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

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

## SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

PDC OFFICE USE

05-03-2019

24

(3/97)

| BETH DOGLIO (Beth Dog   | lio Surplus Funds   | Accou                   | nt)            |                  |                                |                  |             |                                     |
|---|---|-------------------------|----------------|------------------|--------------------------------|------------------|-------------|-------------------------------------|
| Mailing Address<br>PO Box 222   |   |                         |                |                  | City<br>Olympia,               | WA               |             |                                     |
| Zip + 4<br>98507  | Office Sought (Candidates)<br>STATE REPRESENTA  | TIVE                    | Electi<br>2020 | on Date          |                                |                  |             | mmittees: During ake an independent |
| Report Period From (last C-4  | I) To (end of per   | iod)                    | Final          | Report?          |                                |                  |             | idered a contribution)              |
| Covered 04/01/19  | 9 04/30/1   | .9                      | Yes            | No X             | supporting or o                | opposing a stat  | te or local | candidate?                          |
| RECEIPTS  |   |                         | 100            | 110              | *                              |                  | Mara        | Nie                                 |
|   |   |                         |                |                  | *See next pag                  | e                | Yes         | No                                  |
| <ol> <li>Previous total cash and in kin<br/>(if beginning a new campaign</li> </ol>   | d contributions (From line 8, l<br>or calendar year, see instruc  | ast C-4)<br>tion bookl  | et)            |                  |                                |                  | \$          | \$28,747.75                         |
| 2. Cash received (From line 2, S  |   |                         |                |                  |                                |                  | _           |                                     |
| 3. In kind contributions received   | (From line 1, Schedule B)   |                         |                |                  |                                | \$0.00           | -           |                                     |
| 4. Total cash and in kind contrib   | utions received this period (Li   | ine 2 plus              | 3)             |                  |                                |                  |             | \$0.00                              |
| 5. Loan principal repayments ma   | 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   | utions during campaign (Com   | bine lines              | 51,4&7         | )                |                                |                  |             | \$28,747.75                         |
| 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 line 17,<br>or calendar year, see instruc  | last C-4)<br>tion bookl | let)           |                  |                                |                  |             | \$1,135.58                          |
| 11. Total cash expenditures (Fror   | m line 4, Schedule A)   |                         |                |                  |                                | \$0.00           | <u>)</u>    |                                     |
| 12. In kind expenditures (goods & services) (From line 1, Schedule B)   |   |                         |                |                  | \$0.00                         | 1                |             |                                     |
| 13. Total cash and in kind expend   | ditures made this period (Line  | 11 plus li              | ne 12)         |                  |                                |                  |             | \$0.00                              |
| 14. Loan principal repayments made (From line 2, Schedule L)  |   |                         |                |                  |                                | <u>)</u>         |             |                                     |
| 15. Corrections (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 and in kind expend   | ditures during campaign (Corr   | bine lines              | s 10, 13 a     | and 16)          |                                |                  |             | \$1,135.58                          |
| CANDIDATES ONLY   |   | SUMMAF                  |                |                  |                                |                  |             |                                     |
| Won Lost L  |   |                         |                |                  | 17)<br>Ince(s) plus your petty |                  |             | \$27,612.17                         |
| General election  | Image: |                         |                |                  |                                |                  |             | \$0.00                              |
| Treasurer's Daytime Telephone No.:       20. Balance (Surplus or deficit) (Line 1)         (206)682-7328       20. Balance (Surplus or deficit) (Line 1)                            |   |                         |                | 18 minus line 19 | 9)                             |                  | \$27,612.17 |                                     |
| CERTIFICATION: L certify that the inf   | ormation herein and on accompa  | nvina scher             | dules and      | attachments      | is true and correct            | to the best of m | / knowledge |                                     |
| CERTIFICATION:         I certify that the information herein and on accompanying schedules and attachments is to Candidate's Signature           Date         Treasurer's Signature |   |                         |                |                  |                                | ,                | Date        |                                     |
| BETH DOGLIO   | 05/03/1   | 9                       | Jay Pe         | etterso          | n                              |                  |             | 05/03/19                            |

## CASH RECEIPTS AND EXPENDITURE



| Candidate of Committee Name (Do not abbreviate. Use full name.) |                 |                         |                     |                          |                      | Report Date    |     |  |  |
|---|-----------------|-------------------------|---------------------|--------------------------|----------------------|----------------|-----|--|--|
| BETH DOGLIO (Beth 1   | Doglio Su       | urplus Funds Ac         | count)              |                          | 04/01/19             | 04/30/19       |     |  |  |
| 1. CASH RECEIPTS (Contr   | ributions) whic | h have been reported or | n C3. List each dep | oosit made since last C4 | report was submitted | J.             |     |  |  |
| Date of deposit   | Amount          | Date of deposit         | Amount              | Date of deposit          | Amount               | Total deposits |     |  |  |
|   |                 |                         |                     |                          |                      |                |     |  |  |
|   |                 |                         |                     |                          |                      |                |     |  |  |
|   |                 |                         |                     |                          |                      |                |     |  |  |
|   |                 |                         |                     |                          |                      | •              |     |  |  |
| 2. TOTAL CASH RECEIPTS  | S               |                         |                     | 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:

- 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)

CODE 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 | А     | mount  |
|-----------|---|------|--|-------|--------|
| N/A       | Expenses of \$50 or less                  | N/A  | N/A                                      |       |        |
|           |   |      |  |       |        |
|           |   |      |  |       |        |
|           |   |      |  |       |        |
|           |   |      |  |       |        |
|           |   |      |  |       |        |
|           |   |      |  |       |        |
|           |   |      |  |       |        |
|           |   |      |  |       |        |
|           |   |      |  |       |        |
|           |   |      |  |       |        |
|           |   |      | Total from attached pag                  | es \$ | \$0.00 |

4. TOTAL CASH EXPENDITURES