

**SCHEDULE**  
**to C4**
**A**  
 (11/93)

**CASH RECEIPTS AND EXPENDITURE**

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

Report Date

JARRETT FRED SURPLUS ACCT

05/07/2007

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**

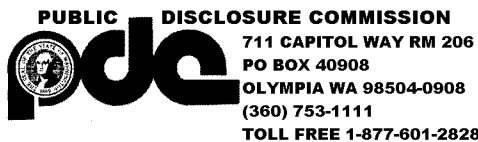
- a) Expenditures of \$50 or less, including those from petty cash, need not be itemized. Add up these expenditures and show the total in the amount column on the first line below..
- b) Itemize each expenditure of more than \$50 by date paid, name and address of vendor, code/description, and amount.
- 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
04/01/2007	EXPENSES OF \$50 OR LESS	A		\$ 103.00
04/07/2007	FUTUREWISE 814 SECOND AVE. #500 SEATTLE WA 98104		2 TICKETS FOR AUCTION & DINNER	170.00
04/18/2007	HANBAN NORTH AMERICA OFFICE 8674 GRANDWILLE STREET VANCOVER BC AL V6P 5A1		TRIP TO CHINA TO STUDY EDUCATION SYSTEM REGISTRATION FEE	750.00
04/22/2007	REP OF WASHINGTON MAIL BOX 5531 10002 ARORA AVENUE N. #36R SEATTLE WA 98133		SPECIAL GUEST SPEAKERS DINNER 4/27/2007	65.00
04/22/2007	MUNICIPAL LEAGUE OF KING COUNTY 810 THIRD AVENUE #224 SEATTLE WA 98104		8 TICKETS TO AWARD DINNER 8/26/2007	400.00
04/24/2007	MUNICIPAL LEAGUE OF KING COUNTY 810 THIRD AVENUE #224 SEATTLE WA 98104		2 TICKETS FOR DINNER HONORING FRED BY THE MUNI LEAGUE	100.00
04/29/2007	EASTSIDE DOMESTIC VIOLENCE PROGRAM PO BOX 6398 BELLEVUE WA 980080398		ANNUAL DINNER "CATCH A RISING STAR" 2 TICKETS	250.00

Total from attached pages \$ 0.00

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ 1,838.00



# SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

<b>C4</b> (3/97)	PDC OFFICE USE
	05/07/2007

Candidate or Committee Name (Do not abbreviate. Include full name)  
**JARRETT FRED SURPLUS ACCT**

Mailing Address  
 7815 85TH PLACE SE

City  
 MERCER ISLAND

Zip + 4 98040	Office Sought (Candidates) STATE REPRESENTATIVE	Election Date 2008
Report Period Covered 04/01/2007	From (last C-4) 04/30/2007	To (end of period) 04/30/2007
Final Report?		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) .....	\$	45,795.20
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) .....	+ Show + or (-)	0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7) .....		45,795.20
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) .....	4,573.96
11. Total cash expenditures (From line 4, Schedule A) .....	1,838.00
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) .....	1,838.00
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) .....	6,411.96

**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) 232-7527

**CASH SUMMARY**

18. Cash on hand (Line 8 minus line 17) .....	39,383.24
[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) .....	39,383.24

**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 FRED JARRETT	Date	Treasurer's Signature GINN H.	Date
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