

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4(3/97)

PDC OFFICE USE 100863834

10-09-2018

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

	RANKER	`	s for Kevin I	,	irplis F	unds)			
	g Address	(CICIZEII	S TOT REVIII I	tainer bu	rprus r	unus ,	City Deer Harbor, WA		
Zip + 4	4		Office Sought (Cand	lidates)	Electi	on Date	*For PACs, Parties & Ca	ucus Co	mmittees: During
98243	3		STATE SENATO		2020		this report period, did the con	nmittee ma	ke an independent
	t Period	From (last C-4)) To (er	nd of period)	Final	Report?	expenditure (i.e., an expense supporting or opposing a stat		
Cover	ea	09/01/18	09	/30/18	Yes	No X	supporting or opposing a stat	e or local c	<u>candidate</u> ?
RECE	IPTS						*See next page	Yes	No
1.	Previous tota (if beginning	ll cash and in kind a new campaign	d contributions (From or calendar year, see	line 8, last C- instruction be	-4) ooklet)			\$	\$112,144.02
2.	2. Cash received (From line 2, Schedule A)					···· \$ \$0.00			
3.	In kind contributions received (From line 1, Schedule B)					\$0.00			
									\$0.00
	5. Loan principal repayments made (From line 2, Schedule L)								
				Show + or (-					
	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)									\$112,144.02
9.	Total pledge	payments due (F	rom 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)								\$87,264.44	
11. Total cash expenditures (From line 4, Schedule A)					\$0.00				
12. In kind expenditures (goods & services) (From line 1, Schedule B)						\$0.00			
							\$0.00		
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)									\$87,264.44
CANDIDATES ONLY Name not CASH SUMMARY								****	
Won Lost Unopposed on ballot 18. Cash on hand (Line 8 minus line 17							\$24,879.58		
Primary election									
General election					ots owed)		\$0.00		
Treasurer's Daytime Telephone No.: (206)682-7328				20. Balance	20. Balance (Surplus or deficit) (Line 18 minus line 19)				\$24,879.58
CERTIFICATION: 1 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 Signature Date								Date	
					ne Naugi			10/09/18	

CASH RECEIPTS AND EXPENDITURE

SCHEDULE to C4

Ca	andidate or Committee Nam	e (Do not abl	oreviate. Use full nam	e.)		K	eport Date
ΚE	VIN RANKER (Citiz	ens for	Kevin Ranker	Surplus Fund	s)	09/01/18	09/30/18
1.	CASH RECEIPTS (Contr	butions) whic	h have been reported	on C3. List each dep	osit made since last C4	report was submitted.	
Da	ate of deposit	Amount	Date of deposit	Amount	Date of deposit	Amount	Total deposits
2.	TOTAL CASH RECEIPTS				Enter a	lso on line 2 of C4	\$0.00
1) 2) 3)	committee, identify When reporting paymer If expenditures are mad petition, use code "\"	re: nd or earmarl the candidate nts to vendors le directly or in /" and provide	sed contributions to a contributions to a contribution or committee in the Dofor travel expenses, icondirectly to compensate the following informations	candidate or committe escription block; dentify the traveler an e a person or entity for tion on an attached s	ee or independent experion d travel purpose in the Earth soliciting signatures of the travel name and addressersons to date to gather	nditures that benefit a description block; and n a statewide initiative so of each person/entity	candidate or or referendum
	CODE DEFINITIONS ON NEXT PAG	GE L B N O	- Contributions (monet Independent Expendit Literature, Brochures, - Broadcast Advertising - Newspaper and Peric - Other Advertising (ya - Voter Signature Gath	ures , Printing g (Radio, TV) odical Advertising ard signs, buttons, etc	S - St F - Fu T - Tr M - M W - W	ostage, Mailing Permit- urveys and Polls indraising Event Exper avel, Accommodations anagement/Consulting (ages, Salaries, Benef eneral Operation and o	nses s, Meals g Services its
3.	expenditures a) Expenditures of \$50 amount column on the			cash, need not be ite	mized. Add up these ex	penditures and show t	he total in the

- 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)		Purpose of Expense and/or Description	
Date Paid	(Name and Address)	Code	and/or Description	Amount
N/A	Expenses of \$50 or less	N/A	N/A	
	1		Total form attacked as a	-

Total from attached pages	\$ \$0.00
Enter also on line 11 of C4	\$ \$0.00