

## SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

**C4**(3/97)

PDC OFFICE USE 100856617

09-07-2018

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

ROBERT W FERGUSON (Ro							
Mailing Address 8255 2nd Ave NE	City Seattle, WA						
Zip + 4	Office Sought (Candi	dates)	Election Date		nuovo Committado Durina		
98115	ATTORNEY GEN	•	2016		aucus Committees: During mmittee make an independent		
Report Period From (last C-4	1) To (end	d of period)	Final Report?	expenditure (i.e., an expens	e not considered a contribution)		
Covered 08/01/18	8 08/	31/18	Yes No X	supporting or opposing a stat	te or local candidate?		
RECEIPTS				*See next page	Yes No		
Previous total cash and in kir (if beginning a new campaign	nd contributions (From or calendar year, see	line 8, last C-4) instruction boo	klet)		\$ \$941,732.72		
2. Cash received (From line 2, S	Schedule A)			\$ \$350.00	_		
3. In kind contributions received	I (From line 1, Schedul	е В)		\$0.00	-		
					•		
5. Loan principal repayments m					-		
6. Corrections (From line 1 or 3	, Schedule C)		Show + or	(-) (\$350.00)	-		
7. Net adjustments this period (					(400000)		
8. Total cash and in kind contrib					\$941,732.72		
9. Total pledge payments due (l	From line 2, Schedule I	В)	\$0.00				
EXPENDITURES							
<ol><li>Previous total cash and in kir (If beginning a new campaigr</li></ol>	nd expenditures (From n or calendar year, see	line 17, last C-4 instruction boo	4) klet)		\$118,495.26		
11. Total cash expenditures (Fro	m line 4, Schedule A)			\$15,629.35	<u>5</u>		
12. In kind expenditures (goods 8	& services) (From line	I, Schedule B)		\$0.00	ב		
13. Total cash and in kind expend					\$15,629.35		
14. Loan principal repayments m	ade (From line 2, Sche	dule L)		\$0.00	<u>)</u>		
15. Corrections (From line 2 or 3, Schedule C)Show + or (-			(-) (\$350.00)	<u>)</u>			
16. Net adjustments this period (	Combine lines 14 & 15	Show + or (-)	(\$350.00)				
17. Total cash and in kind expend	ditures during campaig	n (Combine line	es 10, 13 and 16)		\$133,774.61		
CANDIDATES ONLY  Won Lost U	Name not Jnopposed on ballot	17)	\$807,958.11				
Primary election		[Line 18 should equal your bank account balance(s) plus your petty cash balance.]					
General election		bts owed)	\$100.00				
Treasurer's Daytime Telephone No.:  (206) 382-5552  20. Balance (Surplus or deficit) (Line 1				18 minus line 19)	\$807,858.11		
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	, , , , , , , , , , , , , , , , , , , ,	Treasurer's Signatu		Date		
ROBERT FERGUSON	ERGUSON 09/07/18 Philip Lloyd				09/07/18		

### **CASH RECEIPTS AND EXPENDITURE**

SCHEDULE to C4

Α	
(11/93)	

2

08/31/18

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

Report Date

ROBE	RT W	FERGUSO:	N (Robert	Ferguson	Surplus	Funds)	08/01/18
4 0	ACILE	COUNTY (C	والبين (و مرو البيار والسامر و	بمحجما منتجما مامة		1:-4	

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 Date of deposit Amount Date of deposit S350.00

2. TOTAL CASH RECEIPTS

Enter also on line 2 of C4

2. TOTAL CASH RECEIPTS Enter also on line 2 of C4 \$350.00

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:

If expenditures are in-kind or earmarked contributions to a candidate or committee or independent expenditures that benefit a candidate or

- If expenditures are <u>in-kind or earmarked contributions</u> to a candidate or committee or <u>independent expenditures</u> 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.

Vendor or Recipient (Name and Address)	Code	Purpose of Expense and/or Description	Amount
Expenses of \$50 or less	N/A	N/A	\$9.50
BANK OF AMERICA PO BOX 15731 WILMINGTON, DE 19886		HYATT HOTELS: OFFICIAL TRAVEL FOR FAMILY AT CWAG CONFERENCE	\$269.85
NARAL PRO-CHOICE AMERICA 1156 15TH ST NW STE 700 WASHINGTON, DC 20005		CONTRIBUTION	\$350.00
WASHINGTON STATE DEMOCRATIC PO BOX 4027 SEATTLE, WA 98194		CONTRIBUTION	\$5,000.00
HOUSE DEMOCRATIC CAMPAIGN 4130 1ST AVE S STE D SEATTLE, WA 98134		CONTRIBUTION	\$10,000.00
	(Name and Address)  Expenses of \$50 or less  BANK OF AMERICA PO BOX 15731 WILMINGTON, DE 19886  NARAL PRO-CHOICE AMERICA 1156 15TH ST NW STE 700 WASHINGTON, DC 20005  WASHINGTON STATE DEMOCRATIC PO BOX 4027 SEATTLE, WA 98194  HOUSE DEMOCRATIC CAMPAIGN 4130 1ST AVE S STE D	(Name and Address)  Expenses of \$50 or less  N/A  BANK OF AMERICA PO BOX 15731 WILMINGTON, DE 19886  NARAL PRO-CHOICE AMERICA 1156 15TH ST NW STE 700 WASHINGTON, DC 20005  WASHINGTON STATE DEMOCRATIC PO BOX 4027 SEATTLE, WA 98194  HOUSE DEMOCRATIC CAMPAIGN 4130 1ST AVE S STE D	(Name and Address)  Expenses of \$50 or less  N/A  BANK OF AMERICA PO BOX 15731 WILMINGTON, DE 19886  NARAL PRO-CHOICE AMERICA 1156 15TH ST NW STE 700 WASHINGTON, DC 20005  WASHINGTON STATE DEMOCRATIC PO BOX 4027 SEATTLE, WA 98194  HOUSE DEMOCRATIC CAMPAIGN 4130 1ST AVE S STE D

Total from attached pages

\$0.00

\$

Enter also on line 11 of C4

\$15,629.35

# IN KIND CONTRIBUTIONS, PLEDGES, ORDERS, DEBTS, OBLIGATIONS

SCHEDULE TO C4 B

3

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

ROBERT W FERGUSON (Robert Ferguson Surplus Funds)

Report Date 08/01/18 08/31/18

3. ORDERS PLACED, DEBTS, OBLIGATIONS. (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 Des	cription of Oblig	ation
1/30/2017	ROBERT W FERGUSON 8255 2nd Ave NE Seattle WA, 98115	100.00		TRAVEL	EXPENSES	(EST.)
	TOTAL THIS	PAGE 100.00				

## **CORRECTIONS**

SCHEDULE C

4

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

Date

Date of Report	d reported on C3 report, Line 1d.  Source/Person Making Refund	Amount of Refund
	<b>3</b> *****	
08/13/18	WASHINGTON STATE DEMOCRATIC CENTRAL COMMITTEE PO BOX 4027	¢350.00
	SEATTLE, WA 98194	\$350.00
	Total actional	
	Total refunds Enter as (-) on line 6 and line 15 of C4	\$350.00