PUBLIC DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 0LYMPIA WA 98504-0908 (360) 753-1111 TOLL FREE 1-877-601-2828

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4

PDC OFFICE USE 100931423 AMENDS 100931358 09-16-2019

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

| DAVID V TAYLOR (COMMI | TTEE TO ELEC | r david ta | YLOR - | SURPLU | IS) | | |
|---|---|---|---------------|-------------|--|-----------------|---|
| Mailing Address 1661 BEANE ROAD | | | | | City MOXEE, WA | | |
| Zip + 4 98936 | Office Sought (Cano STATE REPRES | | Election 2022 | on Date | | | us Committees: During ttee make an independent |
| Report Period From (last C-4 | 4) To (er | nd of period) | Final | Report? | expenditure (i.e., an e | expense no | ot considered a contribution) |
| Covered 12/01/14 | 4 12 | /31/14 | Yes | No X | supporting or opposing | g a state o | r local candidate? |
| RECEIPTS | | | | | *See next page | Ŷ | Yes No |
| Previous total cash and in kir (if beginning a new campaign | nd contributions (From n or calendar year, see | n line 8, last C-4) e instruction boo | klet) | | | \$ | \$53,315.35 |
| 2. Cash received (From line 2, S | Schedule A) | | | | <u>\$</u> \$0 | 0.00 | |
| 3. In kind contributions received | I (From line 1, Schedu | ıle B) | | | \$C | 0.00 | |
| 4. Total cash and in kind contrib | outions received this p | period (Line 2 plu | ıs 3) | | | ······ <u> </u> | \$0.00 |
| 5. Loan principal repayments m | ade (From line 2, Sch | edule L) | | | \$C | 0.00 | |
| 6. Corrections (From line 1 or 3 | , Schedule C) | | | Show + or | (-) \$0 | 0.00 | |
| 7. Net adjustments this period (| Combine line 5 & 6) | | | | Show + | or (-) | \$0.00 |
| 8. Total cash and in kind contrib | outions during campai | gn (Combine line | es 1, 4 & 7 |) | | ······ <u> </u> | \$53,315.35 |
| 9. Total pledge payments due (l | From line 2, Schedule | e B) | | \$0.00 | | | |
| EXPENDITURES | | | | | | | |
| 10. Previous total cash and in kir (If beginning a new campaigr | nd expenditures (From n or calendar year, se | n line 17, last C-4 e instruction boo | 4) klet) | | | ······ | \$52,899.91 |
| 11. Total cash expenditures (Fro | m line 4, Schedule A) | | | | <u></u> | 30.00 | |
| 12. In kind expenditures (goods & services) (From line 1, Schedule B) | | | | | ····· \$ | 30.00 | |
| 13. Total cash and in kind expend | ditures made this peri | od (Line 11 plus | line 12) | | | ······ <u> </u> | \$0.00 |
| 14. Loan principal repayments m | ade (From line 2, Sch | edule L) | | | <u></u> | 30.00 | |
| 15. Corrections (From line 2 or 3 | , Schedule C) | | | Show + or | (-) \$ | 30.00 | |
| 16. Net adjustments this period (| Combine lines 14 & 1 | 5) | | | Show + | or (-) | \$0.00 |
| 17. Total cash and in kind expendent | ditures during campai | gn (Combine line | es 10, 13 a | ind 16) | | | \$52,899.91 |
| | Name not | | | | 47) | | |
| Won Lost l | Jnopposed on ballot | | | | 17) ance(s) plus your petty cash bala | | \$415.44 |
| Primary election | | 10 Liphilitios: | (Sum of lo | ans and do | hts owod) | | |
| General election 19. Liabilities: (Sum of loans and debts owed) Treasurer's Daytime Telephone No.: | | | | | ······ <u> </u> | \$0.00 | |
| (509)945-5592 | 20. Balance (S | 0. Balance (Surplus or deficit) (Line 18 minus line 19) | | | ······ <u> </u> | \$415.44 | |
| CERTIFICATION: I certify that the int | formation herein and on | I accompanying sch | edules and | attachments | is true and correct to the be | est of my kno | owledge. |
| Candidate's Signature | Date | · - | Treasure | r's Signatu | re | - | Date |
| DAVID TAYLOR | 09 | /16/19 | CHRIST | INA MO | REHEAD | | 09/16/19 |

CASH RECEIPTS AND EXPENDITURE



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

| | (20110100 | | •) | | | • | |
|-------------------|----------------------|------------------------|---------------------|-------------------------|-----------------------|------------|--------|
| DAVID V TAYLOR | (COMMITTEE 1 | TO ELECT DAVID | TAYLOR - SU | RPLUS) | 12/01/14 | 12/31 | /14 |
| 1. CASH RECEIPTS | (Contributions) whic | h have been reported o | n C3. List each dep | oosit made since last C | 4 report was submitte | d. | |
| Date of deposit | Amount | Date of deposit | Amount | Date of deposit | Amount | Total depo | osits |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| 2. TOTAL CASH REC | EIPTS | | | Enter | also 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

- S Surveys and Polls
 - F Fundraising Event Expenses

P - Postage, Mailing Permits

Enter also on line 11 of C4 \$

\$0.00

- T Travel, Accommodations, Meals
- M Management/Consulting Services

2 Report Date

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