

Respondent Name
Paul Mahre
Complainant Name
Norman Smith
Complaint Description
<p>Norm Smith (Sat, 12 Sep 2020 at 2:13 PM)</p> <p>Complaint Discription: Paul F. Mahre, County Commissioner Candidate, District 3, Pend Oreille County.</p> <p>Candidate's C4 100995506 dated 9/03/2020: 7/29/20 Walt's Mailing Service - \$550.00 - Tri-fold mailer. Quantity not specified.</p> <p>Candidate's C4 100992864 dated 8/20/20: 7/15/20 Mahre (WMS) - \$1,001.77 - Tri-fold mailer. Quantity not specified.</p> <p>Candidate's C4 100992863 dated 8/20/20: 7/01/20 Mahre (WMS) - \$751.76 - Postcard mailer. Quantity not specified.</p>
What impact does the alleged violation(s) have on the public?
Impact: Failure to disclose financial affairs. Lack of transparency.
List of attached evidence or contact information where evidence may be found
<p>Paul F. Mahre 2671 Flowery Trail Road Usk, WA. 99180-9740 Phone: (509) 445-1032 Email: votepaulfmahre@protonmail.com</p> <p>Candidate's C4 Filings. See attached screenshots:</p>
List of potential witnesses with contact information to reach them
<p>Paul F. Mahre 2671 Flowery Trail Road Usk, WA. 99180-9740 Phone: (509) 445-1032 Email: votepaulfmahre@protonmail.com</p>
Certification (Complainant)
I certify (or declare) under penalty of perjury under the laws of the State of Washington that information provided with this complaint is true and correct to the best of my knowledge and belief.

IN KIND CONTRIBUTIONS, PLEDGES, ORDERS, DEBTS, OBLIGATIONS

SCHEDULE
TO C4

B

(11/93)

3

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

PAUL F MAHRE (Paul F Mahre)

Report Date

07/14/20 07/27/20

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
07/15/20	PAUL F MAHRE 2671 Flowery Trail Rd Usk, WA 99180-9740	Campaign tri-fold mailer WMS 9610 E 1st Ave	\$1,001.77	\$3,223.40	X						
TOTAL THIS PAGE			\$1,001.77								

CASH RECEIPTS AND EXPENDITURE

SCHEDULE **A**
to C4
(11/93)

2

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

Report Date

PAUL F MAHRE (Paul F Mahre)

07/28/20

08/31/20

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
07/29/2020	\$50.00					
08/03/2020	\$100.00					

2. TOTAL CASH RECEIPTS

Enter also on line 2 of C4 \$ **\$150.00**

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;
- 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 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
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	Amount
N/A	Expenses of \$50 or less	N/A	N/A	
07/29/20	WALT'S MAILING SERVICE 9610 E 1st Ave Spokane Valley, WA 99206		Tri-fold mailer by WMS 9610 E 1st Ave Spokane Valley WA 99206	\$550.00
08/04/20	SELKIRK SUN PO Bo 444 Metaline Falls, WA 99153		Ad in July 9, 2020 Selkirk Sun 3.5" x 5" space	\$75.00
08/04/20	SELKIRK SUN PO Bo 444 Metaline Falls, WA 99153		Ad in July 23, 2020 Selkirk Sun 3.5" x 5" space	\$75.00

4. TOTAL CASH EXPENDITURES

Total from attached pages \$ **\$0.00**

Enter also on line 11 of C4 \$ **\$700.00**