

AMENDED

CAMPAIGN SUMMARY
RECEIPTS & EXPENDITURES

C4

(2/16)

PDC OFFICE USE

DATE FILED PDC

DEC 08 2018

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

Committee to Elect Jim Hargford (Surplus Fund)

Mailing Address

P.O. Box 844

City

Sunnyside

Zip + 4

98944-0844

Office Sought (Candidates)

Senate

Election Date

11-18

Report

Period

Covered

From (last C-4)

To (end of period)

Final Report?

Yes ☐ No ☒

*For PACs, Parties & Caucus Committees: During this report period, did the committee make an independent expenditure (i.e., an expense not considered a contribution) supporting or opposing a state or local candidate?

*See reverse.

Yes ☐No ☒

RECEIPTS

1. Previous total cash and in kind contributions (From line 8, last C-4) (if beginning a new campaign or calendar year, see instruction booklet) \$ 237,401.71
2. Cash received (From line 2, Schedule A) \$
3. In kind contributions received (From line 1, Schedule B)
4. Total cash and in kind contributions received this period (Line 2 plus 3)
5. Loan principal repayments made (From line 2, Schedule L) ()
6. Corrections (From line 1 or 3, Schedule C) Show + or (-)
7. Net adjustments this period (Combine line 5 & 6) Show + or (-)
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7) 237,401.71
9. Total pledge payments due (From line 2, Schedule B) ()

EXPENDITURES

10. Previous total cash and in kind expenditures (From line 17, last C-4) (if beginning a new campaign or calendar year, see instruction booklet) 233,108.93
11. Total cash expenditures (From line 4, Schedule A) 130.00
12. In kind expenditures (goods & services) (From line 1, Schedule B)
13. Total cash and in kind expenditures made this period (Line 11 plus line 12) 130.00
14. Loan principal repayments made (From line 2, Schedule L) ()
15. Corrections (From line 2 or 3, Schedule C) Show + or (-)
16. Net adjustments this period (Combine lines 14 & 15) Show + or (-) 233,238.93
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)

CANDIDATES ONLY

	Won	Lost	Unopposed	Name not on ballot
Primary election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Treasurer's Daytime Telephone No.:

(509) 839 3527

CASH SUMMARY

18. Cash on hand (Line 8 minus line 17) 4,162.78
[Line 18 should equal your bank account balance(s) plus your petty cash balance.]
19. Liabilities: (Sum of loans and debts owed) ()
20. Balance (Surplus or deficit) (Line 18 minus line 19) 4,162.78

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

Jim Hargford

11-6-18

Treasurer's Signature

Date

Jim Hargford

11-6-18

SEE INSTRUCTIONS ON REVERSE

CASH RECEIPTS AND EXPENDITURE

SCHEDULE A
to C4
(1/04)

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

Report Date

1. CASH RECEIPTS (Contributions) which have been reported on C3. List each deposit made since last C4 report was submitted.

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 \$

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;
- 2) When reporting payments to vendors for travel expenses, identify the traveler and travel purpose in the Description block;
- 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 in the Description block: 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, consultant or credit card company, provide a detailed breakdown in the Description block of expenses included in the payment.

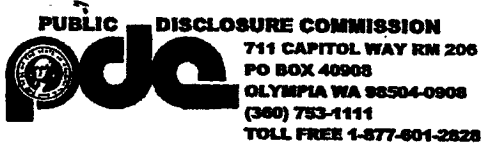
Date Paid	Vendor or Recipient (Name and Address)	Code	Purpose of Expense and/or Description	Amount
N/A	Expenses of \$50 or less	N/A	N/A	
9-5-18	Sunnyside Christian Sch. 811 North Ave Sunnyside, NJ		charity	10.00 \$120.00

4. TOTAL CASH EXPENDITURES

Total from attached pages \$

Enter also on line 11 of C4 \$ 130.00

CODE DEFINITIONS ON NEXT PAGE



CAMPAIGN SUMMARY RECEIPTS & EXPENDITURES

C4

(2/16)

PDC OFFICE USE

DATE FILED PDC

DEC 08 2018

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

Committee to elect Jim Honeyford (Surplus Funds)

Mailing Address

PO B 844

City

Sunnyside

Zip + 4

98944-0844

Office Sought (Candidates)

Senat

Election Date

11-18

Report
Period
Covered

From (last C-4)

To (end of period)

Final Report?

Yes ☐ No ☒

*For PACs, Parties & Caucus Committees: During this report period, did the committee make an independent expenditure (i.e., an expense not considered a contribution) supporting or opposing a state or local candidate?

*See reverse.

Yes ☐No ☐

RECEIPTS

1. Previous total cash and in kind contributions (From line 8, last C-4)
(if beginning a new campaign or calendar year, see instruction booklet) \$ 237 401.71
2. Cash received (From line 2, Schedule A) \$ 25 500.71
3. In kind contributions received (From line 1, Schedule B)
4. Total cash and in kind contributions received this period (Line 2 plus 3) 25 500.71
5. Loan principal repayments made (From line 2, Schedule L) ()
6. Corrections (From line 1 or 3, Schedule C) Show + or (-)
7. Net adjustments this period (Combine line 5 & 6) Show + or (-)
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7) 262 902.42
9. Total pledge payments due (From line 2, Schedule B) ()

EXPENDITURES

10. Previous total cash and in kind expenditures (From line 17, last C-4)
(if beginning a new campaign or calendar year, see instruction booklet) 233 239.93
11. Total cash expenditures (From line 4, Schedule A) 23 307.08
12. In kind expenditures (goods & services) (From line 1, Schedule B)
13. Total cash and in kind expenditures made this period (Line 11 plus line 12) 23 307.08
14. Loan principal repayments made (From line 2, Schedule L) ()
15. Corrections (From line 2 or 3, Schedule C) Show + or (-) + 2.60
16. Net adjustments this period (Combine lines 14 & 15) Show + or (-) 2.60
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16) 256 548.61

CANDIDATES ONLY

CASH SUMMARY

	Won	Lost	Unopposed	Name not on ballot
Primary election	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General election	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

18. Cash on hand (Line 8 minus line 17) 6353.81
(Line 18 should equal your bank account balance(s) plus your petty cash balance.)
19. Liabilities: (Sum of loans and debts owed) ()
20. Balance (Surplus or deficit) (Line 18 minus line 19) 6353.81

Treasurer's Daytime Telephone No.:

()

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

11-6-18

Treasurer's Signature

Date

11-6-18

SEE INSTRUCTIONS ON REVERSE

CASH RECEIPTS AND EXPENDITURE

SCHEDULE
to C4

A

(1/04)

11-6-18

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

Committee to Elect Jim Hawley (Surplus Fund)

Report Date

1. CASH RECEIPTS (Contributions) which have been reported on C3. List each deposit made since last C4 report was submitted.

Date of deposit	Amount	Date of deposit	Amount	Date of deposit	Amount	Total deposits
10-5-18	0.39					\$
11-5-18	0.32					

2. TOTAL CASH RECEIPTS

Enter also on line 2 of C4 \$ 0.71

CODES FOR CLASSIFYING EXPENDITURES: If one of the following codes is used to describe an expenditure, no other description is generally needed.

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- 2) When reporting payments to vendors for travel expenses, identify the traveler and travel purpose in the Description block; and
- 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 in the Description block: 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
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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, consultant or credit card company, provide a detailed breakdown in the Description block of expenses included in the payment.

Date Paid	Vendor or Recipient (Name and Address)	Code	Purpose of Expense and/or Description	Amount
N/A	Expenses of \$50 or less	N/A	N/A	
11/11/18	Hilton Garden Inn 401 E Yakima Ave Yakima, WA 98901	G	Campaign Dinner for 9	\$207.08
11/26/18	SRCC @ POB 11025 Olympia, WA 98508-9908	C	committee activities	2300.00

Total from attached pages \$

Enter also on line 11 of C4 \$2327.08

CODE DEFINITIONS ON NEXT PAGE

4. TOTAL CASH EXPENDITURES

(Surplus)

Committee to Elect Jim Honeyford

SCHEDULE TO C4

C

11-6-18

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

Date

1. CONTRIBUTIONS AND RECEIPTS (Include mathematical corrections.)

Date of Report	Contributor's Name or Description of Correction	Amount Reported	Corrected Amount	Difference (+ or -)
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
Total corrections to contributions Enter on line 6 of C4. Show + or (-).				\$

2. EXPENDITURES (Include mathematical corrections.)

Date of Report	Vendor's Name or Description of Correction	Amount Reported	Corrected Amount	Difference (+ or -)
11/6/18	UNKNOWN error	\$	\$	\$2.60
		\$	\$	\$
		\$	\$	\$
Total corrections to expenditures Enter on line 15 of C4. Show + or (-).				\$

3. REFUNDS FROM VENDORS The below listed amounts have been received as refunds on expenditures previously reported. The refund has been deposited and reported on C3 report, Line 1d.

Date of Report	Source/Person Making Refund	Amount of Refund
		\$
		\$
		\$
Total refunds Enter as (-) on line 6 and line 15 of C4.		\$