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 100928071

09-04-2019

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

JOE SCHMICK (SCHMICK	JOSEPH S SURPLUS A	CCT)				
Mailing Address 830 SOUTHVIEW				City COLFAX,		
Zip + 4 99111	Office Sought (Candidates) STATE REPRESENTAT		ion Date)			s Committees: During ee make an independent
Report Period From (last C-4	4) To (end of period	od) Final	Report?			considered a contribution)
Covered 08/01/19	9 08/31/19	9 Yes	No X	supporting or opposi	ng a state or I	ocal candidate?
RECEIPTS				*See next page	Ye	s No
Previous total cash and in kir (if beginning a new campaign	nd contributions (From line 8, la n or calendar year, see instructi	st C-4) on booklet)			······· <u></u> \$	\$361,571.66
2. Cash received (From line 2, §	Schedule A)			\$ \$	0.00	
3. In kind contributions received	(From line 1, Schedule B)			····· <u> </u>	0.00	
4. Total cash and in kind contrib	outions received this period (Lir	ne 2 plus 3)			<u> </u>	\$0.00
5. Loan principal repayments m	ade (From line 2, Schedule L).			<u>\$</u>	0.00	
6. Corrections (From line 1 or 3	, Schedule C)		. Show + o	r (-)	0.00	
7. Net adjustments this period (Combine line 5 & 6)			Show	+ or (-)	\$0.00
8. Total cash and in kind contrib	outions during campaign (Comb	oine lines 1, 4 & 7	')	1	<u> </u>	\$361,571.66
9. Total pledge payments due (l	From line 2, Schedule B)		\$0.00			
EXPENDITURES						
Previous total cash and in kir (If beginning a new campaigr	nd expenditures (From line 17, n or calendar year, see instructi	last C-4) on booklet)			<u> </u>	\$347,498.82
11. Total cash expenditures (Fro	m line 4, Schedule A)			\$7	<u>87.00</u>	
12. In kind expenditures (goods 8	& services) (From line 1, Sched	lule B)			<u>\$0.00</u>	
13. Total cash and in kind expend	ditures made this period (Line	11 plus line 12)			<u> </u>	\$787.00
14. Loan principal repayments m	ade (From line 2, Schedule L).				\$0.00	
15. Corrections (From line 2 or 3	, Schedule C)		. Show + o	r (-)	\$0.00	
16. Net adjustments this period (Combine lines 14 & 15)			Show	+ or (-)	\$0.00
17. Total cash and in kind expend			and 16)			\$348,285.82
CANDIDATES ONLY Won Lost U		SUMMARY	minus line	e 17)		\$13,285.84
				alance(s) plus your petty cash b		Q137203.01
Primary election		ilities: (Sum of lo	ans and de	ebts owed)		\$0.00
Treasurer's Daytime Telephone N (509) 397-3121		ance (Surplus or o	deficit) (Line	e 18 minus line 19)		\$13,285.84
	formation haroin and an assampse	vina schodulos cad	attachmant	s is true and correct to the	nost of my know	
CERTIFICATION: I certify that the interest Candidate's Signature	Tormation nerein and on accompan Date		attacnments er's Signatt		Jest of thy know	Date
JOE SCHMICK	09/04/19	FREDA	L MILI	LER		09/04/19

CASH RECEIPTS AND EXPENDITURE

SCHEDULE to C4

A	
(11/93)	

\$787.00

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

Report Date

JOE SCHMICK (SCHMIC	K JOSEPI	S SURPLUS ACCI	·')		08/01/19	08/31/19
1. CASH RECEIPTS (Contril	butions) whic	h have been reported on (C3. List each dep	oosit made since last C4	report was submitted.	
Date of deposit	Amount	Date of deposit	Amount	Date of deposit	Amount	Total deposits
2. TOTAL CASH RECEIPTS				Enter al	so on line 2 of C4	\$0.00
CODES FOR CLASSIFYIN	NG EXPEND	TURES: If one of the follo	wina codes is use	ed to describe an expend	diture, no other descrip	otion 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.

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

Enter also on line 11 of C4

- F Fundraising Event Expenses
- T Travel, Accommodations, Meals M - Management/Consulting Services
- W Wages, Salaries, Benefits
- G General Operation and Overhead

3. EXPENDITURES

4. TOTAL CASH 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		Amount
N/A	Expenses of \$50 or less	N/A	N/A		
08/28/19	JOE SCHMICK P.O. BOX 620 COLFAX, WA 99111		TRAILER SPACE RENT		\$550.00
08/28/19	JOE SCHMICK P.O. BOX 620 COLFAX, WA 99111		DONATION, NFIB & OTHER		\$237.00
			Total from attached page	s \$	\$0.00