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

PDC OFFICE USE 100967262

C4

(3/97)

05-10-2020

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

JACQUELIN M MAYCUMBER (MAYCUMBER JAC	QUELIN	M SURPI	US ACC	CT)				
Mailing Address 127 N WYNNE ST				City COLV	ILLE,			
Zip + 4 Office Sought (Candidat 99114	tes)	Electio 2023	n Date					mittees: During e an <u>independent</u>
Report Period From (last C-4) To (end o	f period)	Final F	Report?	expend	iture (i.e.,	an expense	not consid	ered a contribution)
Covered 04/01/20 04/3	0/20	Yes	No X	<u>supporti</u>	ing or oppo	osing a state	e or local ca	ndidate?
RECEIPTS				*See ne	ext page		Yes	No
 Previous total cash and in kind contributions (From line (if beginning a new campaign or calendar year, see inst 							\$	\$53,115.03
2. Cash received (From line 2, Schedule A)				\$		\$0.00		
3. In kind contributions received (From line 1, Schedule E	3)					\$0.00		
4. Total cash and in kind contributions received this period						<u>.</u>		\$0.00
5. Loan principal repayments made (From line 2, Schedu						\$0.00		
	6. Corrections (From line 1 or 3, Schedule C) Show + or (-)					\$0.00		
7. Net adjustments this period (Combine line 5 & 6)								\$0.00
8. Total cash and in kind contributions during campaign (Combine line	es 1, 4 & 7)						\$53,115.03
9. Total pledge payments due (From line 2, Schedule B).			\$0.00					
EXPENDITURES 10. Previous total cash and in kind expenditures (From line (If beginning a new campaign or calendar year, see ins	e 17, last C-4 struction bool	4) klet)						\$43,583.62
11. Total cash expenditures (From line 4, Schedule A)						\$0.00		
12. In kind expenditures (goods & services) (From line 1, Schedule B)						\$0.00		
13. Total cash and in kind expenditures made this period (Line 11 plus	line 12)						\$0.00
14. Loan principal repayments made (From line 2, Schedu	le L)					\$0.00		
15. Corrections (From line 2 or 3, Schedule C)			Show + or	(-)		\$0.00		
16. Net adjustments this period (Combine lines 14 & 15)					Sho	ow + or (-)		\$0.00
17. Total cash and in kind expenditures during campaign (Combine line	es 10, 13 ar	nd 16)					\$43,583.62
	ASH SUMMA			(-)				CO 531 41
	Line 18 should e							\$9,531.41
	. Liabilities:	(Sum of loc	na and da	bto owod)				
General election 19 Treasurer's Daytime Telephone No.:	. Liabilities.		ins and de	bis oweu)				\$0.00
20. Balance (Surplus or deficit) (Line 18 minus line 19)						\$9,531.41		
CERTIFICATION: I certify that the information herein and on acco	mpanying sch				correct to th	ne best of my	knowledge.	
Candidate's Signature Date		Treasurer	's Signatu	Ire				Date
JACQUELIN MAYCUMBER 05/10	0/20						0	5/10/20

CASH RECEIPTS AND EXPENDITURE



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

Candidate of Committee Name (Do not abbreviate. Use full name.)						Report Date		
JACQUELIN M MAYCUME	BER (MAYO	CUMBER JACQUELI	N M SURPLUS	ACCT)	04/01/20	04/30/20		
1. CASH RECEIPTS (Contri	butions) whic	h have been reported on	C3. List each dep	oosit made since last C4	report was submitte	ed.		
Date of deposit	Amount	Date of deposit	Amount	Date of deposit	Amount	Total deposits		
						•		
2. TOTAL CASH RECEIPTS Enter also on line 2 of C4						\$	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:

- 1) If expenditures are in-kind or earmarked contributions to a candidate or committee or independent expenditures that benefit a candidate or 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		
I			Total from attached pag	es \$	\$0.00

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ \$0.00