

## SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

**C4**(3/97)

PDC OFFICE USE 100758503 AMENDS 100758175 05-05-2017

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

OBERT W FERGUSON (Ro	bert Ferguson	n Surplus I	Funds)				
Mailing Address 255 2nd Ave NE				City Seattle, W	A		
<b>Zip + 4</b> 8115	Office Sought (Cand	•	Election Date 2016	*For PACs, Par			
Report Period From (last C-4	4) To (er	nd of period)	Final Report?	expenditure (i.e.,	an expense n	ot consid	ered a contribution)
Covered 03/01/1	7 04	/30/17	Yes No X	supporting or oppo	osing a state o	r local ca	<u>.ndidate</u> ?
RECEIPTS				*See next page	`	Yes .	No
Previous total cash and in kir (if beginning a new campaign	nd contributions (From n or calendar year, se	n line 8, last C-4) e instruction book	klet)		<u>\$</u>		941,732.72
2. Cash received (From line 2, §	Schedule A)			··· _ \$	0.00		
3. In kind contributions received	l (From line 1, Schedu	ule B)			0.00		
4. Total cash and in kind contrib	outions received this p	period (Line 2 plus	s 3)		·····-		0.00
5. Loan principal repayments m	ade (From line 2, Sch	nedule L)			0.00		
6. Corrections (From line 1 or 3,	, Schedule C)		Show + or (	-)	0.00		
7. Net adjustments this period (	Combine line 5 & 6)			Sho	ow + or (-)		0.00
8. Total cash and in kind contrib	outions during campai	gn (Combine line	s 1, 4 & 7)				941,732.72
9. Total pledge payments due (I	From line 2, Schedule	e B)	0.00				,
EXPENDITURES		•	•				
<ol><li>Previous total cash and in kir (If beginning a new campaign</li></ol>	nd expenditures (From n or calendar year, se	n line 17, last C-4 e instruction book	) klet)				44,854.29
11. Total cash expenditures (From	m line 4, Schedule A)			12	,474.17		
12. In kind expenditures (goods 8	& services) (From line	1, Schedule B)			0.00		
13. Total cash and in kind expend	ditures made this peri	iod (Line 11 plus	line 12)		<u> </u>		12,474.17
14. Loan principal repayments m	ade (From line 2, Sch	nedule L)			0.00		
15. Corrections (From line 2 or 3	, Schedule C)		Show + or (	-)	0.00		
16. Net adjustments this period (	Combine lines 14 & 1	5)		Sho	ow + or (-)		0.00
17. Total cash and in kind expend	ditures during campai	ign (Combine line	es 10, 13 and 16)				57,328.46
CANDIDATES ONLY	Name not	CASH SUMMA	RY				,
Won Lost U	Jnopposed on ballot		nd (Line 8 minus line 1 equal your bank account balar	•			884,404.26
General election		19. Liabilities: (	Sum of loans and deb	ots owed)			489.68
Treasurer's Daytime Telephone N	lo.:	20 Balanco (S.	urplus or deficit) (Line	18 minue lino 10\			
(206)382-5552		20. Daiance (St	irpius or delicit) (Liffe	10 minus iine 19)			883,914.58
CERTIFICATION: I certify that the inf		accompanying sche			ne best of my kn	owledge.	
Candidate's Signature	Date		Treasurer's Signature	9			Date

Philip Lloyd

05/10/17

ROBERT FERGUSON

## **CASH RECEIPTS AND EXPENDITURE**

SCHEDULE to C4

A	
(11/93)	

2

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

Report Date

ROBERT W FERGUSON	N (Robert B	Terguson Surplu	ıs Funds)		03/01/17	04/30/17	
1. CASH RECEIPTS (Co	ontributions) whic	h have been reported or	n C3. List each dep	oosit made since last C4	report was submitte	d.	
Date of deposit	Amount	Date of deposit	Amount	Date of deposit	Amount	Total deposits	
2. TOTAL CASH RECEIF	PTS			Enter a	lso on line 2 of C4	\$	ΩΙ

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 <u>in-kind or earmarked contributions</u> to a candidate or committee or <u>independent expenditures</u> 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

V - Voter dignature dathern

## 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		
04/03/17	ROBERT W FERGUSON 8255 2nd Ave NE Seattle, WA 98115		SOUTH SOUND MANOR: EVENT SPACE/CATERING	630.36	
04/03/17	ROBERT W FERGUSON 8255 2nd Ave NE Seattle, WA 98115		EXPEDIA: OFFICIAL TRAVEL	798.81	
04/25/17	NATIONAL ASSOCIATION OF 2030 M ST NW 8TH FLOOR WASHINGTON, DC 20036		CONFERENCE FEES	295.00	
04/27/17	CONFERENCE OF WESTERN ATTORNEYS 1300 I ST SACRAMENTO, CA 95814		CONFERENCE FEES	750.00	
04/13/17	FRIENDS OF BOB FERGUSON PO BOX 2405 SEATTLE, WA 98111		TRANSFER TO 2020 CAMPAIGN ACCOUNT	10,000.00	

Total from attached pages

0.00

Enter also on line 11 of C4

12,474.17

## IN KIND CONTRIBUTIONS, PLEDGES, ORDERS, DEBTS, OBLIGATIONS

SCHEDULE TO C4 **B** 

3

Candidate or Committee Name (Do not abbreviate. Use full name.)
ROBERT W FERGUSON (Robert Ferguson Surplus Funds)

Report Date 03/01/17 04/30/17

3. ORDERS PLACED, DEBTS, OBLIGATIONS. (Give estimate if actual amount not known. Exclude loans. Report loans on Schedule L.)

Expenditure Date	Vendor's/Recipient's Name and	Address	Amount Owed	Code	OR Description of Obligation
04/30/2017	ROBERT W FERGUSON 8255 2nd Ave NE Seattle, WA 98115		90.00		Reimburse Cab Fare
04/30/2017	ROBERT W FERGUSON 8255 2nd Ave NE Seattle, WA 98115		100.00		Reimburse Travel Meals
04/30/2017	WASHINGTON STATE ATTORNEY GET 1125 WASHINGTON ST SE OLYMPIA, WA 98501	NERAL'S OFFICE	299.68		PARK LANE HOTEL: TRAVEL
		TOTAL THIS PAGE	489.68		1