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 100910427

06-11-2019

**C4** 

(3/97)

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

THOMAS E DENT (State	Representative Tor	n Dent	Campaign Su	rplus Accou	unt)	
Mailing Address 601 S Pioneer Way				City <b>Moses Lak</b>	e, WA	
Zip + 4 98837	Office Sought (Candidates) STATE REPRESENTAT	TIVE	Election Date 2016			cus Committees: During nittee make an independent
Report Period From (last C-4	) To (end of per	iod)	Final Report?	expenditure (i.e	e., an expense	not considered a contribution)
Covered 05/01/19	05/31/1	9	Yes No X	supporting or op	posing a state	or local candidate?
RECEIPTS			L	*See next page		Yes No
<ol> <li>Previous total cash and in kin (if beginning a new campaign</li> </ol>	d contributions (From line 8, l or calendar year, see instruct	ast C-4) ion bookle	ət)			\$\$220,194.23
2. Cash received (From line 2, S	Schedule A)			\$	\$0.00	
3. In kind contributions received	(From line 1, Schedule B)				\$0.00	
4. Total cash and in kind contrib	utions received this period (Li	ne 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)			S	how + or (-)	\$0.00
8. Total cash and in kind contrib	utions during campaign (Com	bine lines	1, 4 & 7)			\$220,194.23
9. Total pledge payments due (F	From line 2, Schedule B)		\$0.00			
EXPENDITURES	d overanditures (From line 17	leat C 4)				
10. Previous total cash and in kin (If beginning a new campaign	or calendar year, see instruc	tion bookle	ət)			\$181,124.56
11. Total cash expenditures (Fror	n line 4, Schedule A)			<u>\$</u>	1,448.51	
12. In kind expenditures (goods &	services) (From line 1, Sche	dule B)			\$0.00	
13. Total cash and in kind expenditures made this period (Line 11 plus line 12)						\$1,448.51
14. Loan principal repayments made (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)			S	how + or (-)	\$0.00
17. Total cash and in kind expend	ditures during campaign (Com	bine lines	10, 13 and 16)			\$182,573.07
CANDIDATES ONLY		SUMMAR				
Won         Lost         Unopposed         on ballot         18. Cash on hand (Line 8 minus line 17)         [Line 18 should equal your bank account balance]           Primary election					ash balance.]	\$37,621.16
General election		oilities: (S	um of loans and del	ots owed)		\$0.00
Treasurer's Daytime Telephone N (509)750-4263		ance (Sur	plus or deficit) (Line	18 minus line 19)		\$37,621.16
CERTIFICATION: I certify that the inf	ormation herein and on accompar				the best of my k	nowledge.
Candidate's Signature	Date	۲ ۲	Freasurer's Signatur	e		Date
THOMAS DENT	06/11/1	9 I	ucinda West			06/11/19

# CASH RECEIPTS AND EXPENDITURE



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

#### Report Date THOMAS E DENT (State Representative Tom Dent Campaign Surplus Account)05/01/19 05/31/19 1. 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 \$ Enter also on line 2 of C4 2. TOTAL CASH RECEIPTS <u>\$0.0</u>0

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)

If expenditures are made directly or indirectly to compensate a person or entity for soliciting signatures on a statewide initiative or referendum 3) 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

2

- 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. b)
- 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	
05/29/19	MOSES LAKE CHAMBER Division Street Moses Lake, WA 98837		DUES	\$100.00
05/06/19	MOSES LAKE CHAMBER Division Street Moses Lake, WA 98837		Mayor Prayer breakfast	\$150.00
05/04/19	LINCOLN COUNTY FAIR CleElum Fairgrounds CleElum, WA 98856		donation	\$100.00
05/14/19	FRANKLIN COUNTY NRA Benton County Fairgrounds Kennewick, WA 99937		donation	\$100.00
05/15/19	LINCOLN COUNTY FAIR CleElum Fairgrounds CleElum, WA 98856		Support Club	\$250.00
05/22/19	MOSES LAKE RODEO ASSOCIATION Grant County Fairgrounds Moses Lake, WA 98837		Ad	\$600.00
4		·	Total from attached pages	\$ \$148.51
4. TOTAL CASH EXPENDITURES Enter		Enter also on line 11 of C4	\$ \$1,448.51	

# EXPENDITURES CONTINUATION SHEET (Attachment to Schedule A)

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

Page 3

Report Date

THOMAS E DENT (State Representative Tom Dent Campaign Surplus Account)05/01/19 05/31/19

Date Paid	Vendor or Recipient (Name and Address)	Code	Purpose of Expense and/or Description	Amount
05/22/19	MOSES LAKE SPRING FESTIVAL W Third Ave Moses Lake, WA 98837		festival parade	\$60.00
05/28/19	WILBUR GAS STATION MAIN STREET WIILBUR, WA 98858		FUEL	\$85.53
05/31/19	WASHINGTON TRUST BANK 4TH AVENUE MOSES LAKE, WA 98837		SERVICE CHARGE	\$3.00

Page Total \$ \$148.51