PUBLIC	711 CAPITOL WAY R PO BOX 40908 OLYMPIA WA 98504- (360) 753-1111 TOLL FREE 1-877-60			ORT	C4 (3/97)	100959864
Candidate or C	ommittee Name (Do not abl	previate. Include full name)				03-08-2020
	MES G SURPLUS AC	CT)				
Mailing Address				City Graham, WA		
Zip + 4		Sought (Candidates)	Election Date	t in the second s	& Caucu	IS Committees: During
98338			2019			tee make an <u>independent</u>
Report Period Covered	From (last C-4)	To (end of period)	Final Report?	expenditure (i.e., an ex supporting or opposing		t considered a contribution)
Covered	02/01/20	02/29/20	Yes No X			
RECEIPTS 1. Previous (if beginn	total cash and in kind contr ing a new campaign or cale	ibutions (From line 8, last C- endar year, see instruction be	-4) ooklet)	*See next page		es No \$20,605.94
2. Cash rec	eived (From line 2, Schedul	e A)		···· <u></u> \$\$0	.00	
3. In kind co	ontributions received (From	line 1, Schedule B)		\$0	.00	
4. Total cas	h and in kind contributions	received this period (Line 2 p	olus 3)			\$0.00
5. Loan prir	ncipal repayments made (Fr	om line 2, Schedule L)		\$0	.00	
6. Correctio	ns (From line 1 or 3, Sched	ule C)	Show + or ((-) \$0	.00	
7. Net adjus	stments this period (Combin	e line 5 & 6)		Show + 0	or (-)	\$0.00
8. Total cas	h and in kind contributions	during campaign (Combine I	ines 1, 4 & 7)			\$20,605.94
9. Total plee	dge payments due (From lir	e 2, Schedule B)	\$0.00			
EXPENDITURE	ES	·				
10. Previous (If beginr	total cash and in kind expening a new campaign or cale	nditures (From line 17, last 0 endar year, see instruction b	C-4) ooklet)			\$2,207.95
11. Total cas	h expenditures (From line 4	, Schedule A)		<u>\$</u> (0.00	
12. In kind ex	xpenditures (goods & servic	es) (From line 1, Schedule E	3)	\$I	0.00	
13. Total cas	h and in kind expenditures	made this period (Line 11 pl	us line 12)			\$0.00
14. Loan prir	ncipal repayments made (Fr	om line 2, Schedule L)		\$(0.00	
15. Correctio	ns (From line 2 or 3, Sched	ule C)	Show + or ((-) \$ (0.00	
16. Net adjus	stments this period (Combin	e lines 14 & 15)		Show + 0	or (-)	\$0.00
17. Total cas	h and in kind expenditures	during campaign (Combine I	lines 10, 13 and 16)			\$2,207.95
CANDIDATES	ONLY Won Lost Unoppos	Name not CASH SUMI ed on ballot 18. Cash on		17)		
Primary election General election	aytime Telephone No.:	[Line 18 shou	uld equal your bank account bala	nce(s) plus your petty cash balar	ce.]	\$0.00
neasurer s Da	game relephone No	20. Balance	(Surplus or deficit) (Line	18 minus line 19)		\$18,397.99
CERTIFICATIO	N: I certify that the information	herein and on accompanying s	schedules and attachments i	s true and correct to the bes	t of mv kno	wledge.

SUMMARY, FULL REPORT

PUBLIC

DISCLOSURE COMMISSION

PDC OFFICE USE

CERTIFICATION: I certify that the information herein and on accompanying schedules and attachments is true and correct to the best of my knowledge.					
Candidate's Signature	Date	Treasurer's Signature	Date		
	03/08/20	Sharon Hanek	03/08/20		

CASH RECEIPTS AND EXPENDITURE



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

Candidate of Committee Nam	ne (Do not ab	breviate. Use full name.)			F	report Date	
(MCCUNE JAMES G SU	RPLUS ACC	CT)			02/01/20	02/29/2	20
1. CASH RECEIPTS (Contr	ributions) whic	h have been reported on	C3. List each dep	oosit made since last C4	report was submitted	l.	
Date of deposit	Amount	Date of deposit	Amount	Date of deposit	Amount	Total deposit	S
						•	
2. TOTAL CASH RECEIPTS	S			Enter a	lso on line 2 of C4	\$ <u></u>	\$0.00

TOTAL CASH RECEIPTS 2.

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

2

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