

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4(3/97)

PDC OFFICE USE 100875764

12-09-2018

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

| MANKA DHINGRA (Manka | Dhingra Surplus F | unds 2 | Accoun | t) | | | | |
|---|---|---------------------------|----------------|---------|------------------|---------------------------------------|---------------|----------------------|
| Mailing Address City P.O. BOX 2467 REDMOND, WA | | | | | | | | |
| Zip + 4 98073 | Office Sought (Candidates) STATE SENATOR | | Electi 2017 | on Date | | *For PACs, Parties & Ca | | |
| Report Period From (last C- | To (end of pe | eriod) | Final | Report? | | expenditure (i.e., an expense | e not consid | ered a contribution) |
| Covered 11/01/18 | 11/30/ | 18 | Yes | No X | 3 | supporting or opposing a state | e or local ca | indidate? |
| RECEIPTS | | | | | | *See next page | Yes | No |
| Previous total cash and in kir (if beginning a new campaign | nd contributions (From line 8, or calendar year, see instru | last C-4) ction bool | klet) | | | | \$ | \$5,000.60 |
| 2. Cash received (From line 2, § | Schedule A) | | | | | \$ \$90,000.08 | | |
| 3. In kind contributions received | I (From line 1, Schedule B) | | | | | \$0.00 | | |
| 4. Total cash and in kind contrib | outions received this period (I | ine 2 plu | s 3) | | | | | \$90,000.08 |
| 5. Loan principal repayments m | ade (From line 2, Schedule 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 contrib | outions during campaign (Cor | mbine line | es 1, 4 & 7 | ·) | ¬ | | | \$95,000.68 |
| 9. Total pledge payments due (I | From line 2, Schedule B) | | | \$0.00 | 0 | | | |
| EXPENDITURES | | | | | | | | |
| Previous total cash and in kin (If beginning a new campaigr | nd expenditures (From line 17 n or calendar year, see instru | 7, last C-4 ction bool | ·) klet) | | | | | \$3,142.28 |
| 11. Total cash expenditures (From | m line 4, Schedule A) | | | | | \$1,409.57 | | |
| 12. In kind expenditures (goods & | & services) (From line 1, Sch | edule B) . | | | | \$0.00 | | |
| 13. Total cash and in kind expend | ditures made this period (Line | e 11 plus | line 12) | | | | | \$1,409.57 |
| 14. Loan principal repayments m | ade (From line 2, Schedule L | .) | | | | \$0.00 | | |
| 15. Corrections (From line 2 or 3, | , Schedule C) | | | Show + | or (-) | \$0.00 | | |
| 16. Net adjustments this period (| Combine lines 14 & 15) | | | | | Show + or (-) | | \$0.00 |
| 17. Total cash and in kind expend | ditures during campaign (Cor | mbine line | es 10, 13 a | and 16) | | | | \$4,551.85 |
| CANDIDATES ONLY | | ISUMMA | | | 47 | 7) | | ¢00 449 93 |
| Won Lost U | | | | | | 7)e(s) plus your petty cash balance.] | | \$90,448.83 |
| Primary election | | | | | s owed) | | \$0.00 | |
| Treasurer's Daytime Telephone No.: | | | | | | | | |
| (206) 335-8815 | | | | ine 18 | 8 minus line 19) | | \$90,448.83 | |
| CERTIFICATION: I certify that the inf | formation herein and on accompa | anying sch | | | | | knowledge. | |
| Candidate's Signature Date Treasurer's Signature | | | | | | | | Date |
| MANKA DHINGRA | MANKA DHINGRA 12/09/18 ANDY LO | | | | | | 1 | 2/09/18 |

CASH RECEIPTS AND EXPENDITURE

SCHEDULE to C4

| F | 1 |
|------|-----|
| (11/ | 93) |

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

Report Date

| MANKA | DHINGRA | (Manka | Dningra | Surpius | runas | Account) | |
|-------|---------|--------|---------|---------|-------|----------|--|
| | | | | | | | |

11/01/18 11/30/18

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 |
|-----------------|-------------|-----------------|--------|-----------------|--------|----------------|
| 11/02/2018 | \$0.08 | | | | | |
| 11/07/2018 | \$60,000.00 | | | | | |
| 11/30/2018 | \$30,000.00 | | | | | |
| | | | | | | |

Enter also on line 2 of C4 \$ TOTAL CASH RECEIPTS \$90,000.08

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.

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..
- 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 | \$50.00 |
| 11/04/18 | HOTELS.COM 333 108TH AVE NE BELLEVUE, WA 98004 | | Renaissance New York Hotel 57 - Accommodations | \$329.40 |
| 11/05/18 | MANKA DHINGRA P.O. BOX 2467 REDMOND, WA 98073 | | TIA event | \$1,030.17 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | Total from attached pages | \$ \$0.00 |

\$

Enter also on line 11 of C4

\$1,409.57