100282836

EXPENDITURES CONTINUATION SHEET (Attachment to Schedule A)

 ${\bf Page}^{\ 1}$

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

Report Date

JARRETT FRED SURPLUS ACCT

11/02/2008

Date Paid	Vendor or Recipient (Name and Address)			Purpose of Expense and/or Description	Amount	
	JARRETT FRED 2949 81ST PLACE SE #1		Code	COLLEGE SUCCESS FOUNDATION	\$ 100.00	
10/21/2008	JARRETT FRED 2949 81ST PLACE SE #1 MERCER ISLAND WA	98040		JEWISH FEDERATION	100.00	
10/21/2008	JARRETT FRED 2949 81ST PLACE SE #1 MERCER ISLAND WA	98040		AIPAC ANNUAL CHARITY DINNER	70.00	
10/21/2008	CAMP FIRE USA 8511 15TH AVE NE SEATTLE WA	981153199		2008 ANNUAL FUND	500.00	
10/21/2008	CAMP FIRE USA 8511 15TH AVE NE SEATTLE WA	981153199		TABLE FOR AUCTION	1,500.00	
10/21/2008	PO BOX 828	980090828		2008 DINNER DONATION	500.00	
10/30/2008	1000 AURORA AVE N #10	0. 98109		DONATION TO POLITICAL PARTY	3,000.00	

CASH RECEIPTS AND EXPENDITURE

SCHEDULE to C4

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

Report Date

JARRETT FRED SURPLUS ACCT

11/02/2008

. CASH RECEIPTS (Contributions) which have been reported on C3. List each deposit made since last C4 report was submitted.							
ate of deposit	Amount	Date of deposit	Amount	Date of deposit	Amount	Total de	osits
. TOTAL CASH RECEIP	TS			Enter a	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:

- If expenditures are in-kind or earmarked contributions to a candidate or committee or independent expenditures that benefit a candidate or committee, 1) 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)
- If expenditures are made directly or indirectly to compensate a person or entity for soliciting signatures on a statewide initiative or referendum petition, 3) 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..
- Itemize each expenditure of more than \$50 by date paid, name and address of vendor, code/description, and amount.
- 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
	EXPENSES OF \$50 OR LESS	A	and/or Description	\$ 100.00
10/06/2008	AMARA 3300 E UNION ST. SEATTLE WA 98122		DONATION	100.00
10/09/2008	JARRETT FRED 2949 81ST PL. SE #1 MERCER ISLAND WA 98040		REUMB FOR PURCHASE OF CHRIST MAS CARDS	1,196.74
10/09/2008	EASTSIDE TRANSPORTATION ASSOC. PO BOX 50621 BELLEVUE WA 98015		2009 MEMBERSHIP RENEWAL	100.00
10/12/2008	NARAL 811 15TH AVE #456 SEATTLE WA 981041408		AD IN THE AUCTION CATALOGUE	100.00
10/21/2008	MERCER ISLAND COMMUNITY FUND PO BOX 751 MERCER ISLAND WA 98040		DONATION	100.00
10/21/2008	JARRETT FRED 2949 81ST PLACE SE #1 MERCER ISLAND WA 98040		URBAN LAND INSTITUTE MEETING	55.00
	•	•	Total from attached nages	\$,770.00

Total from attached pages

Enter also on line 11 of C4

\$ 7,521.74



FRED JARRETT

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4(3/97)

PDC OFFICE USE

TOLL FREE 1-877-601-2828 Candidate or Committee Name (Do not abbreviate. Include full name) JARRETT FRED SURPLUS ACCT 11/02/2008 Mailing Address City MERCÉR ISLAND 7815 85TH PLACE SE 2 Election Date 9 **Zip + 4** Office Sought (Candidates) *For PACs, Parties & Caucus Committees: During this report period, did the committee make an **independent** Final Report? expenditure (i.e., an expense not considered a contribution) From (last C-4) To (end of period) Report Period Covered supporting or opposing a state or local candidate? 10/01/2008 10/31/2008 No X Yes **RECEIPTS** *See next page Yes No X 1. Previous total cash and in kind contributions (From line 8, last C-4) 74,718.27 0.00 Cash received (From line 2, Schedule A)\$ 0.00 In kind contributions received (From line 1, Schedule B)..... 0.00 Total cash and in kind contributions received this period (Line 2 plus 3)...... Loan principal repayments made (From line 2, Schedule L) 0.00 0.00 7. 74,718.27 Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)..... 0.00 Total pledge payments due (From line 2, Schedule B) **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)...... 40,827.28 12. In kind expenditures (goods & services) (From line 1, Schedule B)..... 13. Total cash and in kind expenditures made this period (Line 11 plus line 12) 0.00) 0.00 17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16) 48,349.02 **CANDIDATES ONLY** CASH SUMMARY Name not 26,369.25 Unopposed Won Lost on ballot 18. Cash on hand (Line 8 minus line 17) [Line 18 should equal your bank account balance(s) plus your petty cash balance.] Primary election General election Treasurer's Daytime Telephone No.: 20. Balance (Surplus or deficit) (Line 18 minus line 19) (206)232-752726,369.25 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 Signature Date

GINN H.