

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4
(3/97)

PDC OFFICE USE
 100930666
 AMENDS
 100930571
 09-11-2019

Candidate or Committee Name (Do not abbreviate. Include full name)
ANNA M RIVERS (Ann Rivers Surplus Funds Account)

Mailing Address City
PO Box 957 **La Center, WA**

Zip + 4 98629	Office Sought (Candidates) STATE SENATOR	Election Date 2020	*For PACs, Parties & Caucus Committees: During this report period, did the committee make an independent expenditure (i.e., an expense not considered a contribution supporting or opposing a state or local candidate)?
Report Period Covered	From (last C-4) To (end of period)	Final Report? Yes No <input checked="" type="checkbox"/>	

RECEIPTS	*See next page	Yes	No
1. Previous total cash and in kind contributions (From line 8, last C-4) (if beginning a new campaign or calendar year, see instruction booklet)	\$		\$239,754.71
2. Cash received (From line 2, Schedule A)	\$		\$0.00
3. In kind contributions received (From line 1, Schedule B)			\$0.00
4. Total cash and in kind contributions received this period (Line 2 plus 3)			\$0.00
5. Loan principal repayments made (From line 2, Schedule L)			\$0.00
6. Corrections (From line 1 or 3, Schedule C)			\$0.00
7. Net adjustments this period (Combine line 5 & 6)			\$0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)			\$239,754.71
9. Total pledge payments due (From line 2, Schedule B)	\$0.00		

EXPENDITURES	Amount
10. Previous total cash and in kind expenditures (From line 17, last C-4) (If beginning a new campaign or calendar year, see instruction booklet)	\$228,535.74
11. Total cash expenditures (From line 4, Schedule A)	\$3,321.06
12. In kind expenditures (goods & services) (From line 1, Schedule B)	\$0.00
13. Total cash and in kind expenditures made this period (Line 11 plus line 12)	\$3,321.06
14. Loan principal repayments made (From line 2, Schedule L)	\$0.00
15. Corrections (From line 2 or 3, Schedule C)	\$0.00
16. Net adjustments this period (Combine lines 14 & 15)	\$0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)	\$231,856.80

CANDIDATES ONLY	Name not on ballot	CASH SUMMARY
Won	Lost	Unopposed
Primary election <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General election <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Treasurer's Daytime Telephone No.: (253) 988-2455		
		18. Cash on hand (Line 8 minus line 17)
		\$7,897.91
		19. Liabilities: (Sum of loans and debts owed)
		\$0.00
		20. Balance (Surplus or deficit) (Line 18 minus line 19)
		\$7,897.91

CERTIFICATION: I certify that the information herein and on accompanying schedules and attachments is true and correct to the best of my knowledge.

Candidate's Signature ANNA RIVERS	Date 09/11/19	Treasurer's Signature Tom Perry	Date 09/11/19
---	-------------------------	---	-------------------------

CASH RECEIPTS AND EXPENDITURE

SCHEDULE A
to C4
(11/93)

2

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

Report Date

ANNA M RIVERS (Ann Rivers Surplus Funds Account)

08/01/19 08/31/19

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

2. TOTAL CASH RECEIPTS Enter also 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:

- 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;
- 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	
08/02/19	DELUXE TAXI 6055 Emerald Ave Las Vegas, NV 89122		Taxi	\$23.87
08/01/19	ALASKA AIRLINES PO Box 68900 Seattle, WA 98168		Airline ticket change fee	\$49.00
08/22/19	UB CAB 332 Pinewood Ct Lexington, KY 40509		Taxi	\$33.00
08/13/19	STARBUCKS 1531 NW Louisiana Ave Chehalis, WA 98532		Coffee	\$3.52
08/21/19	STARBUCKS 7000 NE Airport Way Portland, WA 97218		Coffee	\$4.65
08/24/19	BUFFALO TRACE DISTILLERY 113 Great Buffalo Trace Frankfort, KY 40601		Meals	\$113.39

Total from attached pages \$ **3,093.63**

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ **3,321.06**

EXPENDITURES CONTINUATION SHEET (Attachment to Schedule A)

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

Report Date

ANNA M RIVERS (Ann Rivers Surplus Funds Account)

08/01/19

08/31/19

Date Paid	Vendor or Recipient (Name and Address)	Code	Purpose of Expense and/or Description	Amount
08/23/19	ALASKA AIRLINES PO Box 68900 Seattle, WA 98168		Airfare	\$1,975.20
08/23/19	ALASKA AIRLINES PO Box 68900 Seattle, WA 98168		Airline ticket change fee	\$59.00
08/28/19	AMERICAN AIRLINES 4333 Amon Carter Blvd Fort Worth, TX 76155		Baggage fee	\$30.00
08/23/19	AMERICAN AIRLINES 4333 Amon Carter Blvd Fort Worth, TX 76155		Airfare	\$869.40
08/21/19	TONY'S OF LEXINGTON 401 W Main St Lexington, KY 40507		Meals	\$67.12
08/27/19	O'HARE BAR & GRILL 5600 Mannheim Rd Chicago, IL 60666		Meals	\$29.01
08/23/19	TARGET 131 W Reynolds Rd Lexington, KY 40503		Toiletries, water	\$15.25
08/27/19	LEX NEWS & GIFTS 4000 Terminal Dr Ste 206 Lexington, WA 40510		Phone charger cable, food & drinks	\$48.65