

## SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

**C4**(3/97)

PDC OFFICE USE 110053037

10-11-2021

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

| (Bill Ramos Surplus Funds)  |  |                                    |                |                   |                   |               |              |                                   |  |
|---|--|------------------------------------|----------------|-------------------|-------------------|---------------|--------------|-----------------------------------|--|
| Mailing Address 1420 NW Gilman Blvd #2  | City<br>Issaquah,  | WA                                 |                |                   |                   |               |              |                                   |  |
| Zip + 4<br>98027  | Office Sought (Candida                                   | ,                                  |                |                   | *For PACs, Pa     |               |              | mittees: During<br>an independent |  |
| Report Period From (last C-   | 4) To (end   | of period)                         | Final          | Report?           | expenditure (i.e. | , an expense  | not conside  | ered a contribution)              |  |
| Covered 09/01/2   | 1 09/3   | 30/21                              | Yes            | No X              | supporting or opp | osing a state | or local car | local candidate?                  |  |
| RECEIPTS  |  |                                    | I              |                   | *See next page    |               | Yes          | No                                |  |
| Previous total cash and in ki     (if beginning a new campaig   | nd contributions (From lin<br>n or calendar year, see ir | ne 8, last C-4)<br>estruction bool | klet)          |                   |                   |               | \$           | \$10,144.71                       |  |
| 2. Cash received (From line 2,  | Schedule A)  |                                    |                |                   | \$                | \$0.00        |              |                                   |  |
| 3. In kind contributions received   | d (From line 1, Schedule                                 | B)                                 |                |                   |                   | \$0.00        |              |                                   |  |
| 4. Total cash and in kind contri  | butions received this per                                | od (Line 2 plu                     | s 3)           |                   |                   |               |              | \$0.00                            |  |
| 5. Loan principal repayments m  |  |                                    |                | \$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)   |  |                                    |                |                   | Sh                | ow + or (-) _ |              | \$0.00                            |  |
| 8. Total cash and in kind contri  | butions during campaign                                  | (Combine line                      | es 1, 4 & 7    | ")                |                   |               |              | \$10,144.71                       |  |
| 9. Total pledge payments due (  | From line 2, Schedule B                                  | )                                  |                | \$0.00            |                   |               |              |                                   |  |
| EXPENDITURES  |  |                                    |                |                   |                   |               |              |                                   |  |
| <ol><li>Previous total cash and in king (If beginning a new campaig)</li></ol>  | nd expenditures (From li<br>n or calendar year, see ii   | ne 17, last C-4<br>nstruction boo  | l)<br>klet)    |                   |                   |               |              | \$0.00                            |  |
| 11. Total cash expenditures (Fro  | om line 4, Schedule A)                                   |                                    |                |                   |                   | \$0.00        |              |                                   |  |
| 12. In kind expenditures (goods   | & services) (From line 1,                                | Schedule B) .                      |                |                   |                   | \$0.00        |              |                                   |  |
| 13. Total cash and in kind exper  | nditures made this period                                | (Line 11 plus                      | line 12)       |                   |                   |               |              | \$0.00                            |  |
| 14. Loan principal repayments made (From line 2, Schedule L)  |  |                                    |                |                   |                   |               |              |                                   |  |
| 15. Corrections (From line 2 or 3   |  |                                    | . Show + or    | (-)               | \$0.00            |               |              |                                   |  |
| 16. Net adjustments this period (Combine lines 14 & 15)   |  |                                    |                |                   | Sh                | ow + or (-) _ |              | \$0.00                            |  |
| 17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)   |  |                                    |                |                   |                   |               |              | \$0.00                            |  |
| CANDIDATES ONLY  Name not  CASH SUMMARY   |  |                                    |                |                   | 47\               |               |              | \$10,144.71                       |  |
| Won Lost Unopposed on ballot 18. Cash on hand (Line 8 minus line 17 [Line 18 should equal your bank account balance                                 |  |                                    |                |                   |                   |               |              | \$10,144.71                       |  |
| Primary election  |  |                                    |                |                   | bts owed)         |               |              | \$0.00                            |  |
| Treasurer's Daytime Telephone I   |  |                                    |                |                   |                   |               | ·            |                                   |  |
| (206)682-7328   | 0. Balance (S  | urplus or o                        | deficit) (Line | 18 minus line 19) | <br>              |               | \$10,144.71  |                                   |  |
| 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   | Candidate's Signature Date Treasurer's Signature         |                                    |                |                   |                   |               |              | Date                              |  |
| BILL RAMOS  | 10/11/21 Josie Ols                                       |                                    |                | Olsen             |                   |               | 10           | 0/11/21                           |  |

## **CASH RECEIPTS AND EXPENDITURE**

SCHEDULE to C4

(93)

2

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

Report Date

| Candi           | date or Con | nmittee ivame                            | (Do not ab         | previate. Use fuil name.)   |                     |                          | r                    | tepo | on Date        |
|-----------------|-------------|--|--------------------|---|---------------------|--------------------------|----------------------|------|----------------|
| (Bil            | L Ramos     | Surplus                                  | Funds)             |   |                     |                          | 09/01/21             |      | 09/30/21       |
| 1. C            | ASH RECE    | IPTS (Contrib                            | outions) whic      | h have been reported on   | C3. List each dep   | oosit made since last C4 | report was submitted | d.   |                |
| Date of deposit |             | Amount                                   | Date of deposit    | Amount  | Date of deposit     | Amount                   | Total deposits       |      |                |
|                 |             |  |                    |   |                     |                          |                      |      |                |
|                 |             |  |                    |   |                     |                          |                      |      |                |
|                 |             |  |                    |   |                     |                          |                      |      |                |
|                 |             |  |                    |   |                     |                          |                      | Ф    |                |
| 2. 10           | JIAL CASE   | RECEIPTS                                 |                    |   |                     | Enter a                  | lso on line 2 of C4  | Φ_   | <u>\$0.0</u> 0 |
|                 | eded. The   | exceptions are<br>ures are <u>in-kin</u> | e:<br>d or earmarl | ITURES: If one of the followed contributions to a car or committee in the Description | ndidate or committe | ·                        | •                    | •    | ,              |

- 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

\$0.00

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     | mount  |
|-----------|--|------|---------------------------------------|-------|--------|
| N/A       | Expenses of \$50 or less               | N/A  | N/A                                   |       |        |
|           |  |      |                                       |       |        |
|           |  |      |                                       |       |        |
|           |  |      |                                       |       |        |
|           |  |      |                                       |       |        |
|           |  |      |                                       |       |        |
|           |  |      |                                       |       |        |
|           |  |      |                                       |       |        |
|           |  |      |                                       |       |        |
|           |  |      |                                       |       |        |
|           |  |      |                                       |       |        |
|           |  |      | Total from attached pag               | es \$ | \$0.00 |