

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4(3/97)

PDC OFFICE USE 100913968

07-02-2019

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

| KEVIN RANKER (RANKER | KEVIN M SURPLUS | ACCT) | | | |
|---|--|---------------------------|---------------------------|---|---|
| Mailing Address PO BOX 92 | | | | City DEER HARBOR, WA | |
| Zip + 4 98243 | Office Sought (Candidate STATE SENATOR | s) | Election Date 2020 | | Caucus Committees: During committee make an independent |
| Report Period From (last C-4 | | period) | Final Report? | expenditure (i.e., an expe supporting or opposing a s | nse not considered a contribution) |
| 06/01/19 | 9 06/30 | /19 | Yes No X | supporting or opposing a s | tate of local carialdate: |
| RECEIPTS | | | | *See next page | Yes No |
| Previous total cash and in kir (if beginning a new campaign | nd contributions (From line or calendar year, see inst | 8, last C-4) ruction bool | klet) | | ····_\$ \$112,144.02 |
| 2. Cash received (From line 2, § | | | | | 0 |
| 3. In kind contributions received | (From line 1, Schedule B) | | | \$0.0 | 0 |
| 4. Total cash and in kind contrib | outions received this period | (Line 2 plu | s 3) | | \$0.00 |
| 5. Loan principal repayments m | ade (From line 2, Schedule | ÷ L) | | \$0.0 | 0 |
| 6. Corrections (From line 1 or 3 | , Schedule C) | | Show + or | (-) \$0.0 | 0 |
| 7. Net adjustments this period (| Combine line 5 & 6) | | | Show + or (| \$0.00 |
| 8. Total cash and in kind contrib | outions during campaign (C | ombine line | es 1, 4 & 7) | | \$112,144.02 |
| 9. Total pledge payments due (l | From line 2, Schedule B) | | \$0.00 | | |
| EXPENDITURES | | | | | |
| Previous total cash and in kir (If beginning a new campaigr | nd expenditures (From line n or calendar year, see inst | 17, last C-4 ruction boo | l) klet) | | \$100,014.44 |
| 11. Total cash expenditures (Fro | m line 4, Schedule A) | \$0 | 00 | | |
| 12. In kind expenditures (goods 8 | & services) (From line 1, So | chedule B) . | | \$0. | 0.0 |
| 13. Total cash and in kind expend | \$0.00 | | | | |
| 14. Loan principal repayments m | \$0 | <u>00</u> | | | |
| 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 (C | ombine line | es 10, 13 and 16) | | \$100,014.44 |
| CANDIDATES ONLY Won Lost U | | SH SUMMA | | 47\ | \$12,129.58 |
| | | | | 17)ance(s) plus your petty cash balance.] | |
| Primary election | 19. | Liabilities: | (Sum of loans and de | bts owed) | \$0.00 |
| Treasurer's Daytime Telephone No.: | | | | 19 minus lino 10) | |
| (206)382-5552 | 20. | Dalalice (3) | arpius or delicit) (Lille | 18 minus line 19) | \$12,129.58 |
| CERTIFICATION: I certify that the int | formation herein and on accom | panying sch | edules and attachments | is true and correct to the best of | my knowledge. |
| Candidate's Signature | Date | | Treasurer's Signatu | re | Date |
| KEVIN RANKER | 07/02 | /19 | SUZANNE NAUG | HTON | 07/02/19 |

CASH RECEIPTS AND EXPENDITURE

SCHEDULE

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

Report Date

| | | ` | , | | | | |
|-----|-----------------------------|----------------|----------------------------|----------------------|---------------------------------|--------------------------|-------------------|
| KEV | IN RANKER (RANKER | KEVIN | M SURPLUS ACCT |) | | 06/01/19 | 06/30/19 |
| 1. | CASH RECEIPTS (Contribu | tions) whic | h have been reported on | C3. List each dep | osit made since last C4 r | eport was submitted. | |
| Da | te of deposit | Amount | Date of deposit | Amount | Date of deposit | Amount | Total deposits |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| 2. | TOTAL CASH RECEIPTS | | | | Enter als | so on line 2 of C4 | \$0.00 |
| | CODES FOR CLASSIFYING | EXPEND | TURES: If one of the follo | owing codes is use | ed to describe an expend | iture, no other descrip | tion is generally |
| | needed. The exceptions are: | | | J | • | , | , |
| 1) | If expenditures are in-kind | | | | ee or <u>independent expend</u> | ditures that benefit a d | candidate or |
| | | | or committee in the Desc | | | | |
| 2) | When reporting payments | to vendors | for travel expenses, iden | tify the traveler an | d travel purpose in the D | escription block; and | |
| 3) | If expenditures are made of | directly or in | ndirectly to compensate a | person or entity for | or 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,

CODE **DEFINITIONS** ON NEXT PAGE

- amount paid each during the reporting period, and cumulative total paid all persons to date to gather signatures. 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 | Ar | mount |
|-----------|--|------|---------------------------------------|----|--------|
| N/A | Expenses of \$50 or less | N/A | N/A | | |
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| | | | Total from attached pages | \$ | \$0.00 |

Enter also on line 11 of C4

\$0.00