## 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 100956019

02-05-2020

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

OE SCHMICK (SCHMICK	JOSEPH S SURE	PLUS ACCT)				
Mailing Address				City		
30 SOUTHVIEW				COLFAX,		
Zip + 4	Office Sought (Cand		Election Date			ucus Committees: During
<b>9111</b> Report Period From (last C-4	STATE REPRES	nd of period)	2010 Final Report?		•	mittee make an <u>independent</u> e not considered a contribution)
Covered 01/01/20	,	/31/20	Yes No X			e or local candidate?
RECEIPTS		7 3 1 7 2 0	165 110 22	*-		
RECEIFIG				*See next page	age	Yes No
Previous total cash and in kin (if beginning a new campaign	nd contributions (From n or calendar year, see	n line 8, last C-4) e instruction book	let)			\$ \$361,571.66
2. Cash received (From line 2, §	Schedule A)			\$	\$0.00	
3. In kind contributions received	I (From line 1, Schedu	ıle B)			\$0.00	
4. Total cash and in kind contrib	outions received this p	eriod (Line 2 plus	3)		 -	\$0.00
5. Loan principal repayments m						
6. Corrections (From line 1 or 3,	, Schedule C)		Show + 0	or (-)	\$0.00	
7. Net adjustments this period (					-	\$0.00
8. Total cash and in kind contrib				 T	 -	\$361,571.66
9. Total pledge payments due (I	From line 2, Schedule	B)	\$0.00			
EXPENDITURES						
<ol><li>Previous total cash and in kin (If beginning a new campaigr</li></ol>	id expenditures (From i or calendar year, see	n line 17, last C-4) e instruction book	) :let)		······	\$350,536.68
11. Total cash expenditures (From	m line 4, Schedule A)				\$550.00	
12. In kind expenditures (goods 8	& services) (From line	1, Schedule B)			\$0.00	
13. Total cash and in kind expend					=	\$550.00
14. Loan principal repayments m	ade (From line 2, Sch	edule L)			\$0.00	
15. Corrections (From line 2 or 3,	, Schedule C)		Show + 0	or (-)	\$0.00	
16. Net adjustments this period (	Combine lines 14 & 19	5)			Show + or (-)	\$0.00
17. Total cash and in kind expend	ditures during campai	gn (Combine line	s 10, 13 and 16)			\$351,086.68
CANDIDATES ONLY	Name not	CASH SUMMA		4=\		410 404 00
Won Lost U	Jnopposed on ballot		nd (Line 8 minus lir qual your bank account b			\$10,484.98
Primary election	H H	10 Liphilitips: /	Sum of loans and o	dobto owod)		
General election  Treasurer's Daytime Telephone N	lo:	19. Liabilities. (	Sum or loans and t	uebis oweu)	-	\$0.00
Treasurer's Daytime Telephone No.:  20. Balance (Surplus or deficit) (Line 18 minus line 19)  (509) 397-3121					19) -	\$10,484.98
CERTIFICATION: I certify that the inf	formation herein and on	accompanying sche			ect to the best of my	knowledge.
Candidate's Signature	Date		Treasurer's Signa	ture		Date
DE SCHMICK 02/05/20 FREDA L MILLE				LER		02/05/20

## **CASH RECEIPTS AND EXPENDITURE**

**SCHEDULE** to C4

cport bate		Candidate of Confinittee Name (Do not appreviate. Ose full name.)				Carididate of Corni
01/31/20	01/01/20		!T)	H S SURPLUS ACCT	(SCHMICK JOSEPH	JOE SCHMICK
l.	report was submitted	oosit made since last C4 re	C3. List each dep	h have been reported on C	PTS (Contributions) which	1. CASH RECEIP
Total deposits	Amount	Date of deposit	Amount	Date of deposit	Amount	Date of deposit
\$ \$0.00	so on line 2 of C4		louing codes is use	ITUDES: If one of the follow		2. TOTAL CASH
ipilon is generally	allule, no other descr	ed to describe an expendit	lowing codes is use	ITURES: If one of the follow		nooded The o

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..
- 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	Amount
N/A	Expenses of \$50 or less	N/A	N/A		
01/26/20	JOE SCHMICK P.O. BOX 620 COLFAX, WA 99111		Trailer space rent		\$550.00
			Total from attached pag	es \$	\$0.00

Enter also on line 11 of C4

\$550.00