762				City Vancouver, N	WA			
Zip + 4     Office Sought (Candidates)     Election Date       98666     STATE REPRESENTATIVE     2023			*For PACs, Parties & Caucus Committees: During this report period, did the committee make an independent					
Report Period From (last C-4) To (end of period)			Final Report?	expenditure (i.e., a	expenditure (i.e., an expense not considered a consupervision of opposing a state or local candidate?			
Covered 12/01/18	3 12	/31/18	Yes No X	supporting or oppos	sing a state of	local candidate?		
RECEIPTS				*See next page	Y	es No		
<ol> <li>Previous total cash and in kin (if beginning a new campaign</li> </ol>	nd contributions (From n or calendar year, see	line 8, last C-4) instruction bool	klet)			\$65,000	).00	
2. Cash received (From line 2, S	Schedule A)			\$	\$0.00			
3. In kind contributions received	(From line 1, Schedu	lle B)			\$0.00			
4. Total cash and in kind contrib	outions received this po	eriod (Line 2 plu	s 3)		······ <u> </u>	\$0	0.00	
5. Loan principal repayments ma	ade (From line 2, Sch	edule L)			\$0.00			
6. Corrections (From line 1 or 3,	, Schedule C)		Show + or	(-)	\$0.00			
7. Net adjustments this period (	Combine line 5 & 6)			Shov	v + or (-)	\$0	0.00	
8. Total cash and in kind contrib	outions during campai	gn (Combine line	es 1, 4 & 7)		······	\$65,000	).00	
9. Total pledge payments due (F	From line 2, Schedule	В)	\$0.00					
EXPENDITURES		1	1	l.				
10. Previous total cash and in kin (If beginning a new campaign	id expenditures (From ) or calendar year, see	l line 17, last C-4 e instruction bool	4) klet)			\$54,606	5.30	
11. Total cash expenditures (From	m line 4, Schedule A)			······	\$0.00			
12. In kind expenditures (goods & services) (From line 1, Schedule B)					\$0.00			
13. Total cash and in kind expend	ditures made this perio	od (Line 11 plus	line 12)			\$0	0.00	
- 14. Loan principal repayments made (From line 2, Schedule L)					\$0.00			
15. Corrections (From line 2 or 3,	, Schedule C)		Show + or	· (-)	\$0.00			
16. Net adjustments this period (	Combine lines 14 & 1	5)		Shov	v + or (-)	\$0	0.00	
17. Total cash and in kind expend	ditures during campai	gn (Combine line	es 10, 13 and 16)			\$54,606	5.30	
CANDIDATES ONLY	Name not	CASH SUMMA	ARY					
	Jnopposed on ballot			e 17) lance(s) plus your petty cash l		\$10,393	3.70	
Primary election            General election         19. Liabilities: (Sum of loans and debts)				ebts owed)		\$0	0.00	
Treasurer's Daytime Telephone No.:								
(360)609-3527 20. Balance (Surplus or deficit) (Line 18 minus line 3				e 18 minus line 19)	<u> </u>	\$10,393	3.70	
CERTIFICATION: I certify that the inf	iormation herein and on a	accompanying sch			best of my kno	wledge.		
Candidate's Signature	Date		Treasurer's Signatu	ILE		Date	_	
MONICA STONIER	01,	/10/19	Marsha Manni	.ng		01/10/19		

## CASH RECEIPTS AND EXPENDITURE



Candidate or Committee Name (Do not abbreviate. Use full name.)				R	teport Date	
MONICA STONIER	(Monica Stor	nier Surplus F	unds Account	)	12/01/18	12/31/18
1. CASH RECEIPTS (	Contributions) whic	h have been reported o	n C3. List each dep	osit made since last C4	report was submitted	l.
Date of deposit	Amount	Date of deposit	Amount	Date of deposit	Amount	Total deposits
						•
2. TOTAL CASH RECE	EIPTS			Enter al	so on line 2 of C4	\$ \$0.00

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 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.

C - Contributions (monetary, in-kind & transfers)

CODF DEFINITIONS ON NEXT PAGE

- 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..
- 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	А	mount
N/A	Expenses of \$50 or less	N/A	N/A		
I		1 1	Total from attached pag	es \$	\$0.00

4. TOTAL CASH EXPENDITURES