

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4(3/97)

PDC OFFICE USE 100951916

01-06-2020

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

| (YOUNG JESSE L SURPLUS | ACCT) | | | | | | | | |
|---|---|--|--------------|---------------------|-------------------|---|-----------------|-----------------------|------|
| Mailing Address PO BOX 222 | | | | | | City GIG HARBOR, | | | |
| Zip + 4 98335 | Office Sought (Cand | lidates) | Elect 202 | ion Dat 1 | е | *For PACs, Parties & C | | | |
| Report Period From (last C- | 4) To (en | nd of period) | Final | Report | ? | expenditure (i.e., an expenditure | nse not | considered a contribu | |
| Covered 12/01/1 | 9 12 | /31/19 | Yes | No | x | supporting or opposing a s | ate or l | local candidate? | |
| RECEIPTS | | | | | | *See next page | Ye | es No | |
| Previous total cash and in kir (if beginning a new campaign | nd contributions (From n or calendar year, see | line 8, last C-4) e instruction boo | klet) | | | | ··· <u></u> \$_ | \$23,100. | .12 |
| 2. Cash received (From line 2, | Schedule A) | | | | | ····_\$ \$0.00 | <u>)</u> | | |
| 3. In kind contributions received | d (From line 1, Schedu | le B) | | | | \$0.00 | <u>)</u> | | |
| 4. Total cash and in kind contrib | outions received this p | eriod (Line 2 plu | s 3) | | | | | \$0. | .00 |
| 5. Loan principal repayments m | ade (From line 2, Sch | edule L) | | | | \$0.00 | <u>)</u> | | |
| 6. Corrections (From line 1 or 3 | , Schedule C) | | | . Show | + or (- | \$0.00 | <u>)</u> | | |
| 7. Net adjustments this period (| Combine line 5 & 6) | | | | | Show + or (- |) | \$0. | .00 |
| 8. Total cash and in kind contrib | outions during campaig | gn (Combine line | es 1, 4 & 7 | 7) | | | | \$23,100. | .12 |
| 9. Total pledge payments due (EXPENDITURES | From line 2, Schedule | В) | | \$0. | 00 | | | | |
| Previous total cash and in kir (If beginning a new campaign | nd expenditures (From n or calendar year, see | line 17, last C-4 instruction boo | 1) klet) | | | | | \$20,168. | .21 |
| 11. Total cash expenditures (Fro | m line 4, Schedule A) | | | | | \$19.4 | <u>12</u> | | |
| 12. In kind expenditures (goods & services) (From line 1, Schedule B) | | | | | ···· \$0.0 | 10 | | | |
| 13. Total cash and in kind expen | ditures made this perio | od (Line 11 plus | line 12) | | | | | \$19. | .42 |
| 14. Loan principal repayments m | ade (From line 2, Sch | edule L) | | | | \$0.0 | <u>) 0</u> | | |
| 15. Corrections (From line 2 or 3 | , Schedule C) | | | . Show | + or (- | \$0.0 | 00 | | |
| 16. Net adjustments this period (| Combine lines 14 & 15 | 5) | | | | Show + or (- |) | \$0. | .00 |
| 17. Total cash and in kind expen | ditures during campai | gn (Combine line | es 10, 13 | and 16) | | | | \$20,187. | . 63 |
| CANDIDATES ONLY | Name not | CASH SUMMA | ARY | | | | | | |
| Won Lost U | Jnopposed on ballot | | | | | 7) nce(s) plus your petty cash balance.] | | \$2,912. | .49 |
| Primary election | imary election | | | | | | \$0. | .00 | |
| Treasurer's Daytime Telephone No.: 20. Balance (Surplus or deficit) (Line 18 r | | | | | 18 minus line 19) | | \$2,912. | | |
| CERTIFICATION: I certify that the in | formation herein and on a | accompanying sch | edules and | attachm | nents is | s true and correct to the best of | my know | | _ |
| Candidate's Signature | Date | | Treasur | | | | , | Date | |
| | 01, | /06/20 | | | | | | 01/06/20 | |

CASH RECEIPTS AND EXPENDITURE

SCHEDULE to C4

| Candidate or Committee N | lame (Do not abl | oreviate. Use full name.) | | | RE | eport Date |
|--------------------------|--------------------|---------------------------|--------------------|---------------------------|-------------------------|-------------------|
| (YOUNG JESSE L SU | JRPLUS ACCI | ·) | | | 12/01/19 | 12/31/19 |
| 1. CASH RECEIPTS (Co | ontributions) whic | h have been reported on | C3. List each dep | osit made since last C4 i | report was submitted. | |
| Date of deposit | Amount | Date of deposit | Amount | Date of deposit | Amount | Total deposits |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 2. TOTAL CASH RECEIF | PTS | | | Enter als | so on line 2 of C4 | \$0.00 |
| CODES FOR CLASSI | FYING EXPEND | TURES: If one of the foll | owing codes is use | ed to describe an expend | iture, no other descrip | tion 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
- 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..
- 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 |
|-----------|--|------|---------------------------------------|------------|
| Date Faiu | (Name and Address) | Code | and/or Description | Amount |
| N/A | Expenses of \$50 or less | N/A | N/A | \$19.42 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| · | | | Total from attached non | as ¢ 40.00 |

Total from attached pages

\$0.00

Enter also on line 11 of C4

\$19.42