PUBLIC DI	SCLOSURE COMMISSION
ALL	711 CAPITOL WAY RM 206
	PO BOX 40908
	OLYMPIA WA 98504-0908
	(360) 753-1111
-64 S.	TOLL FREE 1-877-601-2828

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

PDC OFFICE USE

C4

(3/97)

02-13-2019

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

	(Mike Pellico	ciotti Sur	plus Fu	nd Acc	ount)			
Mailing Address PO Box 12066					City Seat	tle, WA		
Zip + 4 98102	Office Sought (Cancer STATE REPRES	,	Electio 2023	n Date		ACs, Parties & C		
Report Period From (last C-4	l) To (er	nd of period)	Final R	eport?	expend	l <u>iture</u> (i.e., an expen	se not consid	lered a contribution)
Covered 01/02/19	9 01	/31/19	Yes	No X	<u>supporti</u>	ing or opposing a sta	ate or local ca	andidate?
RECEIPTS					*See ne	ext page	Yes	No
 Previous total cash and in kin (if beginning a new campaign 	d contributions (From or calendar year, see	line 8, last C-4) instruction bool	klet)				\$	\$0.00
2. Cash received (From line 2, S	Schedule A)				\$	\$50,000.00	_	
3. In kind contributions received	(From line 1, Schedu	ıle B)				\$0.00	_	
4. Total cash and in kind contrib								\$50,000.00
5. Loan principal repayments ma							_	
6. Corrections (From line 1 or 3,							_	
7. Net adjustments this period (\$0.00
8. Total cash and in kind contrib	utions during campai	gn (Combine line	es 1, 4 & 7)					\$50,000.00
9. Total pledge payments due (F	From line 2, Schedule	B)		\$0.00				
EXPENDITURES	d average diture a (France	line 47 lest C 4	4)					
10. Previous total cash and in kin (If beginning a new campaign	or calendar year, see	e instruction boo	+) klet)				<u> </u>	\$0.00
11. Total cash expenditures (Fror	m line 4, Schedule A)					\$15.9	<u>4</u>	
12. In kind expenditures (goods &	& services) (From line	1, Schedule B).				\$0.0	٥	
13. Total cash and in kind expend	ditures made this peri	od (Line 11 plus	line 12)					\$15.94
14. Loan principal repayments ma	ade (From line 2, Sch	edule L)				\$0.0	<u>0</u>	
15. Corrections (From line 2 or 3,	Schedule C)		8	Show + or	(-)	\$0.0	0	
16. Net adjustments this period (Combine lines 14 & 1	5)				Show + or (-)		\$0.00
17. Total cash and in kind expend	ditures during campai	gn (Combine line	es 10, 13 ar	nd 16)				\$15.94
CANDIDATES ONLY Won Lost L	Name not Jnopposed on ballot				47)			\$49,984.06
						/our petty cash balance.]	·	Ş19,901.00
Primary election		19 Liabilities	(Sum of loa	ns and del	hts owed)			
Treasurer's Daytime Telephone N	lo.:				sto enea,		·	\$0.00
(206)218-3108		20. Balance (S	urplus or de	ficit) (Line	18 minus	line 19)		\$49,984.06
CERTIFICATION: I certify that the inf		accompanying sch				correct to the best of m	ny knowledge.	-
Candidate's Signature	Date		Treasurer	's Signatu	e			Date
MICHAEL PELLICCIOTTI	02.	/13/19	Abbot	Taylor			()2/13/19

CASH RECEIPTS AND EXPENDITURE



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

Report Date MICHAEL PELLICCIOTTI (Mike Pellicciotti Surplus Fund Account) 01/02/19 01/31/19 1. CASH RECEIPTS (Contributions) which have been reported on C3. List each deposit made since last C4 report was submitted. Date of deposit Amount Date of deposit Amount Date of deposit Amount Total deposits 01/02/2019 \$50,000.00 \$ Enter also on line 2 of C4 \$<u>50,000.0</u>0

2. TOTAL CASH RECEIPTS

> 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:

- 1) If expenditures are in-kind or earmarked contributions to a candidate or committee or independent expenditures that benefit a candidate or 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

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- 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	A	mount
N/A	Expenses of \$50 or less	N/A	N/A		\$15.94
			Total from attached page	es \$	\$0.00

4. TOTAL CASH EXPENDITURES