(360) 753-1111 TOLL FREE 1-877-601-2828 EXPEN

711 CAPITOL WAY RM 206

OLYMPIA WA 98504-0908

DISCLOSURE COMMISSION

PO BOX 40908

PUBLIC

|  |  | not abbreviate. Inclu                         |   | ······   |  |                      |                         |
|--|--|---|---|--|--|----------------------|-------------------------|
| JAN E ANGEI<br>Mailing Address<br>5184 SE G1   |  | gel Surplus H                                 | unds Acco                               | Juile )  | City<br>Port Orcahrd, WA                                   |                      |                         |
| Zip + 4<br>98367   |  | Office Sought (Cano<br>STATE REPRES           |   | Election Date 2017                             | *For PACs, Parties & Ca<br>this report period, did the cor |                      |                         |
| Report Period  | From (last C-4                             | ) To (er                                      | nd of period)                           | Final Report?                                  | expenditure (i.e., an expens                               | e not cons           | sidered a contribution) |
| Covered  | 01/01/18                                   | 8 06  | /30/18                                  | Yes No X                                       | supporting or opposing a stat                              | e or local           | <u>candidate</u> ?      |
| RECEIPTS   |  |   |   |  | *See next page   | Yes                  | No                      |
| <ol> <li>Previous t<br/>(if beginni</li> </ol>   | total cash and in kin<br>ng a new campaign | d contributions (From or calendar year, see   | l line 8, last C-4<br>e instruction boo | )<br>oklet)                                    |  | \$                   | \$270,091.77            |
| 2. Cash rece   | eived (From line 2, S                      | chedule A)                                    |   |  | \$ \$0.00  | -                    |                         |
| 3. In kind co  | ntributions received                       | (From line 1, Schedu                          | ıle B)                                  |  | \$0.00   | -                    |                         |
| 4. Total cash  | n and in kind contrib                      | utions received this p                        | eriod (Line 2 pl                        | us 3)  |  |                      | \$0.00                  |
| 5. Loan prine  | cipal repayments ma                        | ade (From line 2, Sch                         | edule L)                                |  | \$0.00   | -                    |                         |
| 6. Correctior  | ns (From line 1 or 3,                      | Schedule C)                                   |   | Show + or                                      | (-) \$0.00   | -                    |                         |
| 7. Net adjustments this period (Combine line 5 & 6) Show + or (-)  |  |   |   |  | Show + or (-)  |                      | \$0.00                  |
| 8. Total cash  | n and in kind contrib                      | utions during campai                          | gn (Combine lin                         | ues 1, 4 & 7)                                  |  |                      | \$270,091.77            |
| 9. Total pled  | ge payments due (F                         | rom line 2, Schedule                          | B)                                      | \$0.00   |  |                      |                         |
| EXPENDITURE<br>10. Previous t<br>(If beginni   | total cash and in kin                      | d expenditures (From<br>or calendar year, see | line 17, last C-<br>instruction boo     | 4)<br>oklet)                                   |  |                      | \$259,353.70            |
| 11. Total cash   | n expenditures (Fror                       | n line 4, Schedule A)                         |   |  | \$10,000.00  | <u>)</u>             |                         |
| 12. In kind expenditures (goods & services) (From line 1, Schedule B)  |  |   |   |  | \$0.00   | L                    |                         |
| 13. Total cash and in kind expenditures made this period (Line 11 plus line 12) \$10,000.00  |  |   |   |  |  | \$10,000.00          |                         |
| 14. Loan principal repayments made (From line 2, Schedule L)   |  |   |   | \$0.00   | <u>)</u>   |                      |                         |
| 15. Correctior   | ns (From line 2 or 3,                      | Schedule C)                                   |   | Show + or                                      | (-) \$0.00   | <u>)</u>             |                         |
| 16. Net adjustments this period (Combine lines 14 & 15) Show + or  |  |   |   |  |  |                      | \$0.00                  |
| 17. Total cash   | n and in kind expend                       | litures during campai                         | gn (Combine lin                         | nes 10, 13 and 16)                             |  |                      | \$269,353.70            |
| CANDIDATES C   |  | Name not                                      |   |  | 47)  |                      |                         |
|  | Won Lost U                                 | nopposed on ballot                            |   | •  | 17)ance(s) plus your petty cash balance.]                  |                      | \$738.07                |
| Primary election       Image: Constraint of the structure of structur |  |   |   |  |  | \$0.00               |                         |
| Treasurer's Daytime Telephone No.:       20. Balance (Surplus or deficit) (Line 7)         (360)440-2094       20. Balance (Surplus or deficit) (Line 7)   |  |   |   |  |  | \$738.07             |                         |
|  |  |   |   |  | · · · · · · · · · · · · · · · · · · ·                      |                      |                         |
| CERTIFICATION<br>Candidate's Sign  |  | ormation herein and on Date                   | accompanying scl                        | hedules and attachments<br>Treasurer's Signatu | is true and correct to the best of my<br>re                | <pre>whowledge</pre> | Date                    |
| JAN ANGEL 07/0   |  |   | /06/18                                  | Lynn K Williams                                |  |                      | 07/06/18                |

## SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

PDC OFFICE USE 100842248

07-06-2018

**C4** 

(3/97)

## CASH RECEIPTS AND EXPENDITURE



| Candidate or Committee Name (Do not abbreviate. Use full name.)   |            |                 |         |                 | Report Date          |                  |  |
|---|------------|-----------------|---------|-----------------|----------------------|------------------|--|
| JAN E ANGEL (Jan  | E Angel Su | irplus Funds Ac | ccount) |                 | 01/01/18             | 06/30/18         |  |
| 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 RECEIP  | PTS        |                 |         | Enter a         | llso on line 2 of C4 | <u>\$</u> \$0.00 |  |

2. TOTAL CASH RECEIPTS

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

P - Postage, Mailing Permits

2

- 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<br>(Name and Address)                        | Code | Purpose of Expense<br>and/or Description | Amount      |
|-----------|--|------|--|-------------|
| N/A       | Expenses of \$50 or less   | N/A  | N/A                                      |             |
| 06/04/18  | SENATE REPUBLICAN CAMPAIGN<br>P O Box 11025<br>Olympia, WA 98508 |      | Transfer funds from Surplus              | \$10,000.00 |
|           |  |      |  |             |
|           |  |      |  |             |
|           |  |      |  |             |
|           |  |      |  |             |
|           |  |      |  |             |
|           |  |      |  |             |
|           |  |      | Total from attached pages                | \$ \$0.00   |

4. TOTAL CASH EXPENDITURES