

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4(3/97)

PDC OFFICE USE 100873869

11-13-2018

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

RICHARD C DEBOLT (Ric	hard DeBolt Surpl	lus Acco	unt)					
Mailing Address 1673 S Market Blvd, #1	59					City Chehalis, WA		
Zip + 4 98532	Office Sought (Candidates) STATE REPRESENTA		Election 2018		te			Committees: During make an independent
Report Period From (last C-4	To (end of pe	eriod)	Final I	Repor	t?	expenditure (i.e., an	expense not co	onsidered a contribution)
Covered 09/01/18	10/31/	18	Yes	No	x	supporting or opposin	g a state or loc	cal candidate?
RECEIPTS					<u>'</u>	*See next page	Yes	No
Previous total cash and in kin (if beginning a new campaign	d contributions (From line 8, or calendar year, see instru	last C-4) ction booklet)				······· <u></u> \$	\$38,247.91
2. Cash received (From line 2, S	Schedule A)					··· \$ \$0	0.00	
3. In kind contributions received	(From line 1, Schedule B)					\$0	0.00	
4. Total cash and in kind contrib	utions received this period (Line 2 plus 3)					\$0.00
5. Loan principal repayments ma	ade (From line 2, Schedule I	_)				\$0	0.00	
6. Corrections (From line 1 or 3,	Schedule C)			Show	+ or (-	-) <u>\$</u> (0.00	
7. Net adjustments this period (0	Combine line 5 & 6)					Show +	or (-)	\$0.00
8. Total cash and in kind contrib	utions during campaign (Co	mbine lines 1	, 4 & 7))				\$38,247.91
9. Total pledge payments due (F	From line 2, Schedule B)			\$0.	00			
EXPENDITURES								
Previous total cash and in kin (If beginning a new campaign	d expenditures (From line 17 or calendar year, see instru	7, last C-4) action booklet	·)				<u></u>	\$17,236.52
11. Total cash expenditures (Fror	m line 4, Schedule A)					··· \$3,44	13.53	
12. In kind expenditures (goods 8	k services) (From line 1, Sch	edule B)					30.00	
13. Total cash and in kind expend	ditures made this period (Lin	e 11 plus line	12)					\$3,443.53
14. Loan principal repayments ma	ade (From line 2, Schedule I	_)					\$0.00	
15. Corrections (From line 2 or 3,	Schedule C)			Show	+ or (-	-) <u> </u>	\$0.00	
16. Net adjustments this period (0	Combine lines 14 & 15)					Show +	or (-)	\$0.00
17. Total cash and in kind expend				nd 16)			\$20,680.05
CANDIDATES ONLY Won Lost U		I SUMMARY		minus	lina 1	7)		\$17,567.86
						nce(s) plus your petty cash bal		4177307100
Primary election		abilities: (Su	m of loa	ans ar	nd deb	ts owed)		\$0.00
Treasurer's Daytime Telephone N (360)520-1600		alance (Surpl	us or d	eficit)	(Line	18 minus line 19)		\$17,567.86
CERTIFICATION: I certify that the info Candidate's Signature	ormation herein and on accomp Date		les and a reasure				est of my knowle	^{dge.} Date
RICHARD DEBOLT	11/13/:	18 Ri	ichar	rd C	DeF	solt		11/13/18

CASH RECEIPTS AND EXPENDITURE

SCHEDULE to C4

F	1
(11/	93)

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

Report Date

RIC	HARD	C DEBOLT	(Richard	DeBolt	Surplus	Acc	ount)	09/01/18
1	CVCHI	DECEIDTS (C	Contributions) whi	ch have hoe	on reported or	n C2	List each deposit made	since last C4 report was submitted

09/01/18 10/31/18

I. CASITIVECEILIS (COI	illibulions) willo	ii nave been reported or	ii Co. List each dep	USIL IIIAUE SIIICE IASI C4	report was submitte	u.	
Date of deposit	Amount	Date of deposit	Amount	Date of deposit	Amount	Total	deposits
2 TOTAL CASH DECEID	TQ			Entor al	so on line 2 of C4	\$	**

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.

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
N/A	Expenses of \$50 or less	N/A	N/A	\$212.18
10/01/18	TUGBOAT ANNIES 2100 WEST BAY DR NW OLYMPIA, WA 98502		Meeting meals	\$59.12
10/04/18	UNITED WAY OF LEWIS COUNTY 450NW PACIFIC AVE CHEHALIS, WA 98532		Donation	\$380.00
10/05/18	CHEVRON 1284 RUSH RD CHEHALIS, WA 98532		Gas	\$64.68
10/05/18	CURIOUS 545 N Market Blvd, #1 Chehalis, WA 98532		Meeting meals	\$122.79
10/09/18	HILLCREST FOODMART & GAS 108 HWY 603 CHEHALIS, WA 98532		Gas	\$54.99
10/09/18	BICOASTAL MEDIA 1635 S Gold St Centralia, WA 98531		Radio ads	\$494.00
			Total from attached page	105 \$ ¢2 055 77

Total from attached pages S \$2,055,77

\$3,443.53

Enter also on line 11 of C4

EXPENDITURES CONTINUATION SHEET (Attachment to Schedule A)

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

Report Date

RICHARD C DEBOLT (Richard DeBolt Surplus Account)

09/01/18 10/31/18

Date Paid	Vendor or Recipient (Name and Address)	Code	Purpose of Expense and/or Description	Amount
10/09/18	PREMIER BROADCASTER, INC 1133 Kresky Rd Centralia, WA 98531		Radio ads	\$808.00
10/11/18	CHEVRON 1284 RUSH RD CHEHALIS, WA 98532		Gas	\$50.05
10/11/18	PROVIDENCE HEALTH CARE PO BOX 389672 SEATTLE, WA 98138		Donation	\$286.00
10/15/18	CHEVRON 1284 RUSH RD CHEHALIS, WA 98532		Gas	\$53.67
10/17/18	CHEVRON 1284 RUSH RD CHEHALIS, WA 98532		Gas	\$62.80
10/17/18	THE CHRONICLE 321 N Pearl St Centralia, WA 98531		Office newspaper	\$257.50
10/29/18	HILLCREST FOODMART & GAS 108 HWY 603 CHEHALIS, WA 98532		Gas	\$62.21
10/29/18	OLYMPIC CLUB 112 N TOWER ST CENTRALIA, WA 98531		Meeting meals	\$70.54
10/29/18	BICOASTAL MEDIA 1635 S Gold St Centralia, WA 98531		Radio ads	\$405.00

Page Total \$ \$2,055.77