

 PUBLIC DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 Toll Free 1-877-601-2828		<h1>Candidate Registration</h1>	<h1>C1</h1> (1/2008)	100410990 05-17-2011
Candidate's Name (Give candidate's full name.) SCOTT R HIGGINS		Telephone Number 360-834-0848		
Candidate's Committee Name (Do not abbreviate.) FRIENDS OF SCOTT HIGGINS		Fax Number		
Mailing Address 2726 NW 34TH CIRCLE		Candidate's E-Mail Address HIGGINS360@COMCAST.NET		
City CAMAS	County CLARK	Zip + 4 98607	Campaign E-Mail Address higgins360@comcast.net	
1. What office are you running for? MAYOR		Legislative District, County or City CITY OF CAMAS	Position No. 1	
		Do you now hold this office? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		
2. Political party (if partisan office) NON PARTISAN		3. Date of general or special election 11-08-2011		
4. How much do you plan to spend during your entire election campaign, including the primary and general elections? Based on that estimate, choose one of the reporting options below. If no box is checked you are obligated to use Option II, Full Reporting. See instruction manuals for information about reports required and changing reporting options.				
<input checked="" type="checkbox"/> Option I MINI REPORTING: In addition to my filing fee of \$156.00, I will raise and spend no more than \$5,000, including any charges for inclusion in state and local voters pamphlets. I will not accept more than \$500 in the aggregate from any contributor except myself.				
<input type="checkbox"/> Option II FULL REPORTING: I will use the Full Reporting system. I will file the frequent, detailed campaign reports required by law.				
5. Treasurer's Name and Address. Does treasurer perform <u>only</u> ministerial functions? Yes ___ No <input checked="" type="checkbox"/> See WAC 390-05-243 and next page for details. List deputy treasurers on attached sheet.		Daytime Telephone Number		
SCOTT R HIGGINS 2726 NW 34TH CIRCLE, CAMAS WA 98607		360-834-0848		
6. Persons who perform only ministerial functions on your behalf <u>and</u> on behalf of other candidates or political committees. List name, title and address of these persons. See WAC 390-05-243 and next page for details. <input type="checkbox"/> Continued on attached sheet.				
7. Committee Officers and other persons who authorize expenditures or make decisions on your behalf. List name, title and address. See next page for definition of "officer." <input type="checkbox"/> Continued on attached sheet.				
8. Campaign Bank or Depository RIVERVIEW SAVINGS	Branch CAMAS	City CAMAS		
9. Related or Affiliated Political Committees. List name, address and relationship. <input type="checkbox"/> Continued on attached sheet.				
10. Campaign books must be open to the public by appointment between 8 a.m. and 8 p.m. during the eight days before the election, except Saturdays, Sundays, and legal holidays. In the space below, provide contact information for scheduling an appointment and the address where the inspection will take place. It is not acceptable to provide a post office box or an out-of-area address. Street Address, Room Number, City where campaign books will be available for inspection 2726 NW 34TH CIRCLE, CAMAS In order to make an appointment, contact the campaign at (telephone, fax, e-mail): 360-834-0848 HIGGINS360@COMCAST.NET				
11. CERTIFICATION: I certify that this report is true, complete and correct to the best of my knowledge. Candidate's Signature SCOTT R HIGGINS		Date 05-17-2011		

 PUBLIC DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 Toll Free 1-877-601-2828		<h1>Candidate Registration</h1>		<h1>C1</h1> (1/2008)	100428575 AMENDS 100410990 09-13-2011
Candidate's Name (Give candidate's full name.)			Telephone Number		
SCOTT R HIGGINS			360-834-0848		
Candidate's Committee Name (Do not abbreviate.)			Fax Number		
FRIENDS OF SCOTT HIGGINS					
Mailing Address			Candidate's E-Mail Address		
2726 NW 34TH CIRCLE			HIGGINS360@COMCAST.NET		
City	County	Zip + 4	Campaign E-Mail Address		
CAMAS	CLARK	98607	higgins360@comcast.net		
1. What office are you running for?		Legislative District, County or City	Position No.	Do you now hold this office?	
MAYOR		CITY OF CAMAS	1	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
2. Political party (if partisan office)			3. Date of general or special election		
NON PARTISAN			11-08-2011		
4. How much do you plan to spend during your entire election campaign, including the primary and general elections? Based on that estimate, choose one of the reporting options below. If no box is checked you are obligated to use Option II, Full Reporting. See instruction manuals for information about reports required and changing reporting options.					
<input type="checkbox"/> Option I MINI REPORTING: In addition to my filing fee of \$_____, I will raise and spend no more than \$5,000, including any charges for inclusion in state and local voters pamphlets. I will not accept more than \$500 in the aggregate from any contributor except myself.					
<input checked="" type="checkbox"/> Option II FULL REPORTING: I will use the Full Reporting system. I will file the frequent, detailed campaign reports required by law.					
5. Treasurer's Name and Address. Does treasurer perform <u>only</u> ministerial functions? Yes ___ No <input checked="" type="checkbox"/> See WAC 390-05-243 and next page for details. List deputy treasurers on attached sheet.			Daytime Telephone Number		
SCOTT R HIGGINS 2726 NW 34TH CIRCLE, CAMAS WA 98607			360-834-0848		
6. Persons who perform only ministerial functions on your behalf <u>and</u> on behalf of other candidates or political committees. List name, title and address of these persons. See WAC 390-05-243 and next page for details. <input type="checkbox"/> Continued on attached sheet.					
7. Committee Officers and other persons who authorize expenditures or make decisions on your behalf. List name, title and address. See next page for definition of "officer." <input type="checkbox"/> Continued on attached sheet.					
8. Campaign Bank or Depository		Branch	City		
RIVERVIEW SAVINGS		CAMAS	CAMAS		
9. Related or Affiliated Political Committees. List name, address and relationship. <input type="checkbox"/> Continued on attached sheet.					
10. Campaign books must be open to the public by appointment between 8 a.m. and 8 p.m. during the eight days before the election, except Saturdays, Sundays, and legal holidays. In the space below, provide contact information for scheduling an appointment and the address where the inspection will take place. It is not acceptable to provide a post office box or an out-of-area address.					
Street Address, Room Number, City where campaign books will be available for inspection 2726 NW 34TH CIRCLE, CAMAS In order to make an appointment, contact the campaign at (telephone, fax, e-mail): 360-834-0848 HIGGINS360@COMCAST.NET					
11. CERTIFICATION: I certify that this report is true, complete and correct to the best of my knowledge.					
Candidate's Signature			Date		
SCOTT R HIGGINS			09-13-2011		

NOV 28 2011

Office Use Only: No. _____

Public Disclosure Commission



WASHINGTON STATE PUBLIC DISCLOSURE COMMISSION
COMPLAINT FORM

(See instructions on the last page.)

Description of Complaint

1. RESPONDENT:

Identify who you are filing a complaint against and provide all contact information you have for them. Give names and titles, if any, for individuals, and the full name of any organization. Please note that the PDC does not enforce federal campaign finance laws or local ordinances.

Example #1: Joe Public, Mayor of My Town,

123 Main Street, Your Town, State, Phone: 555-123-4567, Email: unknown

Example #2: The Political Action Group (instead of P.A.G.), 123 Main Street, Your Town, State,

Phone: 555-123-4567, Email: pag@pag.org

CITY OF CAMAS, LLOYD HALVERSON-CITY OF CAMAS
ADMINISTRATOR, JENNIFER GORSOCH-CITY OF CAMAS
HUMAN RESOURCES DIRECTOR, JERRY ACHESON-CITY OF
CAMAS PARKS AND RECREATION DIRECTOR, SCOTT HIGGINS-
CITY OF CAMAS MAYOR, 616 NE 4TH AVE. CAMAS
WASHINGTON 98607 PHONE 360-817-7013 * SEE ATTACHED
SHEETS

2. ALLEGED VIOLATIONS:

Explain how and when you believe the people/entities you are filing a complaint against violated RCW 42.17 or Title 390 WAC. Be as detailed as possible about dates, times, places and acts. If you can, cite which specific laws or rules you believe were violated. Attach additional pages if needed.

I BELIEVE THAT MR HIGGINS HAS VIOLATED
RCW'S 42.17.080 AND 42.17.090 BY FAILING TO
FILE THE REQUIRED C4 REPORTS. * SEE ATTACHED.
I ALSO BELIEVE THAT MAYOR HIGGINS AND
SEVERAL CITY OF CAMAS EMPLOYEES INCLUDING
THOSE LISTED ABOVE HAVE VIOLATED RCW'S:
42.17.130, 42.17.530, 42.17.540 AND WAC
390-32-010, 390-32-020, * SEE ATTACHED
SHEETS. 35 SHEETS

NOV 28 2011

Public Disclosure Commission

Evidence and Witnesses

3. EVIDENCE:

List the documents or other evidence you have that support your complaint, if any, and attach copies to this form. If you do not have copies, provide any information you have about where you believe the documents or evidence can be found and how to obtain it. Attach additional pages if needed.

Example: Emails between Joe public and Candidate X, attached OR

Joe Public has emails from Candidate X which describe an illegal campaign donation, and Joe Public's phone number is 555-123-4567.

4-29-11 LETTER of ADMINISTRATIVE LEAVE, 5-2-11 Phone recording (NOT INCLUDED but AVAILABLE). 6-9-11 REGISTRATION FOR MAYOR OF CAMAS, 6-20-11 LETTER of TERMINATION, 6-22-11 W.S.E.S.D. LETTER/FORM FROM CITY OF CAMAS, 6-28-11 NOTES SUMMARIZED IN ATTACHMENTS, 7-13-11 LETTER OF DECISION FROM W.S.E.S.D., 6-14-11 LETTER INSERTED INTO PERSONNEL FILE, 8-10-11 NOTE FROM KEN KAKUK TO PATRICK EMMAH CPEA ATTORNEY AND GRIEVANCE, 9-12-11 REQUEST FOR INFORMATION FROM PRESS, 10-4-11 LIBELOUS ARTICLE, 10-6-11 LIBELOUS ARTICLE, 10-10-11 LIBELOUS ARTICLE. * PLEASE SEE ATTACHMENTS.

4. WITNESSES:

List the names and contact information, if known, of any witnesses or other persons who have knowledge of facts that support your complaint. Attach additional pages if needed.

Example: Jane Public was present when Candidate X spoke to me about the illegal contribution. Jane Public's address is 123 Main Street, Your Town, USA 12345, and her phone number is 555-123-4567.

UNKNOWN - * SEE ATTACHMENTS FOR SOME OF THE WITNESSES.

RECEIVED

NOV 28 2011

Certification

Public Disclosure Commission

In signing this complaint:

- I have provided all information, documents and other evidence of which I am aware;
- If I become aware of additional information, documents or evidence related to my complaint, I will promptly provide it to the PDC; and,
- I am providing the PDC current information on how to contact me, and will promptly update that information if it changes.

Your name (print or type) KENTON J. KAKUK

Street address 4313 NW SIERRA ST ~~CAMAS~~

City, state and zip code CAMAS, WA 98607

Telephone number (including area code) 360-606-4186

E-mail address (optional) KcKakuk@gmail.com

Oath

Required for complaints against elected officials or candidates for elective office:

I certify (or declare) under penalty of perjury under the laws of the State of Washington that this complaint is complete, true and correct to the best of my knowledge and belief.*

Your signature *Kenton J. Kakuk*

Date signed 11-22-2011

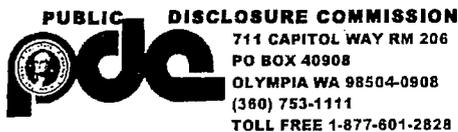
Place signed (city and county)

<u>CAMAS</u>	<u>CLARK</u>
City	County

Attachments

Check here if you are attaching copies of documentary evidence or extra pages explaining your complaint.

*RCW 9A.72.040 says that "(1) A person is guilty of false swearing if he makes a false statement which he knows to be false, under an oath required or authorized by law. (2) False swearing is a misdemeanor."



CAMPAIGN SUMMARY RECEIPTS & EXPENDITURES

PDC OFFICE USE

C4

(11/10)

RECEIVED

SEP 15 2011

Public Disclosure Commission

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

Mailing Address City
 2726 NW 34th Circle **CAMAS**

Zip + 4 96607	Office Sought (Candidates) Mayor	Election Date 11/8/11	
Report Period Covered	From (last C-4) May-11	To (end of period) September 12, 2011	Final Report? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

***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?
 Yes No

RECEIPTS *See reverse Yes No

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)	\$	0
2. Cash received (From line 2, Schedule A)	\$	0
3. In kind contributions received (From line 1, Schedule B)		\$156.00
4. Total cash and in kind contributions received this period (Line 2 plus 3)		\$156.00
5. Loan principal repayments made (From line 2, Schedule L)		(0)
6. Corrections (From line 1 or 3, Schedule C)	Show + or (-)	0
7. Net adjustments this period (Combine line 5 & 6)	Show + or (-)	0
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)		\$156.00
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)		0
11. Total cash expenditures (From line 4, Schedule A)	\$156.00	
12. In kind expenditures (goods & services) (From line 1, Schedule B)		0
13. Total cash and in kind expenditures made this period (Line 11 plus line 12)		\$156.00
14. Loan principal repayments made (From line 2, Schedule L)		(0)
15. Corrections (From line 2 or 3, Schedule C)	Show + or (-)	0
16. Net adjustments this period (Combine lines 14 & 15)	Show + or (-)	0
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)		\$156.00

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"/>

CASH SUMMARY

18. Cash on hand (Line 8 minus line 17)		0
(Line 18 should equal your bank account balance(s) plus your petty cash balance)		
19. Liabilities: (Sum of loans and debts owed)		(0)
20. Balance (Surplus or deficit) (Line 18 minus line 19)		0

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 9/12/11	Treasurer's Signature	Date 9/12/11
-----------------------	-----------------	-----------------------	-----------------

IN KIND CONTRIBUTIONS, PLEDGES, ORDERS, DEBTS, OBLIGATIONS

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

Report Date
 September
 14, 2011

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

Date Received	Contributor's Name and Address	Description of Contribution*	Fair Market Value	Aggregate Total	PR	GEN	If more than \$100, Employer Name, City, State & Occup.
June, 11	Scott Higgins 2726 NW 34 th Circle Camas, WA 98607	Filing Fee	\$156	\$156		X	Hockinson Church Of Christ Hockinson, WA Occupation Preacher
				TOTAL			Occupation
<input type="checkbox"/> Check here if additional pages are attached. (Enter also on line 3 and line 12 of C4)							Occupation

2. PLEDGES RECEIVED BUT NOT YET PAID. List each pledge of \$100.00 or more.

Date Notified of Pledge	Name and Address of Pledge Maker	Fair Market Value	Aggregate Total	PR	GEN	If more than \$100, Employer Name, City, State & Occup.	
						Occupation	
<input type="checkbox"/> Check here if additional pages are attached. (Enter also on line 9 of C4)				TOTAL (include new pledges above and all other outstanding pledges.) (Enter also on line 9 of C4)			Occupation

3. ORDERS PLACED, DEBTS, OBLIGATIONS. If debt is owed to a candidate, campaign worker, PR firm, advertising agency, consultant or credit card company, provide a detailed breakdown of expenses included in the debt. (Give estimate if actual amount not known. Exclude loans. Report loans on Schedule L.)

Expenditure Date	Vendor's/Recipient's Name and Address	Amount Owed	Code	OR	Description of Obligation*
		\$			
		\$			
		\$			
		\$			
		\$			
		\$			

**CAMPAIGN SUMMARY
 RECEIPTS & EXPENDITURES**

C4 <small>(11/10)</small>	PDC OFFICE USE
	DATE FILED PDC JAN 31 2012

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

Mailing Address: **2726 NW 34th Circle** City: **Camas**

Zip + 4 96607	Office Sought (Candidates) Mayor	Election Date 11/8/11	*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?
Report Period Covered September 14, 2011	From (last C-4) To (end of period) September 14, 2011 January 31, 2012	Final Report? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	

RECEIPTS *See reverse Yes No

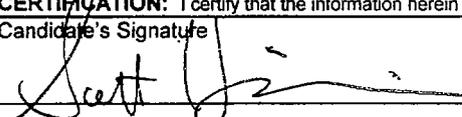
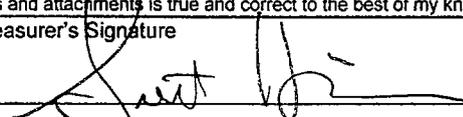
1. Previous total cash and in kind contributions (From line 8, last C-4) (if beginning a new campaign or calendar year, see instruction booklet)	\$	7,256.00
2. Cash received (From line 2, Schedule A)	\$	0
3. In kind contributions received (From line 1, Schedule B)		0
4. Total cash and in kind contributions received this period (Line 2 plus 3)		0
5. Loan principal repayments made (From line 2, Schedule L)		(0)
6. Corrections (From line 1 or 3, Schedule C)	Show + or (-)	0
7. Net adjustments this period (Combine line 5 & 6)	Show + or (-)	0
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)		\$7,256.00
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)	0
11. Total cash expenditures (From line 4, Schedule A)	\$7,256.00
12. In kind expenditures (goods & services) (From line 1, Schedule B)	0
13. Total cash and in kind expenditures made this period (Line 11 plus line 12)	\$7,256.00
14. Loan principal repayments made (From line 2, Schedule L)	(0)
15. Corrections (From line 2 or 3, Schedule C)	Show + or (-) 0
16. Net adjustments this period (Combine lines 14 & 15)	Show + or (-) 0
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)	\$7,256.00

<p>CANDIDATES ONLY</p> <table border="1"> <tr> <td></td> <td>Won</td> <td>Lost</td> <td>Unopposed</td> <td>Name not on ballot</td> </tr> <tr> <td>Primary election</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>General election</td> <td><input checked="" type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> <p>Treasurer's Daytime Telephone No.: (360) 834-0848</p>		Won	Lost	Unopposed	Name not on ballot	Primary election	<input 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"/>	<p>CASH SUMMARY</p> <p>18. Cash on hand (Line 8 minus line 17)</p> <p style="font-size: small;">[Line 18 should equal your bank account balance(s) plus your petty cash balance.]</p> <p style="text-align: right;">0</p> <p>19. Liabilities: (Sum of loans and debts owed)</p> <p style="text-align: right;">(0)</p> <p>20. Balance (Surplus or deficit) (Line 18 minus line 19)</p> <p style="text-align: right;">0</p> <p style="text-align: right;">PDC Exhibit # <u>4</u> Page <u>1</u> of <u>2</u></p>
	Won	Lost	Unopposed	Name not on ballot												
Primary election	<input 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"/>												

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 1/31/12	Treasurer's Signature 	Date 1/31/12
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FEB -2 2012

Public Disclosure Commission

Jamie Morin
407 NE 4th Avenue
Camas, WA 98607
January 31, 2012

DATE FILED PDC

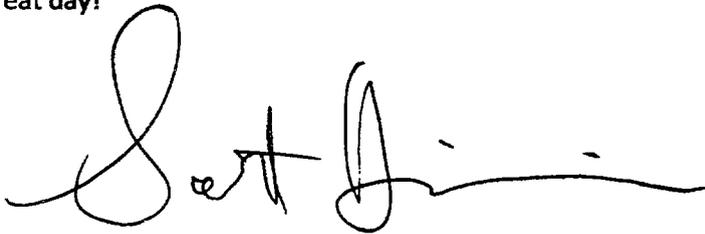
JAN 31 2012

Jamie,

Thank you so much for the work that the Camas Farmers Market does for the community. It helps establish a home-town feel that is beneficial to the entire area. Keep up the great work.

At the end of a political campaign, candidates have the option to donate the remainder of their collected funds to an approved charity. I have identified the Camas Farmer's Market as the charity to receive my campaigns surplus funds. I am doing this with the understanding that the Camas Farmer's Market is a 501c3 organization and that their Tax ID# is 26-2554687. I have sent a copy of this letter to the PDC so they are aware of the contribution. The total amount is \$460.21. I hope it is helpful to the market.

Have a great day!

A handwritten signature in black ink, appearing to read "Scott Higgins". The signature is fluid and cursive, with a long horizontal line extending from the end of the name.

Scott Higgins

CASH RECEIPTS AND EXPENDITURE

SCHEDULE A
to C4
(1/04)

FEB 21 2012

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

Scott Higgins

Attached to amended C-4 Filed 2-9-12

Report Date

2/16/2012

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 \$ 0.00

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 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	155.79
9/18/2011	The IMI Group 1935 SE Powell Blvd. Portland, OR 97202	O	Yard Signs H Frames	\$ 1682.50
9/22/2011	The IMI Group 1935 SE Powell Blvd Portland, OR 97202	O	Magnetic Car Signs Small Window Signs	340.00
10/12/2011	The IMI Group 1935 SE Powell Blvd. Portland, OR 97202	O	Yard Signs H Frames	1,982.50
10/12/2011	The IMI Group 1935 SE Powell Blvd Portland, OR 97202	O	H Frames	135.00
10/24/2011	Azunga Marketing, llc 1931 SE Powell Blvd Portland, OR 97202	G	Website Development	2,150.00
10/24/2011	Azunga Marketing, llc 1931 SE Powell Blvd Portland, OR 97202	G	Website Hosting	350.00
1/31/2012	Camas Farmers Market 407 NE 4 th Avenue Camas, WA 98607	C	Close Of Campaign Surplus Funds	460.21

Total from attached pages \$ 7256.00

Enter also on line 11 of C4 \$ 7,256.00

CODE DEFINITIONS ON NEXT PAGE

PDC Exhibit # 5
Page 1 of 1

4. TOTAL CASH EXPENDITURES

RECEIVED

FEB 23 2012

Public Disclosure Commission

2/17/2012

Scott Higgins
PDC Case No. 12-155

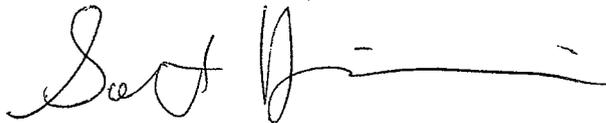
Public Disclosure Commission
711 Capitol Way
Room 206
PO Box 40908
Olympia, WA 98504

To Whom It May Concern:

This letter is to acknowledge the fact that I missed several filing deadlines in the past election cycle. Please accept my apologies and final reports of all campaign activity that occurred.

It was a whirlwind for me as I became Mayor through an appointment in June. I was trying to learn a new job by giving it full attention & run a campaign at the same time. I was unaware of the deadlines until they passed and did not have any campaign staff or managers to help. In the end, it was my responsibility and I again regret the miss. I trust this completes the needed forms. If I am missing anything else on this, please let me know. Full compliance is my goal!

Thanks for your consideration,



Scott Higgins
PDC Case No. 12-155