## SUMMARY, FULL REPORT 711 CAPITOL WAY RM 206 **RECEIPTS AND EXPENDITURES** TOLL FREE 1-877-601-2828

PDC OFFICE USE 100856772

09-07-2018

**C4** 

(3/97)

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

OLYMPIA WA 98504-0908

DISCLOSURE COMMISSION

PO BOX 40908

(360) 753-1111

PUBLIC

	JENKIN SURPLU	JS ACCOUNT	)					
Mailing Address PO BOX 1708						City PROSSER, WA		
Zip + 4 99350	Office Sought (Cancer STATE REPRES		Election 2018	on Date		For PACs, Parties & Ca		
Report Period From (last C-	4) To (er	nd of period)	Final	Report?		<b>xpenditure</b> (i.e., an expens		
Covered 08/01/1	8 08	/31/18	Yes	No X	<u>SI</u>	upporting or opposing a sta	e or local c	andidate?
RECEIPTS					*	See next page	Yes	No
1. Previous total cash and in kir (if beginning a new campaigr	nd contributions (From n or calendar year, see	n line 8, last C-4) e instruction bool	klet)				\$	\$0.00
2. Cash received (From line 2, S	Schedule A)					\$\$9,000.00	-	
3. In kind contributions received	l (From line 1, Schedu	ıle B)				\$0.00	-	
4. Total cash and in kind contrib	outions received this p	eriod (Line 2 plu	s 3)					\$9,000.00
5. Loan principal repayments m	ade (From line 2, Sch	edule L)				\$0.00	-	
6. Corrections (From line 1 or 3	, Schedule C)			Show + o	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 campai	gn (Combine line	es 1, 4 & 7	)				\$9,000.00
9. Total pledge payments due (	From line 2, Schedule	e B)		\$0.00	0			
EXPENDITURES								
10. Previous total cash and in kir (If beginning a new campaigr	nd expenditures (From n or calendar year, see	n line 17, last C-4 e instruction boo	l) klet)					\$0.00
11. Total cash expenditures (Fro	m line 4, Schedule A)					\$0.00	<u>)</u>	
12. In kind expenditures (goods & services) (From line 1, Schedule B)						\$0.00	1	
13. Total cash and in kind expen	ditures made this peri	od (Line 11 plus	line 12)					\$0.00
14. Loan principal repayments m	ade (From line 2, Sch	edule L)				\$0.00	<u>)</u>	
15. Corrections (From line 2 or 3	, Schedule C)			Show + o	or (-)	\$0.00	<u>)</u>	
16. Net adjustments this period (Combine lines 14 & 15) Show + or (-)							\$0.00	
17. Total cash and in kind expen	ditures during campai	gn (Combine line	es 10, 13 a	nd 16)				\$0.00
CANDIDATES ONLY Won Lost U	Name not Jnopposed on ballot	CASH SUMMA		minua lia	nn 17)			\$9,000.00
						(s) plus your petty cash balance.]		<i>\$9,000.00</i>
Primary election		19 Liabilities	(Sum of Io	ans and d	dehts	owed)		
General election   19. Liabilities: (Sum of loans and debts owed)    Treasurer's Daytime Telephone No.:							\$0.00	
(509)830-4898 20. Balance (Surplus or deficit) (Line				ne 18	minus line 19)		\$9,000.00	
CERTIFICATION: I certify that the in	formation herein and on	accompanying sch	edules and	attachment	nts is tru	ue and correct to the best of my	v knowledge.	
Candidate's Signature Date Treasurer's Signa				ature			Date	
WILLIAM JENKIN 09/07/18 CAMILLE PIETER				TER:	ICK		09/07/18	

## CASH RECEIPTS AND EXPENDITURE



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

	(					•	
WILLIAM JENKIN	(BILL JENKIN	I SURPLUS ACCOUNT)			08/01/18		08/31/18
1. CASH RECEIPTS (	Contributions) whic	h have been reported on C3.	List each dep	oosit made since last C4	report was submitte	d.	
Date of deposit	Amount	Date of deposit	Amount	Date of deposit	Amount		Total deposits
08/08/2018	\$9,000.00						
2. TOTAL CASH RECEIPTS Enter also on line 2 of C4					\$	\$9,000,00	

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 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.

C - Contributions (monetary, in-kind & transfers)

CODF DEFINITIONS ON NEXT PAGE

- 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

2 Report Date

- 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	А	mount
N/A	Expenses of \$50 or less	N/A	N/A		
			Total from attached pag	es \$	\$0.00

4. TOTAL CASH EXPENDITURES