

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4(3/97)

PDC OFFICE USE 110076343

03-10-2022

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

(Bob Hagglund for Wash	nington)					
Mailing Address Post Office Box 1125					City Lake Stevens, WA	
Zip + 4 98258	Office Sought (Candidates) SECRETARY OF STATE		ection Da	ate	*For PACs, Parties & Cau this report period, did the com	
Report Period From (last C-4	4) To (end of per	riod) Fir	nal Repo	rt?	expenditure (i.e., an expense	not considered a contribution)
Covered 02/01/2:	2 02/28/2	22 Ye	s No	x	supporting or opposing a state	e or local candidate?
RECEIPTS		•			*See next page	Yes No
Previous total cash and in kir (if beginning a new campaign	nd contributions (From line 8, I n or calendar year, see instruc	ast C-4) tion booklet)				\$ \$563.28
2. Cash received (From line 2, S	Schedule A)				··· \$ \$99.70	
3. In kind contributions received	d (From line 1, Schedule B)				··· \$2,598.03	
4. Total cash and in kind contrib	outions received this period (Li	ine 2 plus 3)			 -	\$2,697.73
5. Loan principal repayments m	ade (From line 2, Schedule L)				\$0.00	
6. Corrections (From line 1 or 3	, Schedule C)		Sho	w + or (\$0.00	
7. Net adjustments this period (Combine line 5 & 6)				Show + or (-)	\$0.00
8. Total cash and in kind contrib	outions during campaign (Com	bine lines 1, 4	& 7)			\$3,261.01
9. Total pledge payments due (l	From line 2, Schedule B)		\$0	.00		
EXPENDITURES						
Previous total cash and in kir (If beginning a new campaigr	nd expenditures (From line 17, n or calendar year, see instruc	, last C-4) tion booklet)			<u></u>	\$368.28
11. Total cash expenditures (Fro	m line 4, Schedule A)				··· \$5.00	
12. In kind expenditures (goods 8	& services) (From line 1, Sche	dule B)			\$2,598.03	
13. Total cash and in kind expend	ditures made this period (Line	11 plus line 12)		<u>-</u>	\$2,603.03
14. Loan principal repayments m	ade (From line 2, Schedule L)				\$0.00	
15. Corrections (From line 2 or 3	, Schedule C)		Show	w + or (\$0.00	
16. Net adjustments this period (Combine lines 14 & 15)				Show + or (-)	\$0.00
17. Total cash and in kind expend	ditures during campaign (Com	nbine lines 10, 1	3 and 1	6)		\$2,971.31
CANDIDATES ONLY Name not CASH SUMMARY						
Won Lost U		ot 18. Cash on hand (Line 8 minus line 17). [Line 18 should equal your bank account balance(s				\$289.70
Primary election		19. Liabilities: (Sum of loans and debts owed)				\$2,286,41
Treasurer's Daytime Telephone No.:						*******
(509)591-0812	20. Bal	20. Balance (Surplus or deficit) (Line 18 minus			18 minus line 19)	(\$1,996.71)
CERTIFICATION: I certify that the int	formation herein and on accompar					
Candidate's Signature	Date	Treas	urer's S	ignatur	e	Date
BOB HAGGLUND	03/10/2	2 Mark	Buse	a		03/10/22

CASH RECEIPTS AND EXPENDITURE

SCHEDULE

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

Report Date

Carialaato of Committee	riamo (Bonotab	bioviato. Coo idii ilailio.	,			
(Bob Hagglund fo	or Washingto	on)			02/01/22	02/28/22
1. CASH RECEIPTS (Contributions) whic	ch have been reported or	C3. List each dep	oosit made since last C4	report was submitted	
Date of deposit	Amount	Date of deposit	Amount	Date of deposit	Amount	Total deposits
02/15/2022	\$99.70					
2. TOTAL CASH RECE	EIPTS			Enter a	so on line 2 of C4	\$ \$99.70
CODES FOR CLASS	SIEVING EXPEND	ITURES: If one of the fol	lowing codes is use	ad to describe an evnen	diture no other descri	ntion is generally

- 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

Enter also on line 11 of C4

\$5.00

- F Fundraising Event Expenses
- T Travel, Accommodations, Meals M - Management/Consulting Services
- W Wages, Salaries, Benefits
- G General Operation and Overhead

3. EXPENDITURES

4. TOTAL CASH 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		\$5.00
			Total from attached pag	es \$	\$0.00

IN KIND CONTRIBUTIONS, PLEDGES, ORDERS, DEBTS, OBLIGATIONS

SCHEDULE TO C4 **B** (11/93)

3

Candidate or Committee Name (Do not abbreviate. Use full name.)
(Bob Hagglund for Washington)

Report Date 02/01/22 02/28/22

1. IN KIND CONTRIBUTIONS RECEIVED (goods, services, discounts, etc.)

Date Received	Contributor's Name and Address	Description of Contribution	Fair Market Value	Aggregate Total	P R I	G E N	If total over \$100, Employer Name, City, State & Occup
2/06/22	BOB HAGGLUND Post Office Box 1125 Lake Stevens, WA 98258	Microsoft internet services	\$13.08	\$2,941.31	x		
2/28/22	BOB HAGGLUND Post Office Box 1125 Lake Stevens, WA 98258	Postage for campaign fundrasing	\$1,136.80	\$2,941.31	x		
2/28/22	BOB HAGGLUND Post Office Box 1125 Lake Stevens, WA 98258	Printed materials for campaign fundraising	\$1,149.61	\$2,941.31	x		
2/28/22	BOB HAGGLUND Post Office Box 1125 Lake Stevens, WA 98258	US Postage for campaign mailers	\$290.00	\$2,941.31	х		
2/28/22	BOB HAGGLUND Post Office Box 1125 Lake Stevens, WA 98258	Digital reference material, Amazon.com	\$1.08	\$2,941.31	х		
2/28/22	BOB HAGGLUND Post Office Box 1125 Lake Stevens, WA 98258	Campaign event hosting materials	\$7.46	\$2,941.31	х		
		TOTAL THIS PAGE	\$2,598.03				

LOANS

SCHEDULE TO C3 OR C4

(12/99)

Page 4

Candidate or Committee Name Report Date (Bob Hagglund for Washington) 02/01/22 02/28/22 1. MONETARY OR IN-KIND LOAN RECEIVED. Loans are considered contributions and are subject to any applicable limit. G Date Lender's Name and Address Amount of Loan **Annual Interest** Repayment Date Due R Ε Rate Schedule Loaned BOB HAGGLUND Ν 02/28/22 As funds 08/01/22 Post Office Box 1125 0% \$1,136.80 Lender's Occupation and Lake Stevens, WA 98258 Name, City & State of Employer In-Kind Loan If monetary loan, also include this amount on line 1c, C3 report. If in-kind loan, itemize in Part 1 of Schedule B. G Amount Liable For Aggregate Total Endorser's Occupation and Name, Name and Address of Each Loan Endorser, Co-Signer R Ε (Same as Loan City, & State of Employer Ν Amount) Lender's Name and Address G **Annual Interest** Repayment Date Due Date Amount of Loan R Ε Schedule Rate Loaned Ν 02/28/22 BOB HAGGLUND As funds 08/01/22 х Post Office Box 1125 \$1,149.61 0% Lender's Occupation and Lake Stevens, WA 98258 Name, City & State of Employer In-Kind Loan If monetary loan, also include this amount on line 1c, C3 report. If in-kind loan, itemize in Part 1 of Schedule B. G Name and Address of Each Loan Endorser, Co-Signer Amount Liable For Aggregate Total Endorser's Occupation and Name, R Ε (Same as Loan City, & State of Employer Ν Amount) Date Lender's Name and Address G Amount of Loan **Annual Interest** Repayment Date Due R Ε Schedule Loaned Rate Ν Lender's Occupation and Name, City & State of Employer If monetary loan, also include this amount on line 1c, C3 report. If in-kind loan, itemize in Part 1 of Schedule B. Amount Liable For Endorser's Occupation and Name, Name and Address of Each Loan Endorser, Co-Signer Aggregate Total R Ε (Same as Loan City, & State of Employer Ν Amount) G Date Lender's Name and Address Amount of Loan **Annual Interest** Repayment Date Due R Ε Rate Schedule Loaned Ν Lender's Occupation and Name, City & State of Employer If monetary loan, also include this amount on line 1c, C3 report. If in-kind loan, itemize in Part 1 of Schedule B. Name and Address of Each Loan Endorser, Co-Signer G Amount Liable For Aggregate Total Endorser's Occupation and Name, R Е (Same as Loan City, & State of Employer Ν Amount)

LOANS

SCHEDULE TO C4

(12/99)

5

Candidate or Committee Name
(Bob Hagglund for Washington)

Report Date 02/01/22 02/2

02/28/22

4. LOANS STILL OWED. List each loan that has previously been reported and still has a balance due.

Date	Lender's Name and Address	Original Amount	Principal Repaid or Forgiven	Amount Owed
2/28/22	BOB HAGGLUND Post Office Box 1125 Lake Stevens, WA 98258	\$1,136.80	\$0.00	\$1,136.80
2/28/22	BOB HAGGLUND Post Office Box 1125 Lake Stevens, WA 98258	\$1,149.61	\$0.00	\$1,149.61
	•		Subtotal This Page	\$2,286.41