PUBLIC	DISCLOSURE COMMISSION	SUM
ATTEN A	711 CAPITOL WAY RM 206	501
	PO BOX 40908	REC
	OLYMPIA WA 98504-0908	
	(360) 753-1111	FXP
	TOLL FREE 1-877-601-2828	

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

PDC OFFICE USE 100924209

08-12-2019

C4

(3/97)

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

Report Period From (last C-4) To (end of period) Final Report? Covered 07/01/19 07/31/19 Yes No X RECEIPTS *See next page Yes No 1. Previous total cash and in kind contributions (From line 8, last C-4) Final Report? *See next page Yes No	ndependent contribution)
98520 2021 Prof PACs, Parties & Caucus Committee make an in this report period, did the committee make an in expense not considered a supporting or opposing a state or local candidate Report Period Covered From (last C-4) To (end of period) Final Report? Overed 07/01/19 07/31/19 Yes No X RECEIPTS *See next page Yes No X 1. Previous total cash and in kind contributions (From line 8, last C-4) (if beginning a new campaign or calendar year, see instruction booklet) \$\$ \$\$0.00 \$\$ \$\$1 2. Cash received (From line 2, Schedule A) \$\$ \$\$0.00 \$\$ \$\$0.00 \$\$ \$\$ \$\$0.00 3. In kind contributions received (From line 1, Schedule B) \$\$ \$\$0.00 \$\$ \$\$ \$\$0.00 \$\$ 4. Total cash and in kind contributions received this period (Line 2 plus 3) \$\$ \$\$0.00 \$\$ \$\$0.00 \$\$ 6. Corrections (From line 1 or 3, Schedule C) Show + or (-) \$\$0.00 \$\$ \$\$0.00 \$\$	ndependent contribution) te?
Report Period Covered From (last C-4) To (end of period) Final Report? Yes Expenditure (i.e., an expense not considered a supporting or opposing a state or local candidate supporting or opposing a state or local candidate RECEIPTS *See next page Yes N 1. Previous total cash and in kind contributions (From line 8, last C-4) (if beginning a new campaign or calendar year, see instruction booklet) \$\$ \$0.00 2. Cash received (From line 2, Schedule A) \$\$ \$0.00 3. In kind contributions received (From line 1, Schedule B) \$\$ \$0.00 4. Total cash and in kind contributions received this period (Line 2 plus 3) \$\$ \$0.00 5. Loan principal repayments made (From line 2, Schedule L) \$\$ \$0.00 6. Corrections (From line 1 or 3, Schedule C) Show + or (-) \$0.00	contribution)
RECEIPTS *See next page Yes No 1. Previous total cash and in kind contributions (From line 8, last C-4) (if beginning a new campaign or calendar year, see instruction booklet) \$ \$ 2. Cash received (From line 2, Schedule A) \$ \$ \$0.00 3. In kind contributions received (From line 1, Schedule B) \$ \$0.00 4. Total cash and in kind contributions received this period (Line 2 plus 3) \$ \$0.00 5. Loan principal repayments made (From line 2, Schedule L) \$ \$0.00 6. Corrections (From line 1 or 3, Schedule C) Show + or (-) \$0.00	
1. Previous total cash and in kind contributions (From line 8, last C-4) (if beginning a new campaign or calendar year, see instruction booklet) \$ \$1 2. Cash received (From line 2, Schedule A) \$ \$0.00 3. In kind contributions received (From line 1, Schedule B) \$ \$0.00 4. Total cash and in kind contributions received this period (Line 2 plus 3) \$ \$0.00 5. Loan principal repayments made (From line 2, Schedule L) \$ \$0.00 6. Corrections (From line 1 or 3, Schedule C) Show + or (-)	No
(if beginning a new campaign or calendar year, see instruction booklet) \$ \$1 2. Cash received (From line 2, Schedule A) \$ \$0.00 3. In kind contributions received (From line 1, Schedule B) \$0.00 4. Total cash and in kind contributions received this period (Line 2 plus 3) \$0.00 5. Loan principal repayments made (From line 2, Schedule L) \$0.00 6. Corrections (From line 1 or 3, Schedule C) Show + or (-) \$0.00	
3. In kind contributions received (From line 1, Schedule B) \$0.00 4. Total cash and in kind contributions received this period (Line 2 plus 3) \$0.00 5. Loan principal repayments made (From line 2, Schedule L) \$0.00 6. Corrections (From line 1 or 3, Schedule C)	L,000.00
 4. Total cash and in kind contributions received this period (Line 2 plus 3)	
5. Loan principal repayments made (From line 2, Schedule L) \$0.00 6. Corrections (From line 1 or 3, Schedule C) Show + or (-)	
6. Corrections (From line 1 or 3, Schedule C)Show + or (-) \$0.00	\$0.00
7. Net adjustments this period (Combine line 5 & 6) Show + or (-)	
	\$0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)	L,000.00
9. Total pledge payments due (From line 2, Schedule B) \$0.00	
EXPENDITURES	
10. Previous total cash and in kind expenditures (From line 17, last C-4) (If beginning a new campaign or calendar year, see instruction booklet)	\$885.00
11. Total cash expenditures (From line 4, Schedule A) \$5.00	
12. In kind expenditures (goods & services) (From line 1, Schedule B)	
13. Total cash and in kind expenditures made this period (Line 11 plus line 12)	\$5.00
14. Loan principal repayments made (From line 2, Schedule L)	
15. Corrections (From line 2 or 3, Schedule C) Show + or (-) \$0.00	
16. Net adjustments this period (Combine lines 14 & 15)	\$0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)	\$890.00
CANDIDATES ONLY Name not Won Lost Unopposed on ballot 18. Cash on hand (Line 8 minus line 17)	\$110.00
Primary election	<u> </u>
General election Image: Comparison of the second secon	¢0 00
Treasurer's Daytime Telephone No.: 20. Balance (Surplus or deficit) (Line 18 minus line 19)	\$0.00
CERTIFICATION: I certify that the information herein and on accompanying schedules and attachments is true and correct to the best of my knowledge.	\$0.00
Candidate's Signature Date Treasurer's Signature Da	·
08/12/19 08/12	\$110.00

CASH RECEIPTS AND EXPENDITURE



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

Candidate of Committee Name (Do not abbreviate. Use run name.)						Vepon Date	
(WALSH JAMES W SU	JRPLUS ACC	Γ)			07/01/19	07/31/19	
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	
2. TOTAL CASH RECEIF	PTS			Enter a	so on line 2 of C4	\$ \$ 0.	<u>00</u>

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:

- 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

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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	ļ	Amount
N/A	Expenses of \$50 or less	N/A	N/A		\$5.00
			Total from attached pag	es \$	\$0.00

4. TOTAL CASH EXPENDITURES