

Candidate's Signature

RICHARD DEBOLT

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4(3/97)

PDC OFFICE USE

100636244

05-11-2015

TOLL FREE 1-877-601-2828

Candidate or Committee Name (Do not abbreviate. Include full name) RICHARD C DEBOLT (Richard DeBolt Surplus Account) Mailing Address City 1673 S Market Blvd #159 Chehalis, WA Office Sought (Candidates) Zip + 4Election Date *For PACs, Parties & Caucus Committees: During 98532 STATE REPRESENTATIVE 2015 this report period, did the committee make an independent Report Period From (last C-4) To (end of period) Final Report? expenditure (i.e., an expense not considered a contribution) supporting or opposing a state or local candidate? Covered 04/01/15 04/30/15 Yes No X **RECEIPTS** *See next page Yes No 1. Previous total cash and in kind contributions (From line 8, last C-4) 2. Cash received (From line 2, Schedule A) In kind contributions received (From line 1, Schedule B)..... Total cash and in kind contributions received this period (Line 2 plus 3)...... 0.00 Loan principal repayments made (From line 2, Schedule L)..... Corrections (From line 1 or 3, Schedule C)......Show + or (-) 0.00 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) 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)..... 2,036,35 14. Loan principal repayments made (From line 2, Schedule L)..... 0.00 17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)..... 8,784,61 **CANDIDATES ONLY** Name not **CASH SUMMARY** 18. Cash on hand (Line 8 minus line 17) Won Lost Unopposed on ballot [Line 18 should equal your bank account balance(s) plus your petty cash balance.] Primary election 19. Liabilities: (Sum of loans and debts owed) General election Treasurer's Daytime Telephone No.: 20. Balance (Surplus or deficit) (Line 18 minus line 19) (360)520-1600 CERTIFICATION: I certify that the information herein and on accompanying schedules and attachments is true and correct to the best of my knowledge.

Treasurer's Signature

Fred Rider

05/11/15

CASH RECEIPTS AND EXPENDITURE

SCHEDULE to C4

04/30/15

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

Report Date

RIC	HARD	С	DEBOL	T (Richard	DeBolt	Surplus	Acc	ount)		04/	01/15
1.	CASH	RE	CEIPTS (Contributions) wh	ich have be	en reported o	n C3.	List each deposit	made since last (C4 report was	submitted.

	,						
Date of deposit	Amount	Date of deposit	Amount	Date of deposit	Amount	Tota	al deposits
2. TOTAL CASH RECEIPTS	3			Enter al	so on line 2 of C4	\$	0.

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)
- If expenditures are made directly or indirectly to compensate a person or entity for soliciting signatures on a statewide initiative or referendum 3) 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

Enter also on line 11 of C4

2,036.35

G - General Operation and Overhead

3. EXPENDITURES

4. TOTAL CASH 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.
- 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	777.42
04/06/15	MCMENAMINS 1801 SE COLUMBIA RIVER DR VANCOUVER, WA 98661		Meeting meals	54.72
04/06/15	THE SHIRE 465 NW CHEHALIS AVE CHEHALIS, WA 98532		Meeting meals	90.22
04/06/15	THE HEATHMAN LODGE 7801 NE Greenwood Dr Vancouver, WA 98662		Conference lodging	247.49
04/09/15	IRON RABBIT 2103 HARRISON AVE NW OLYMPIA, WA 98502		Meeting meals	64.40
04/14/15	CATHY WORD PO BOX 40600 OLYMPIA, WA 98504		Leg. office supplies	150.00
04/14/15	CATHY WORD PO BOX 40600 OLYMPIA, WA 98504		Office food & coffee	152.50
	•	•	Total from attached pages	\$ 499.60

EXPENDITURES CONTINUATION SHEET (Attachment to Schedule A)

 $\textbf{Page} \ \ \beta$

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

RICHARD C DEBOLT (Richard DeBolt Surplus Account)

O4/01/15

04/30/15

Date Paid	Vendor or Recipient (Name and Address)	Code	Purpose of Expense and/or Description	Amount
04/20/15	MACKINAWS 545 N MARKET BLVD #1 CHEHALIS, WA 98532		Meeting meals	254.38
04/21/15	CATHY WORD PO BOX 40600 OLYMPIA, WA 98504		Office snacks & coffee	102.50
04/22/15	RIVERSIDE GOLF COURSE & GRILL 1451 NW AIRPORT WAY OLYMPIA, WA 98532		Meeting meals	60.00
04/27/15	RUMRUNNERS 289 NW Chehalis Ave Chehalis, WA 98532		Meeting meals	82.72