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

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

PDC OFFICE USE 100961056

03-10-2020

C4

(3/97)

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

| (Hans Zeiger | Surplus F | unds) | | | | | |
|---|-------------------------------------|---|--|--------------|---|---|--------------------------------|
| Mailing Address PO Box 73303 | | | | | | City Puyallup, WA | |
| Zip + 4Office Sought (Cand98373COUNTY COUNC | | | | | *For PACs, Parties & Cau this report period, did the com | | |
| Report Period | From (last C-4 |) To (ei | nd of period) | Final F | Report? | expenditure (i.e., an expense | not considered a contribution) |
| Covered | 01/01/20 | 02 | /29/20 | Yes | No X | supporting or opposing a state | e or local candidate? |
| RECEIPTS | | | | l | | *See next page | Yes No |
| 1. Previous tota (if beginning) | l cash and in kin a new campaign | d contributions (From or calendar year, se | i line 8, last C-4) e instruction boo | klet) | | | \$\$5,630.78 |
| 2. Cash receive | d (From line 2, S | Schedule A) | | | | \$ \$0.00 | |
| 3. In kind contril | butions received | (From line 1, Schedu | ıle B) | | | \$0.00 | |
| 4. Total cash ar | nd in kind contrib | utions received this p | eriod (Line 2 plu | s 3) | | | \$0.00 |
| 5. Loan principa | al 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 adjustme | ents this period (| Combine line 5 & 6) | | | | Show + or (-) | \$0.00 |
| 8. Total cash ar | nd in kind contrib | utions during campai | gn (Combine line | es 1, 4 & 7) |) | | \$5,630.78 |
| 9. Total pledge | payments due (F | From line 2, Schedule | B) | | \$0.00 | | |
| EXPENDITURES | | | | | | | |
| 10. Previous tota (If beginning | I cash and in kin a new campaign | d expenditures (From or calendar year, se | n line 17, last C-4 e instruction boo | l) klet) | | | \$0.00 |
| 11. Total cash ex | penditures (Fror | m line 4, Schedule A) | | | | \$214.58 | |
| 12. In kind exper | nditures (goods & | & services) (From line | 1, Schedule B). | | | \$0.00 | |
| 13. Total cash ar | nd in kind expend | ditures made this peri | od (Line 11 plus | line 12) | | | \$214.58 |
| 14. Loan principa | al 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 adjustme | ents this period (| Combine lines 14 & 1 | 5) | | | Show + or (-) | \$0.00 |
| 17. Total cash ar | nd in kind expend | ditures during campai | gn (Combine line | es 10, 13 a | and 16) | | \$214.58 |
| | | Name not Inopposed on ballot | CASH SUMMA | | minus line | 17) | _ |
| r | | | | | | ance(s) plus your petty cash balance.] | \$5,410.20 |
| Primary election | | | 19. Liabilities: | (Sum of loa | ans and de | bts owed) | * 0.00 |
| Treasurer's Daytin | ne Telephone N | <u> </u> | | | | , _ | \$0.00 |
| (253)905-81 | .60 | | 20. Balance (S | urplus or d | eficit) (Line | 18 minus line 19) | \$5,416.20 |
| | | | accompanying sch | | | is true and correct to the best of my l | |
| Candidate's Signatu | ure | Date | | Treasure | er's Signatu | re | Date |
| HANS ZEIGER | | 03 | /10/20 | Hans Z | Zeiger | | 03/10/20 |

CASH RECEIPTS AND EXPENDITURE



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

| Candidate of Committee Marine | | bieviale. Ose full fiame.) | | | • | topon Date | |
|---|----------|----------------------------|--------|-----------------|---------------------|----------------|--|
| (Hans Zeiger Surplu | s Funds) |) | | | 01/01/20 | 02/29/20 | |
| 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 a | lso 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:

- If expenditures are in-kind or earmarked contributions to a candidate or committee or independent expenditures that benefit a candidate or 1) 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)

CODF 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

2

Report Date

- 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 | | \$19.58 |
| 01/09/20 | ROANOKE CONFERENCE 6947 COAL CREEK PARKWAY SE, # NEWCASTLE, WA 98056 | | Conference registration | | \$195.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | Total from attached pages | \$ | \$0.00 |

4. TOTAL CASH EXPENDITURES