#### PUBLIC DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 0LYMPIA WA 98504-0908 (360) 753-1111 TOLL FREE 1-877-601-2828

## SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

**C4**(3/97)

PDC OFFICE USE 100806921 AMENDS 100786232 01-08-2018

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

· · ·	obert Ferguson	n Surplus	Funds)	<b>C</b> :	
Mailing Address 8255 2nd Ave NE				City Seattle, WA	
Zip + 4 98115	Office Sought (Cano ATTORNEY GEI		Election Date 2016	*For PACs, Parties & Cau this report period, did the com	
Report Period From (last C-	4) To (e	nd of period)	Final Report?	expenditure (i.e., an expense	not considered a contribution)
Covered 08/01/1	7 08	/31/17	Yes No X	supporting or opposing a state	e or local candidate?
RECEIPTS				*See next page	Yes No
<ol> <li>Previous total cash and in kin (if beginning a new campaign</li> </ol>	nd contributions (From n or calendar year, se	n line 8, last C-4) e instruction boo	klet)		\$ \$941,732.72
2. Cash received (From line 2,	Schedule A)			\$ \$0.00	
3. In kind contributions received	d (From line 1, Schedu	ıle B)		\$0.00	
4. Total cash and in kind contril	butions received this p	period (Line 2 plu	ıs 3)		\$0.00
5. Loan principal repayments m	nade (From line 2, Sch	edule 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)			Show + or (-)	\$0.00
8. Total cash and in kind contril	butions during campai	gn (Combine line	es 1, 4 & 7)		\$941,732.72
9. Total pledge payments due (	From line 2, Schedule	e B)	\$0.00		
EXPENDITURES		•			
10. Previous total cash and in kin (If beginning a new campaig	nd expenditures (Fron n or calendar year, se	n line 17, last C-4 e instruction boo	4) iklet)		\$87,364.35
11. Total cash expenditures (Fro	m line 4, Schedule A)			\$11,803.74	
12. In kind expenditures (goods	& services) (From line	1, Schedule B)		\$0.00	
13. Total cash and in kind expen	ditures made this per	od (Line 11 plus	line 12)		\$11,803.74
14. Loan principal repayments m	nade (From line 2, Sch	edule 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)		Show + or (-)	\$0.00
17. Total cash and in kind expen	ditures during campa	gn (Combine lin	es 10, 13 and 16)		\$99,168.09
CANDIDATES ONLY Won Lost	Name not Unopposed on ballot	CASH SUMM 18. Cash on ha	and (Line 8 minus line	17)	
Primary election				ance(s) plus your petty cash balance.]	
General election	<u> </u>	19. LIADIIITIES:	Court of loans and de	bts owed)	\$2,062.42
(206)382-5552		20. Balance (S	urplus or deficit) (Line	18 minus line 19)	\$840,502.21
CERTIFICATION: I certify that the in	formation herein and on	accompanying sch		•	
Candidate's Signature	Date		Treasurer's Signatur	re	Date
ROBERT FERGUSON	01	/08/18	Philip Lloyd		01/08/18

## CASH RECEIPTS AND EXPENDITURE



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

			/			•
ROBERT W FERGUSON	(Robert H	erguson Surplu	s Funds)		08/01/17	08/31/17
1. CASH RECEIPTS (Co	ntributions) whic	h have been reported on	C3. List each dep	osit 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 RECEIP	TS			Enter al	so 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 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.

C - Contributions (monetary, in-kind & transfers)

CODF DEFINITIONS ON NEXT PAGE

- 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

2 Report Date

- 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.

	Vendor or Recipient		Purpose of Expense		
Date Paid	(Name and Address)	Code	and/or Description		Amount
N/A	Expenses of \$50 or less	N/A	N/A		
08/03/17	BANK OF AMERICA PO BOX 15731 WILMINGTON, DE 19886		BANK OF AMERICA, NETROOTS: CONFERENCE FEE		\$205.74
08/03/17	BANK OF AMERICA PO BOX 15731 WILMINGTON, DE 19886		BANK OF AMERICA, ROASTERS COFFEE: MEETING FOOD		\$3.00
08/03/17	BANK OF AMERICA PO BOX 15731 WILMINGTON, DE 19886		BANK OF AMERICA,NAAG: CONFERENCE FEE		\$595.00
08/11/17	WASHINGTON STATE DEMOCRATIC PO BOX 4027 SEATTLE, WA 98194		CONTRIBUTION	Ş	10,000.00
08/31/17	JEFFERSON COUNTY DEMOCRATS PO BOX 85 PORT TOWNSEND, WA 98368		CONTRIBUTION		\$1,000.00
			Total from attached pages	\$	\$0.00

4. TOTAL CASH EXPENDITURES

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

SCHEDULE TO C4	B
	(11/93)

Candidate or Committee Name (Do not abbreviate. Use full name.) ROBERT W FERGUSON (Robert Ferguson Surplus Funds) Report Date 08/01/17 08/31/17

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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 Cod	de <b>OR</b> Description of Obligation
8/31/2017	BANK OF AMERICA PO BOX 15731 WILMINGTON DE, 19886	2062.42	Credit Card Payment
	TOTAL THIS PAG	GE 2062.42	