## 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

PDC OFFICE USE

02-05-2019

**C4** 

(3/97)

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

| Barbara F Bailey (Fri   | ends of Barba                                  | ara Bailey                               | Surplu        | us Acc       | ount)        |                 |               |               |  |
|---|--|--|---------------|--------------|--------------|-----------------|---------------|---------------|--|
| Mailing AddressCityPO Box 374Oak Harbor, WA   |  |  |               |              |              |                 |               |               |  |
| Zip + 4<br>98277  | Office Sought (Cano<br>STATE SENATO            |  | Election 2021 | on Date      |              |                 |               |               | mittees: During<br>e an <u>independent</u> |
| Report Period From (last C-4  | l) To (er                                      | nd of period)                            | Final F       | Report?      | expen        | diture (i.e.,   | an expense    | e not consid  | ered a contribution)                       |
| Covered 01/01/19  | 9 01   | /31/19                                   | Yes           | No X         | <u>suppo</u> | rting or oppo   | osing a state | e or local ca | ndidate?                                   |
| RECEIPTS  |  |  |               |              | *See i       | next page       |               | Yes           | No   |
| <ol> <li>Previous total cash and in kin<br/>(if beginning a new campaign</li> </ol> | d contributions (From<br>or calendar year, see | i line 8, last C-4)<br>e instruction boo | klet)         |              |              |                 |               | \$            | \$285,615.11                               |
| 2. Cash received (From line 2, S  | Schedule A)                                    |  |               |              | \$           |                 | \$0.00        |               |  |
| 3. In kind contributions received   | (From line 1, Schedu                           | ıle B)                                   |               |              |              |                 | \$0.00        |               |  |
| 4. Total cash and in kind contrib   | utions received this p                         | eriod (Line 2 plu                        | ıs 3)         |              |              |                 |               |               | \$0.00                                     |
| 5. Loan principal repayments ma   | ade (From line 2, Sch                          | edule L)                                 |               |              |              |                 | \$0.00        |               |  |
| 6. Corrections (From line 1 or 3,   | Schedule C)                                    |  |               | Show + o     | or (-)       |                 | \$0.00        |               |  |
| 7. Net adjustments this period (  | Combine line 5 & 6)                            |  |               |              |              | Sho             | ow + or (-)   |               | \$0.00                                     |
| 8. Total cash and in kind contrib   | utions during campai                           | gn (Combine line                         | es 1, 4 & 7)  |              |              |                 |               |               | <u>\$285,615.11</u>                        |
| 9. Total pledge payments due (F   | From line 2, Schedule                          | B)                                       |               | \$0.00       |              |                 |               |               |  |
| EXPENDITURES  |  |  |               |              |              |                 |               |               |  |
| 10. Previous total cash and in kin<br>(If beginning a new campaign                  | d expenditures (From<br>or calendar year, see  | n line 17, last C-4<br>e instruction boo | 4)<br>•klet)  |              |              |                 |               |               | \$239,123.98                               |
| 11. Total cash expenditures (Fror   | m line 4, Schedule A)                          |  |               |              |              |                 | \$90.00       |               |  |
| 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                         | od (Line 11 plus                         | line 12)      |              |              |                 |               |               | \$90.00                                    |
| 14. Loan principal repayments ma  | ade (From line 2, Sch                          | edule L)                                 |               |              | ·····        |                 | \$0.00        |               |  |
| 15. Corrections (From line 2 or 3,  | Schedule C)                                    |  |               | Show + o     | or (-)       |                 | \$0.00        |               |  |
| 16. Net adjustments this period (Combine lines 14 & 15)                             |  |  |               |              |              | Sho             | ow + or (-)   |               | \$0.00                                     |
| 17. Total cash and in kind expend   | ditures during campai                          | gn (Combine line                         | es 10, 13 a   | nd 16)       |              |                 |               |               | <u>\$239,213.98</u>                        |
|   | Name not                                       |  |               |              | - 47         |                 |               |               |  |
|   | Jnopposed on ballot                            | 18. Cash on ha<br>[Line 18 should        |               |              |              |                 |               |               | \$46,401.13                                |
| Primary election  |  | 19. Liabilities:                         | (Sum of loa   | ans and d    | lebts owed   | d) (k           |               |               | *0.00                                      |
| Treasurer's Daytime Telephone N   | o.:  |  | (             |              |              | ,               |               |               | \$0.00                                     |
| (360)679-2055   |  | 20. Balance (S                           | urplus or d   | eficit) (Lin | ne 18 minu   | ıs line 19)     |               |               | \$46,401.13                                |
| CERTIFICATION: I certify that the inf   |  | accompanying sch                         | 1             |              |              | d correct to th | ne best of my | knowledge.    | _  |
| Candidate's Signature   | Date   |  | Treasure      | r's Signat   | ure          |                 |               |               | Date                                       |
| Barbara Bailey  | 02   | /05/19                                   | Bernis        | H Ba         | iley         |                 |               | 0             | 2/05/19                                    |

## CASH RECEIPTS AND EXPENDITURE



| Candidate or Committee Name (Do not abbreviate. Use full name.) |                |                         |                   |                          |                      | eport Date     |
|---|----------------|-------------------------|-------------------|--------------------------|----------------------|----------------|
| Barbara F Bailey (I   | Friends o      | of Barbara Bail         | ey Surplus        | Account)                 | 01/01/19             | 01/31/19       |
| 1. CASH RECEIPTS (Contr   | ibutions) whic | h have been reported on | C3. List each dep | oosit made since last C4 | report was submitted |                |
| Date of deposit   | Amount         | Date of deposit         | Amount            | Date of deposit          | Amount               | Total deposits |
|   |                |                         |                   |                          |                      |                |
|   |                |                         |                   |                          |                      |                |
|   |                |                         |                   |                          |                      |                |
|   |                |                         |                   |                          |                      | ሱ              |
| 2. TOTAL CASH RECEIPTS  | 6              |                         |                   | Enter a                  | 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:

- 1) If expenditures are in-kind or earmarked contributions to a candidate or committee or independent expenditures that benefit a candidate or 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
- 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 | ļ     | Amount  |
|-----------|---|------|--|-------|---------|
| N/A       | Expenses of \$50 or less                  | N/A  | N/A                                      |       | \$90.00 |
|           |   |      |  |       |         |
|           |   |      |  |       |         |
|           |   |      |  |       |         |
|           |   |      |  |       |         |
|           |   |      |  |       |         |
|           |   |      |  |       |         |
|           |   |      |  |       |         |
|           |   |      | Total from attached page                 | es \$ | \$0.00  |

4. TOTAL CASH EXPENDITURES