

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4(3/97)

PDC OFFICE USE 100852014

08-10-2018

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

	Friends of Do	ow Constan	tine S	urplus				
Mailing Address PO Box 16285					City Seattle,	WA		
Zip + 4 98116	Office Sought (Cand	•	Electi 2017	on Date			cus Committees: Dunittee make an indepen	
Report Period From (last C-	4) To (er	nd of period)	Final	Report?	expenditure (i.e	e., an expense	not considered a contrib	
Covered 07/01/1	8 07	/31/18	Yes	No X	supporting or op	posing a state	or local candidate?	
RECEIPTS					*See next page		Yes No	
Previous total cash and in kir (if beginning a new campaign	nd contributions (From n or calendar year, see	line 8, last C-4) instruction bool	klet)				\$ \$755,852	.60
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 contrib	outions received this p	eriod (Line 2 plu	s 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	r (-)	\$0.00		
7. Net adjustments this period (Combine line 5 & 6)				S	show + or (-) _	\$0	.00
8. Total cash and in kind contrib	outions during campai	gn (Combine line	es 1, 4 & 7)	 1		\$755 , 852	.60
9. Total pledge payments due (From line 2, Schedule	B)		\$0.00				
EXPENDITURES								
Previous total cash and in kir (If beginning a new campaign	nd expenditures (From n or calendar year, se	e instruction boo	l) klet)			·····	\$346,717	.19
11. Total cash expenditures (Fro	m line 4, Schedule A)				······ <u>\$</u>	7,333.85		
12. In kind expenditures (goods	& services) (From line	1, Schedule B).				\$0.00		
13. Total cash and in kind expen							\$7,333	.85
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	r (-)	\$0.00		
16. Net adjustments this period (Combine lines 14 & 1	5)			S	show + or (-) _	\$0	.00
17. Total cash and in kind expen	ditures during campai	gn (Combine line	es 10, 13 a	and 16)			\$354,051	. 04
CANDIDATES ONLY	Name not	CASH SUMMA						
Won Lost I	Unopposed on ballot				e 17)		\$401,801	.56
Primary election		19 Liabilities	(Sum of lo	ans and de	ehts owed)			
General election					.00			
(000)000-0000		20. Balance (Se	urplus or c	leficit) (Line	e 18 minus line 19)		\$401,801	.56
CERTIFICATION: I certify that the in	formation herein and on	accompanying sch				the best of my k	nowledge.	
Candidate's Signature	Date		Treasure	er's Signatu	ure		Date	
JAMES CONSTANTINE	08	/10/18	S A Ca	arlson			08/10/18	

CASH RECEIPTS AND EXPENDITURE

SCHEDULE to C4

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7	
1/93)	

2

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

Report Date

JAMES D CONSTANTINI	E (Friend	ds of Dow Cons	tantine Surp	lus)	07/01/18	07/31/18	
1. CASH RECEIPTS (Contr	ibutions) whic	h have been reported o	n C3. List each dep	osit made since last C4	report was submitted	d.	
Date of deposit	Amount	Date of deposit	Amount	Date of deposit	Amount	Total deposits	
2. TOTAL CASH RECEIPTS	3			Enter a	lso on line 2 of C4	\$ 50.0	ı

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

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	\$341.82
07/03/18	JENNIFER HUSTON 422 1st Ave W Seattle, WA 98119		Reimbursement for Work Meeting Food from Mama's	\$184.13
07/13/18	BUDDHA RUKSA 3520 SW Genesee St Seattle, WA 98126		Food for Staff Meeting	\$99.68
07/13/18	ARTSWEST 4711 California Ave SW Seattle, WA 98116		Donation to Charitable Organization	\$555.00
07/14/18	WASHINGTON STATE ASSOCIATION 1809 7th Avenue, Suite 1500 Seattle, WA 98101-1328		Annual Membership	\$204.00
07/18/18	ZOCALO 224 Occidental Ave S Seattle, WA 98104		Food for Work Meeting	\$68.25
07/18/18	FOUNDATION FOR WORKING FAMILIES 321 16th Avenue S Seattle, WA 98144		Donation to Charitable Organization	\$100.00
	1	I	Total from attached pages	\$ \$5.780.97

Total from attached pages \$5,780.97

\$7,333.85

Enter also on line 11 of C4

EXPENDITURES CONTINUATION SHEET (Attachment to Schedule A)

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

Page 3

Report Date

JAMES D CONSTANTINE (Friends of Dow Constantine Surplus)

07/01/18

07/31/18

Date Paid	Vendor or Recipient (Name and Address)	Code	Purpose of Expense and/or Description	Amount
07/19/18	ZOCALO 224 Occidental Ave S Seattle, WA 98104		Food for Staff Meeting	\$123.39
07/23/18	ARTSWEST 4711 California Ave SW Seattle, WA 98116		Donation to Charitable Organization	\$225.00
07/30/18	ZOCALO 224 Occidental Ave S Seattle, WA 98104		Food for Staff Meeting	\$175.33
07/31/18	MAMNOON 1508 Melrose Avenue Seattle, WA 98122		Food for Staff Meeting	\$115.79
07/31/18	YOUTHCARE 2500 NE 54th Street Seattle, WA 98105		Donation to Charitable Organization	\$5,141.46