

## SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

**C4**(3/97)

PDC OFFICE USE 100901717

05-07-2019

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

	ct Jesse Salom	on)							
Mailing Address PO Box 75112			City Seattle, WA						
Zip + 4         Office Sought (Cand           98175         STATE SENATO		_						us Committees: During tee make an independent	
Report Period From (last C-	-4) To (en	d of period)	Final	Repor	t?	expenditure (i.e., an expense not co		not conside	red a contribution)
Covered 04/01/1	.9 04.	/30/19	Yes	No	x	supporting or oppos	sing a state	or local can	<u>didate</u> ?
RECEIPTS			•			*See next page		Yes	No
Previous total cash and in ki     (if beginning a new campaig	nd contributions (From n or calendar year, see	line 8, last C-4) instruction book	klet)					\$	\$22,676.98
2. Cash received (From line 2,	Schedule A)					··· _ \$	\$0.00		
3. In kind contributions received	d (From line 1, Schedu	le B)					\$0.00		
4. Total cash and in kind contri	butions received this po	eriod (Line 2 plu	s 3)				<u> </u>		\$0.00
5. Loan principal repayments n	nade (From line 2, Scho	edule L)					\$0.00		
6. Corrections (From line 1 or 3	3, Schedule C)			. Show	/ + or (	-)	\$0.00		
7. Net adjustments this period	(Combine line 5 & 6)					Shov	v + or (-) _		\$0.00
8. Total cash and in kind contri	butions during campaig	gn (Combine line	es 1, 4 & 7	')			<u> </u>		\$22,676.98
9. Total pledge payments due	(From line 2, Schedule	В)		\$0.	.00				
EXPENDITURES									
<ol><li>Previous total cash and in ki (If beginning a new campaig</li></ol>	nd expenditures (From n or calendar year, see	line 17, last C-4 instruction bool	.) klet)				<u> </u>		\$6,447.77
11. Total cash expenditures (Fro	om line 4, Schedule A).						\$74.55		
12. In kind expenditures (goods	& services) (From line	1, Schedule B) .					\$0.00		
13. Total cash and in kind exper	nditures made this perio	od (Line 11 plus	line 12)				<u> </u>		\$74.55
14. Loan principal repayments n	nade (From line 2, Scho	edule L)					\$0.00		
15. Corrections (From line 2 or 3	3, Schedule C)			. Show	/ + or (	-)	\$0.00		
16. Net adjustments this period	(Combine lines 14 & 15	5)				Shov	v + or (-)		\$0.00
17. Total cash and in kind exper	nditures during campaig	gn (Combine line	es 10, 13 a	and 16	s)				\$6,522.32
CANDIDATES ONLY Won Lost	Name not Unopposed on ballot	CASH SUMMA			a lina i	17\			\$16,154.66
	Unopposed on ballot					17) nce(s) plus your petty cash			\$10,134.00
Primary election		19. Liabilities: (	(Sum of Ic	ans aı	nd deb	ots owed)	<u> </u>		\$15,000.00
Treasurer's Daytime Telephone No.:  20. Balance (Surplus or deficit) (Line 18 minus line 19)									
(206)678-7328		ZU. Dalance (St	arpius of (	iencii)	(LITIE	TO HIII IUS IIIIE 19)	<u> </u>		\$1,154.66
CERTIFICATION: I certify that the in	nformation herein and on a	accompanying sch	edules and	attachr	ments i	s true and correct to the	best of my k	nowledge.	
Candidate's Signature	Date		Treasure	er's Sig	gnatur	e	-		Date
JESSE SALOMON	05/	07/19	Jav Po	ette	rsor	ı		0.5	5/07/19

## **CASH RECEIPTS AND EXPENDITURE**

SCHEDULE to C4

1	
93)	

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

eport Date

California of Committee Name (Do not appreviate. Ose full name.)							
JESSE M SALOMON	(Elect Jesa	se Salomon)			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	
2. TOTAL CASH REC	EIPTS			Enter als	so on line 2 of C4	\$0.00	
CODES FOR CLAS		TURES: If one of the follo	owing codes is use	ed to describe an expend	iture, no other descrip	otion is generally	

- If expenditures are <u>in-kind or earmarked contributions</u> to a candidate or committee or <u>independent expenditures</u> 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

Enter also on line 11 of C4

\$74.55

G - General Operation and Overhead

## 3. EXPENDITURES

4. TOTAL CASH 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	A	Amount
N/A Expenses of \$50 or less N/A		N/A		<b>\$74.</b> 55	
			Total from attached pag	es \$	\$0.00

## IN KIND CONTRIBUTIONS, PLEDGES, ORDERS, DEBTS, OBLIGATIONS

SCHEDULE TO C4 B

3

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

JESSE M SALOMON (Elect Jesse Salomon)

Report Date

3. ORDERS PLACED, DEBTS, OBLIGATIONS. (Give estimate if actual amount not known. Exclude loans. Report loans on Schedule L.)

Expenditure Date	Vendor's/Recipient's Name and /	Address	Amount Owed	Code	OR	Description of Obligation
12/31/2018	F&A CONSULTING GROUP PO Box 40621 Bellevue WA, 98015		15000.00		Cor	sulting Bonus
		TOTAL THIS PAGE	15000.00		1	