PUBLIC	DISCLO	SURE COMMISSION
THE		711 CAPITOL WAY RM 206
T I		PO BOX 40908
		OLYMPIA WA 98504-0908
		(360) 753-1111
		TOLL FREE 1-877-601-2828

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

PDC OFFICE USE

C4

(3/97)

09-04-2019

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

DOUGLAS J ERICKSEN (C	ommittee to E	lect Doug	Ericksen Sur	plus Accou	nt)	
Mailing Address PO Box 748				City Ferndale,	WA	
Zip + 4 98248	Office Sought (Candi STATE SENATO	,	Election Date 2022			cus Committees: During nittee make an independent
Report Period From (last C-4	1) To (en	d of period)	Final Report?			not considered a contribution)
Covered 04/01/19	9 04/	/30/19	Yes No X	supporting or op	posing a state	or local candidate?
RECEIPTS				See next page		Yes No
 Previous total cash and in kin (if beginning a new campaign 	nd contributions (From a or calendar year, see	line 8, last C-4) instruction bool	klet)		······	\$\$227,550.34
2. Cash received (From line 2, S	Schedule A)			\$	\$0.00	
3. In kind contributions received	(From line 1, Schedul	е В)			\$0.00	
4. Total cash and in kind contrib	outions received this pe	eriod (Line 2 plu	s 3)			\$0.00
5. Loan principal repayments ma						
6. Corrections (From line 1 or 3,	, Schedule C)		Show + or	(-)	\$0.00	
7. Net adjustments this period (Combine line 5 & 6)			S	show + or (-)	\$0.00
8. Total cash and in kind contrib	outions during campaig	n (Combine line	es 1, 4 & 7)			\$227,550.34
9. Total pledge payments due (F	From line 2, Schedule	В)	\$0.00			
EXPENDITURES 10. Previous total cash and in kin (If beginning a new campaign	nd expenditures (From n or calendar year, see	line 17, last C-4 instruction boo	l) klet)			\$185,375.14
11. Total cash expenditures (From	m line 4, Schedule A).				<u>\$848.04</u>	
12. In kind expenditures (goods &	& services) (From line	1, Schedule B).			\$0.00	
13. Total cash and in kind expend	ditures made this peric	od (Line 11 plus	line 12)			\$848.04
14. Loan principal repayments ma	ade (From line 2, Sche	edule 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	i)		S	Show + or (-) _	\$0.00
17. Total cash and in kind expend	ditures during campaig	n (Combine line	es 10, 13 and 16)			\$186,223.18
	Name not Inopposed on ballot		NRY and (Line 8 minus line equal your bank account bala			
Primary election		19. Liabilities:	(Sum of loans and de	bts owed)		\$0.00
Treasurer's Daytime Telephone N	lo.:	20 Polence (C	uroluo or doficit) /l iss	10 minus line 10		
(360)393-2794		20. Balance (Si	urplus or deficit) (Line	To minus line 19)		\$41,327.16
CERTIFICATION: I certify that the inf Candidate's Signature	ormation herein and on a Date	ccompanying sch	edules and attachments Treasurer's Signatu		the best of my k	nowledge. Date
Canuluale 5 Signalure			0			
DOUGLAS ERICKSEN	09/	04/19	Ayers Consul	ting LLC		09/04/19

CASH RECEIPTS AND EXPENDITURE



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

Report Date DOUGLAS J ERICKSEN (Committee to Elect Doug Ericksen Surplus Account) 04/01/19 04/30/19 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 <u>\$0.0</u>0

2. TOTAL CASH RECEIPTS

> 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)

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

2

- 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		
04/03/19	SPRINT PO Box 54977 Los Angeles, CA 90054		Sprint		\$200.00
04/08/19	POPPE'S 360 714 Lakeway Bellingham, WA 98229		Meals -Meetings		\$60.17
04/18/19	BREW HOUSE 514 4th Ave E Olympia, WA 98501		food and beverages		\$26.86
04/18/19	BREW HOUSE 514 4th Ave E Olympia, WA 98501		Meals		\$50.00
04/22/19	GFB GOLFBALLS.COM 346 Route 59 Airmont, NY 01095		Entertainment		\$396.57
04/24/19	BUFFALO WINGS 1614 Black Lake Blvd SW Olympia, WA 98502		Meals Mtg		\$26.93
	•	•	Total from attached pages	\$	\$87.51
4. TOTAL CA	ASH EXPENDITURES		Enter also on line 11 of C4	\$	\$848.04

EXPENDITURES CONTINUATION SHEET (Attachment to Schedule A)

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

Page 3

Report Date

DOUGLAS J ERICKSEN (Committee to Elect Doug Ericksen Surplus Account) 04/01/19 04/30/19

Date Paid	Vendor or Recipient (Name and Address)	Code	Purpose of Expense and/or Description	Amount
04/24/19	BREW HOUSE 514 4th Ave E Olympia, WA 98501		Meals -mtg	\$35.60
04/29/19	TUGBOAT ANNIES 2100 west bay drive olympia, WA 98502		Meals	\$51.93

Page Total \$ \$87.51