

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4(3/97)

PDC OFFICE USE 100936497

10-10-2019

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

| ANA SENN (TANA SENN | SURPLUS FUNDS | 5) | | | | | | |
|---|---|---------------------------------------|---------------|---------------|------------------------------|-------------------|-------------------------------|---|
| Mailing Address O BOX 771 | | | | | City MERCER ISI | AND, WA | | |
| Zip + 4 8040 | Office Sought (Cand | | Election 2019 | on Date | | | cus Committees: During | |
| Report Period From (last C-4 | To (er | d of period) | Final F | Report? | expenditure (i.e. | , an expense r | not considered a contribution | _ |
| Covered 06/01/19 | 09 | /30/19 | Yes | No X | supporting or opp | oosing 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 or calendar year, see | line 8, last C-4 e instruction boo | l) oklet) | | | <u> </u> | \$ \$146,000.0 | 0 |
| 2. Cash received (From line 2, S | Schedule A) | | | | \$ | \$0.00 | | |
| 3. In kind contributions received | (From line 1, Schedu | le B) | | | | \$0.00 | | |
| 4. Total cash and in kind contrib | utions received this p | eriod (Line 2 pl | us 3) | | | <u> </u> | \$0.0 | 0 |
| 5. Loan principal repayments ma | ade (From line 2, Sch | edule 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) | | | | Sh | now + or (-) | \$0.0 | 0 |
| 8. Total cash and in kind contrib | utions during campai | gn (Combine lin | nes 1, 4 & 7) |) | | <u> </u> | \$146,000.0 | 0 |
| 9. Total pledge payments due (F | rom line 2, Schedule | B) | | \$0.00 | | | | |
| EXPENDITURES | | | | | | | | |
| Previous total cash and in kin (If beginning a new campaign | d expenditures (From or calendar year, see | line 17, last C- instruction boo | -4) oklet) | | | | \$116,398.3 | 2 |
| 11. Total cash expenditures (From | m line 4, Schedule A) | | | | | \$532.50 | | |
| 12. In kind expenditures (goods & | & services) (From line | 1, Schedule B) |) | | | \$0.00 | | |
| 13. Total cash and in kind expend | ditures made this peri | od (Line 11 plus | s line 12) | | | ·····- | \$532.5 | 0 |
| 14. Loan principal repayments ma | ade (From line 2, Sch | 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 & 1 | 5) | | | Sh | now + or (-) | \$0.0 | 0 |
| 17. Total cash and in kind expend | ditures during campai | gn (Combine lir | nes 10, 13 a | nd 16) | | | \$116,930.8 | 2 |
| CANDIDATES ONLY | Name not | CASH SUMM | ARY | | | | | |
| | Jnopposed on ballot | | | | 17)nce(s) plus your petty ca | | \$29,069.1 | 8 |
| Primary election | | | | | | \$0.0 | 0 | |
| Treasurer's Daytime Telephone No.: | | | | | | | • | |
| 20. Balance (Surplus or deficit) (Line 18 m | | | | | 18 minus line 19) . | — | \$29,069.1 | 8 |
| CERTIFICATION: I certify that the inf | ormation herein and on a | accompanying sc | hedules and | attachments i | s true and correct to | the best of my kr | nowledge. | |
| Candidate's Signature | Date | | | r's Signatur | | | Date | |
| TANA SENN | 10, | /10/19 | Meliss | a Pfeii | Eer | | 10/10/19 | |

CASH RECEIPTS AND EXPENDITURE

SCHEDULE

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

Report Date

| TANA SENN (TANA SENN SURPLU | S FUNDS) | | | 06/01/19 | 09/30/19 | | |
|---|-----------------|--------|-----------------|-------------------|----------------|--|--|
| 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 | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| 2. TOTAL CASH RECEIPTS | | | Enter als | o 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;
- 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.

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..
- 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 | |
| 08/31/19 | MELISSA PFEIFER LLC 33253 34th Ave SW Federal Way, WA 98023 | | Jan-May Accounting/Compliance | \$82.50 |
| 09/15/19 | STROUM JEWISH COMMUNITY CENTER 3801 E Mercer Way Mercer Island, WA 98040 | | Donation | \$250.00 |
| 09/15/19 | NAMI EASTSIDE 16225 NE 87th St Redmond, WA 98052 | | Donation | \$100.00 |
| 09/15/19 | SPACE NEEDLE FOUNDATION 223 Taylor Ave N Seattle, WA 98109 | | Donation | \$100.00 |
| | | | | |
| | | | | |
| | | ı | Total from attached pages | \$ \$0.00 |

Enter also on line 11 of C4

\$532.50