#### DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908

#### AMENDED **CAMPAIGN SUMMARY**

## **RECEIPTS & EXPENDITURES**

PDC OFFICE USE

(380) 753-1111 TOLL FREE 1-877-601-2828			,	(2/16)	DATE	filed PQ
Candidate or Committee Name (Do not abbreviate. In		1	<i>(, ,</i>	$\overline{C}$	](	
Committee to Elec	& Jim M	levestord	Surply	tund,	A DEC	08 2018
Mailing Address			City		1	
POB-1 844			SANKYSI	91		
Zip + 4 Office Sought (Candidates)		Election Date	*For PACs, Part	ies & Cauc	us Commit	tees: During
Report From (last C-4) To	(end of period)	// · / \/ Final Report?	this report period, of expenditure (i.e., a			
Period		•	contribution) suppo			
RECEIPTS	1-30-18	Yes No 🔼	candidate?			
			*See reverse,	Υ	es 🗌	No 🔀,
<ol> <li>Previous total cash and in kind contributions (Fr (if beginning a new campaign or calendar year,</li> </ol>	om line 8, last C-4)	<del>I</del> )	•	_	777	4.1 7
	•					701 7
2. Cash received (From line 2, Schedule A)					يراء ولإعلام مستعم	and making the
3. In kind contributions received (From line 1, Sche	edule B)	••••••				
4. Total cash and in kind contributions received thi	s period (Line 2 plus 3				•	
5. Loan principal repayments made (From line 2, S					•	
6. Corrections (From line 1 or 3, Schedule C)	********************************	Show + or (	-)		•	
7. Net adjustments this period (Combine line 5 & 6						•
					<del></del> _	
8. Total cash and in kind contributions during camp	paign (Combine lines 1	1, 4 & 7)	•••••••••••••••••••••••••••••••••••••••	2	3740	1:71
9. Total pledge payments due (From line 2, Schedu	ule B)	·		•		
EXPENDITURES	•					
10. Previous total cash and in kind expenditures (Fro	om line 17 last C4)					
<ol> <li>Previous total cash and in kind expenditures (Fre (If beginning a new campaign or calendar year, s</li> </ol>	see instruction booklet	r)	*****************************		331	08.93
11. Total cash expenditures (From line 4, Schedule	A)		130 00		<del></del>	
-						
12. In kind expenditures (goods & services) (From lin						
13. Total cash and in kind expenditures made this pe	eriod (Line 11 plus line	: 12)	***************************************		130	, ε δ
14. Loan principal repayments made (From line 2, Se	chedule L)	***************************************				
15. Corrections (From line 2 or 3, Schedule C)						
•					1	
16. Net adjustments this period (Combine lines 14 &	15)	***************************************	Show	+ or (-) 2	32 23	38.93
17. Total cash and in kind expenditures during camp						
CANDIDATES ONLY	CASH SUMMARY		·	,		<del></del>
Name not Won Lost Unopposed on ballot	18. Cash on hand (	l ine 8 minus line 1	7)	4	11/2 -	7 0
Primary election	[Line 18 should equal	your bank account balan	ce(s) plus your petty cash b	alance.]	, , , ,	<del>t 8</del>
General election	19. Liabilities: (Sun	n of loans and debi	s owed)	-		
Treasurer's Daytime Telephone No.:	1					<del></del>
(504) 819 3527	20. Balance (Surplu	is or deficit) (Line 1	8 minus line 19)		162.	78
CERTIFICATION: I certify that the information herein and on Candidate's Signature / / Date	accompanying schedules	and attachments is tr	ue and correct to the be	st of my knowle	dge.	
Date	I re	asyrer's Signature	1 n		Da	ate
Jim / 19/1	- 18	An 10	7//		11.6	1-18
J No. 1 July	10-18	/	101	SEE INSTRU	CTIONS ON	REVERSE
Jui Hall 10.	- , -					

### **CASH RECEIPTS AND EXPENDITURE**

Amount | Date of deposit

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

**SCHEDULE** to C4

Amount | Date of deposit

	or Committee Name		
"modistate.	ar Camadilla - 81	Atta	
	is tarinimee Name .	/I IA that abbassiols	1 Lan E M 1
	a. Administrate (ACM) IC.		LISSETTHI DAME 1

Date of deposit

2. TOTAL CASH RECEIPTS

Report Date

**Total deposits** 

**Amount** 

Enter also on line 2 of C4 \$

CODES	OP CLASSIEVING EVENT		Enter also on line	e 2 of C4 \$	
needed.	OR CLASSIFYING EXPENDITURES: If one of the follows:	wing code	es is used to describe an expenditure, no	other description	is generativ
ine excer	DUORS are:		*		
2) Who 3) If ex	xpenditures are in-kind or earmarked contributions ididate or committee, identify the candidate or commenter reporting payments to vendors for travel expenses, it is indirectly to compensate tion, use code "V" and provide the following information ount paid each during the reporting period, and cumulating	dentify the te a persor	traveler and travel purpose in the Descriptor or entity for soliciting signatures on a st	iption block; and	
·	CODE DEFINITIONS ON NEXT PAGE  C - Contributions (monetary, I - Independent Expenditures L - Literature, Brochures, Pri B - Broadcast Advertising (R N - Newspaper and Periodic O - Other Advertising (yard s V - Voter Signature Gathering	in-kind & s s inting adio, TV) al Advertis	transfers) P - Postage, Management F - Fundraising T - Travel, According M - Management M - Wages, Sal	ailing Permits I Polls Event Expenses ommodations, Ment/Consulting Ser	eals Vices
a) Expendit a) Expe amou b) Itemi c) For e break	TURES enditures of \$50 or less, including those from petty cash unt column on the first line below It is each expenditure of more than \$50 by date paid, nate that payment to a candidate, campaign worker, PR firm known in the Description block of expenses included in	, need not me and ad a, advertising	be itemized. Add up these expenditures	eration and Overless and show the to mount.	tal in the
Date Paid	Vendor or Recipient (Name and Address)	Code	Purpose of Expense		
N/A	Expenses of \$50 or less	1	and/or Description	<del></del>	Amount
		N/A	N/A	1	0.00
1-5-18	Sunayadi christine sch. 811 North, AUC KA		charity	\$1.	20,00
		-			
			·		
TOTAL CASH	EXPENDITURES		Total from attached	pages \$	
•			Enter also on line 11	of CA E /A	
	,		CODE DEFIN	ITIONS ON NE	XT PAGE

# PUBLIC DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111

## CAMPAIGN SUMMARY RECEIPTS & EXPENDITURES

**C4** 

PDC OFFICE USE

(360) 753-1111 TOLL FREE 1-877-601-2828	DATE FILED PDO
Candidate or Committee Name (Do not abbreviate. Include full name)	
Comm, Hee to elect Jim Honeytard (Surplus funds) Mailing Address  City	DEC 0 8 2018
On A Culd	
Zip + 4 Office Sought (Candidates) Election Date   + /	
7) 497 -08 17   Servin   17-78   this report period, did the	& Caucus Committees: During the committee make an independent
Period contribution) supporting	pense not considered a or opposing a state or local
Covered 907770 Per No C candidate?	<u> </u>
"See reverse,	Yes No No
Previous total cash and in kind contributions (From line 8, last C-4)     (if beginning a new campaign or calendar year, see instruction booklet)	\$237401.71
2. Cash received (From line 2, Schedule A)	
In kind contributions received (From line 1, Schedule B)	The second secon
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)	r (-)
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 <i>9</i> 3
11. Total cash expenditures (From line 4, Schedule A)	
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)	No. of the second
15. Corrections (From line 2 or 3, Schedule C)	<del></del>
16. Net adjustments this period (Combine lines 14 & 15)	
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)	256 548.61
CANDIDATES ONLY  Name not  CASH SUMMARY	
Won Lost Unopposed on ballot 18. Cash on hand (Line 8 minus line 17)	256 548.61 6353 81
General election 19   19   jabilities: (Sum of loans and dakts and the	*
Treasurer's Daytime Telephone No.:  (20. Balance (Surplus or deficit) (Line 18 minus line 19)	
CERTIFICATION: I certify that the information beggin and an accessory	/3.62 ) A X I
// / reasurer's Signature	my knowledge.
Jan 11-6-18 In Hay	11-6-18
(/ / <sup>U</sup> SEE	INSTRUCTIONS ON REVERSE

#### **CASH RECEIPTS AND EXPENDITURE**

SCHEDULE to C4

A

11-6-18

Commit	ke + Elect	Jim Howevord		inplus F	Endi	Report Date
1. CASH REC	EIPTS (Contributions) wh	ich have been reported on (				ubmitted.
Date of deposit	•	Date of deposit	Amo	ount Date of dep	osit Am	nount Total deposits
10-5-12	0.39					\$
11-5-12	3 O.J2	_				
2. TOTAL CAS					Enter also on line 2 o	of C4 \$ 0.71
CODES FO	R CLASSIFYING EXPEN	DITURES: If one of the follo	wing codes	is used to describe	an expenditure, no other	er description is generally
The excepti					••	
cano	laare or committee, iden	earmarked contributions t lify the candidate or comm	nittee in the	Description block	ke.	
2) Wher	reporting payments to ve	ndors for travel expenses, ic	dentify the to	aveler and travel n	umose in the Description	n block; and wide initiative or referendum
peuuc	on, use code "v" and provi	de the following information	in the Desci	intion block: name	a and addrage of each n	erson/entity compensated,
		porting period, and cumulati	_		to gather signatures.	سريجه شيايسان الأناسات ويها
	CODE (DEFINITIONS I	C - Contributions (monetary, - Independent Expenditure:	, in-kind & tra s	ansfers)	P - Postage, Mailing S - Surveys and Po	
	ON NEXT PAGE [	Literature, Brochures, Pri B - Broadcast Advertising (R	inting		F - Fundraising Eve	ent Expenses
	1	<ul> <li>Newspaper and Periodic</li> </ul>	al Advertisin	g	T - Travel, Accomm M - Management/C	consulting Services
	,	O - Other Advertising (yard s / - Voter Signature Gatherin	signs, button g	s, etc.)	W - Wages, Salarie G - General Operat	
3. EXPENDITI			_		·	
a) Exper	nditures of <u>\$50 or less,</u> inc int column on the first line I	luding those from petty cash	n, need not b	e itemized. Add u	p these expenditures an	id show the total in the
b) Itemiz	ce each expenditure of mor	e than \$50 by date naid ina	me and add	ress of vendor, co	de/description, and amo	unt.
C) FULC	au payment to a candidat	e, campaign worker, PR firm ock of expenses included in	n adverticin	ellisaass vaaane n	nt or credit card compar	ry, provide a detailed
		or Recipient			pose of Expense	
Date Paid	(Name a	nd Address)	Code	and	d/or Description	- Amount
N/A	I	of \$50 or less	N/A		N/A	
11/1.		rden Inn				
8(11/1	Takima h	AMA ALC		CAMPALL	- DINAU GO	9 307.05
11/1/2	SRCC 8		1	<del>- 1/ ) .</del>	e Adjustie	9 \$207.08
126/18	POB 11025	98588-9908	10	(omm, He	o Adulto	173/11
	Olyan , Mi	103000	+		( 130)10117	) 93/00,00
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-			<u> </u>	······································	Total from attached pa	300c <b>©</b>
4. TOTAL CASI	H EXPENDITURES	•				of C4 \$23 307.08
						TIONS ON NEXT DAGE

(Surplus)

SCHEDULE TO C4

11-6-18

			(	(90,	دعام	′
Committee	1CC	RRECT	IONS	Hon	exfor	4
Candidate or Committee	Name (Do	not abbreviate.	Use full nan	ne.)	7	

Candidate or C	ommittee Name (Do not abbreviate. Use full name.)		Date		
1. CONTRIBUT	TIONS AND RECEIPTS (Include mathematical corrections.)				
Date of Report	Contributor's Name or Description of Correction	Amount Reported	Corrected Amount	Difference (+ or -)	
		\$	\$	\$	
	v	\$	\$	\$	
		<b> </b>	\$	•	
		\$	1 \$	<b>\$</b>	
				<u> </u>	
		\$	\$	\$	
				•	
		\$	\$	\$	
		Total com Enter on line	ections to contributions 6 of C4. Show + or (-).	\$	
2. EXPENDITU	RES (Include mathematical corrections.)				
Date of Report	Vendor's Name or Description of Correction	Amount Reported	Corrected Amount	Difference (+ or -)	
1/6/18	UNKNOWN EXTON	\$	\$	\$72.60	
, -, •			,	2,100	
			,		
		\$	\$	<b>  \$</b> 	
`.	•	`			
		\$	\$	\$	
				,	
,		Total corre	l ections to expenditures		
REFUNDS F	ROM VENDORS The below listed amounts have been received as reported on C3 report. Line 1d	Enter on line 1	5 of C4. Show + or (-).	Stund has been	
deposited and of Date of	reported on Go report, Line 10.		eviously reported. The r	Amount of Refund	
Report	Source/Person Making Refund				
1				\$	
		•			
				\$	
			,		
(02)		Enter as (-) on lir	Total refunds	\$	
3/93)	Enter as (-) on line 6 and line 15 of C4.				