

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4(3/97)

PDC OFFICE USE 100909530

06-10-2019

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

Kristine M Reeves (Kr	ristine Reeves Sur	plus Fur	nds 2	Acco	unt)			
Mailing Address PO Box 24163						City Federal	Way, WA		
Zip + 4 98093	Office Sought (Candidates) STATE REPRESENTA		Election 2020		te				mittees: During e an independent
Report Period From (last C-	4) To (end of pe	eriod)	Final I	Repor	t?	expenditure	(i.e., an expense	e not consid	ered a contribution)
Covered 05/01/1:	9 05/31/3	19	Yes	No	x	supporting or	opposing a stat	e or local ca	andidate?
RECEIPTS		L				*See next pa	ige	Yes	No
Previous total cash and in kir (if beginning a new campaign	nd contributions (From line 8, n or calendar year, see instruc	last C-4) ction booklet)						\$	\$31,614.08
2. Cash received (From line 2, 9	Schedule A)					··· <u></u> \$	\$0.00		
3. In kind contributions received	d (From line 1, Schedule B)						\$0.00		
4. Total cash and in kind contrib	outions received this period (l	ine 2 plus 3).							\$0.00
5. Loan principal repayments m									
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 lines 1,	4 & 7)					\$31,614.08
9. Total pledge payments due (From line 2, Schedule B)			\$0.	00				
EXPENDITURES									
Previous total cash and in kir (If beginning a new campaigr	nd expenditures (From line 17 n or calendar year, see instru	7, last C-4) ction booklet)							\$19,752.27
11. Total cash expenditures (Fro	m line 4, Schedule A)						\$2,160.50		
12. In kind expenditures (goods a	& services) (From line 1, Scho	edule B)					\$0.00		
13. Total cash and in kind expen	ditures made this period (Line	e 11 plus line	12)						\$2,160.50
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 expen), 13 a	nd 16)				\$21,912.77
CANDIDATES ONLY Won Lost U		SUMMARY	lina 8	minu	s line 1	17)			\$9,701.31
						nce(s) plus your pe			437701.31
Primary election		abilities: (Sun	n of loa	ans aı	nd deb	ts owed)			\$0.00
Treasurer's Daytime Telephone No.: 20. Balance (Surplu			ıs or d	eficit)	(Line	18 minus line '	19)		\$9,701.31
CERTIFICATION: I certify that the in:	formation herein and on accomp	anvina schedula	as and	attachi	nente i	s true and correc	at to the hest of my	knowledge	
Candidate's Signature	Date		easure				or to the pest of flly	Milowicuge.	Date
Kristine Reeves	06/10/1	L9 Ja	son	Ben	nett	<u>.</u>		n	6/10/19

CASH RECEIPTS AND EXPENDITURE

SCHEDULE to C4

Α	
(11/93)	

2

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

Report Date

(Kristine	Reeves Surpl	us Funds Acc	ount)	05/01/19	05/31/19
ntributions) whic	h have been reported o	n C3. List each dep	oosit made since last C4	report was submitte	d.
Amount	Date of deposit	Amount	Date of deposit	Amount	Total deposits
ΓS			Enter a	lso on line 2 of C4	\$ \$0.00
	ntributions) whic	ntributions) which have been reported o Amount Date of deposit	ntributions) which have been reported on C3. List each dep Amount Date of deposit Amount	Amount Date of deposit Amount Date of deposit Amount Date of deposit	

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	\$206.63
05/06/19	Freedom Cabs 4601 Glencoe Street Denver, CO 80216	т	travel to airport	\$63.91
05/06/19	Uber 1455 Market Street #400 San Francisco, CA 94103	т	Uber travel	\$56.16
05/07/19	Aramark Conference Center Hotel 9600 Newbridge Drive Potomac, MD 20854	т	lodging for conference	\$336.74
05/13/19	Emily Labish 4248 A Street Southeast Space Auburn, WA 98002	G	child care	\$85.00
05/14/19	Alaska Air 17801 International Boulevard SeaTac, WA 98158	т	airfare for conference	\$756.60
05/16/19	Usps 32829 Pacific Hwy S Federal Way, WA 98003	G	stamps	\$235.41
-	1	1	Total from attached pages S	\$420.05

Total from attached pages \$ \$420.05

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ \$2,160.50

EXPENDITURES CONTINUATION SHEET (Attachment to Schedule A)

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

Report Date

Kristine M Reeves (Kristine Reeves Surplus Funds Account) 05/01/19 05/31/19

Date Paid	Vendor or Recipient (Name and Address)	Code	Purpose of Expense and/or Description	Amount
05/23/19	Emily Labish 4248 A Street Southeast Space Auburn, WA 98002	G	childcare	\$82.50
05/23/19	Thai Taste 601 2nd Avenue Seattle, WA 98104	G	meal for meeting	\$65.00
05/24/19	AT&T 1838 South Commons Suite A-28 Federal Way, WA 98003	G	cell phone	\$137.55
05/28/19	Emily Labish 4248 A Street Southeast Space Auburn, WA 98002	G	childcare	\$60.00
05/29/19	Well 80 Brewpub 514 4th Avenue East Olympia, WA 98501	G	meal for meeting	\$75.00