

SCHEDULE to C4

A

(11/93)

CASH RECEIPTS AND EXPENDITURE

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

Report Date

PETTIGREW ERIC SURPLUS ACCT

07/10/2007

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 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 |
|------------|---|------|--|----------|
| 06/01/2007 | EXPENSES OF \$50 OR LESS | A | | \$ 0.00 |
| 06/14/2007 | PETTIGREW ERIC PO BOX 28660 SEATTLE WA 981188660 | G | REIMBURSE LEG. OFFICE RENT- JUNE | 200.00 |
| 06/22/2007 | CITY YEAR, INC. 285 COLUMBUS AVENUE BOSTON MA 021165114 | C | DONATION | 1,000.00 |
| 06/22/2007 | FIRST AME CHILD DEVELOPMENT CENTER 3700 S GENESEE STREET SEATTLE WA 981181388 | ERC | DONATION | 1,000.00 |
| 06/26/2007 | NU BLACK ARTS WEST THEATRE PO BOX 22652 SEATTLE WA 981220652 | F | DONATION | 250.00 |
| | | | | |
| | | | | |

Total from attached pages \$ 0.00

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ 2,450.00



SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

| | |
|---------------------|----------------|
| C4 (3/97) | PDC OFFICE USE |
| | 07/10/2007 |

Candidate or Committee Name (Do not abbreviate. Include full name)
PETTIGREW ERIC SURPLUS ACCT

Mailing Address
 PO BOX 28660

City
 SEATTLE

Zip + 4
 981188660

Office Sought (Candidates)
 STATE REPRESENTATIVE

Election Date

| | | | |
|-----------------------|-----------------|--------------------|---------------|
| Report Period Covered | From (last C-4) | To (end of period) | Final Report? |
| | 06/01/2007 | 06/30/2007 | Yes No X |

***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?

RECEIPTS

*See next page 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) | \$ | 19,000.00 |
| 2. Cash received (From line 2, Schedule A) | \$ | 0.00 |
| 3. In kind contributions received (From line 1, Schedule B) | | 0.00 |
| 4. Total cash and in kind contributions received this period (Line 2 plus 3) | | 0.00 |
| 5. Loan principal repayments made (From line 2, Schedule L) | (| 0.00) |
| 6. Corrections (From line 1 or 3, Schedule C) | + | 0.00 |
| 7. Net adjustments this period (Combine line 5 & 6) | + | 0.00 |
| 8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7) | | 19,000.00 |
| 9. Total pledge payments due (From line 2, Schedule B) | | 0.00 |

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) | 10,646.90 |
| 11. Total cash expenditures (From line 4, Schedule A) | 2,450.00 |
| 12. In kind expenditures (goods & services) (From line 1, Schedule B) | 0.00 |
| 13. Total cash and in kind expenditures made this period (Line 11 plus line 12) | 2,450.00 |
| 14. Loan principal repayments made (From line 2, Schedule L) | (0.00) |
| 15. Corrections (From line 2 or 3, Schedule C) | + 0.00 |
| 16. Net adjustments this period (Combine lines 14 & 15) | + 0.00 |
| 17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16) | 13,096.90 |

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.:
 (206) 428-6075

CASH SUMMARY

| | |
|---|----------|
| 18. Cash on hand (Line 8 minus line 17) | 5,903.10 |
| [Line 18 should equal your bank account balance(s) plus your petty cash balance.] | |
| 19. Liabilities: (Sum of loans and debts owed) | (0.00) |
| 20. Balance (Surplus or deficit) (Line 18 minus line 19) | 5,903.10 |

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 ERIC PETTIGREW SURPLUS FUNDS | Date | Treasurer's Signature | Date |
|---|------|-----------------------|------|