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 | | |
| Previous total cash and in kin (if beginning a new campaign | 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 | | |
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| | | | | | |
| I | | 1 1 | Total from attached pag | es \$ | \$0.00 |

4. TOTAL CASH EXPENDITURES