

Complaint Description

Glen Morgan (Wed, 12 Feb 2020 at 11:04 PM)

To whom it may concern,

It has come to my attention (and I don't know how I missed this in the past) that Washington State Insurance Commissioner Mike Kriedler has violated Washington State's campaign finance laws (RCW 42.17A). The details are as follows:

1) Misuse of over \$17,000 in campaign surplus funds for personal benefit and use, mostly to fund personal meals and other expenses not appropriate for surplus funds (Violation of RCW 42.17A.430)

It appears that Kreidler, in a fairly shocking and brazen abuse of his campaign surplus funds account has squandered much if not most of the \$51,215.29 of surplus funds inappropriately and in violation of the Washington State Campaign Finance laws, specifically **RCW 42.17A.430**, which addresses the law in regards to disposal of surplus funds.

However, for the purpose of this complaint, I will only focus on Kreidler's lawbreaking within the recent five year statute of limitations time frame, which covers the last \$21,727.33 worth of surplus funds expended and squandered.

To Kreidler's credit, he did conduct two legal transactions during this time period. It is actually easier to point these out first because the vast majority of funds were spent illegally. One rare legal use of surplus funds, for example was the \$4,000 check to the Washington State Democrats dated 9/5/2016 (See **PDC Report #100724853** attached). Another legal transaction was the \$150 donation to the "Center for Children & Youth" dated 2/18/16 (See **PDC Report #100683897** attached). However, these legal transactions were rare. Most of the rest were not appropriate uses of surplus funds as allowed under **RCW 42.17A.430**. Here are some interesting specifics:

- \$500 sent to "Denny Heck for Congress" on 8/28/17 (see **PDC Report #100784712**). It is explicitly illegal to use campaign surplus funds for this purpose as clearly explained in **RCW 42.17A.430(8)**. See also **WAC 390-16-234 (3)**.
- \$2,839.64 spent apparently on a binge of drinking events and activities reported on 8/2018 (See **PDC Report # 100858023** attached) which were described as "Non-reimbursed public office expense" but clearly just various bar tabs from "River's Edge," "Well 80," and the "Water Street Café." While these sound like fun times, they are not appropriate or legal uses of surplus campaign funds under **RCW 42.17A.430**. The description is particularly amusing because calling these "public office expense" is at least a nod to **RCW 42.17A.430(7)** which allows for some "public office expenses" which can be reimbursed by surplus funds, but it is doubtful bar tabs were

envisioned by the legislators when this law was drafted (or by the citizens who voted for the original initiative in 1972).

- \$917.05 spent in three transactions to different people on 1/06/2020 for "Event Supplies: Reimbursement, Sub Vendors TBD" (See **PDC Report #100956995** attached). Whatever these mystery expenditures are, they are not legally allowed under **RCW 42.17A.430**

- \$325.00 reported on 3/21/19 to a "Darryl Coleman" for a "Team Sponsorship Reimbursement: State Agency Softball League." (See **PDC Report #100896960** attached) These surplus funds were given to Mr. Coleman, which is not a legal or appropriate use of surplus campaign funds.

- \$143.00 reported on 5/17/19 for "Meals: Hank's Capitol Hill, Washington DC" (See **PDC Report #100907757** attached). While **Kreidler clearly likes to eat out at fancy restaurants in Washington DC**, this is still not appropriate or legal for him to use surplus campaign funds to do so.

- \$600.67 reported on 1/8/19 for various food related items, mostly as payments to a "ANNALISA GELLERMANN" with various descriptions of "Event Food." (See **PDC Report #100883584** attached). Again, nebulous, undefined food related events which are not appropriate or legal uses of campaign surplus funds.

- \$625 for "Agency Team Sponsorship" on 3/12/18 (See **PDC Report #100824981** attached). Not a legal use of campaign surplus funds.

- Two different payments, one for \$75, and one for \$40 to "Nelson – Taplin – Goldwater" (see **PDC Report #100807126** attached). Please note, this is one of Kreidler's largest donors (See **PDC Report #100953942** (C-3 with \$1k contribution) and **PDC Report #100934850** (C3 with \$1k donation and another \$750 contribution from employee at same corporation) and **PDC Report #100880380** (C3 with a \$500 contribution from employee at same corporation), and **PDC Report #100799942** (C3 with a \$300 contribution from employee at same corporation), and **PDC Report #100800665** (C3 with \$750 contribution from partner of same corporation), and **PDC Report #100798415** (C3 with \$1,750 contributions from attorneys, partners, employees of same corporation), and note in 2016, this corporation, officers or employees gave Kreidler \$11,250 for his election campaign). This is not an appropriate use of surplus funds to reimburse your largest campaign contributors for meals.

- \$1,277.99 on 12/26/17 for three transactions to pay for a holiday party blow out for staff apparently (See **PDC Report #100807126** attached). Also not a legal use of surplus funds.

- \$61.18 on 10/30/17 payable to "Jennifer Kraft" for "Gifts for WZ2017." (See **PDC Report #100800013** attached) This sounds very cryptic and sorta cool, but it doesn't really matter. Whatever this mystery gift was, this is not a legal use of surplus campaign funds.

- Since just one cool secret, cryptic "Gift for WZ2017" wasn't enough, Kreidler used \$1,314.26 for multiple "Gifts for WZ2017" also payable to "Jennifer Kraft" on 9/2017 (see **PDC Report #100800011** attached).

- \$149.61 payable to Mike Kreidler for "softball team appreciation" on 8/28/17 (See **PDC Report #100784712** attached). Also not a legal use of surplus funds, whatever this was.

- \$655.00 for "registration fee for agency softball tam(sic)" on 4/02/17 (See **PDC Report #100760120** attached). Which I suppose explains the previous appreciation expense, but is still not a legal use of surplus funds.

Most frequently, it appears that Kreidler viewed his surplus campaign funds as a slush fund to support his dining habits, which make up the bulk of the transactions reported to the PDC on these Surplus Fund C4s. It appears that Typical examples were as follows (and these are just random samples):

- \$50.11 payable to Mike Kreidler on 7/2/18 for "Meal: Din Tai Fung" (see **PDC Report #100851877** attached)
- \$148.70 payable to Mike Kreidler on 5/30/18 for "Meals: Sonoma DC (Washington DC)" (See **PDC Report #100836260** attached)
- \$70.93 payable to Mike Kreidler on 2/5/18 for "Meals: Commissioner Meeting (Orlando, FL)" (See **PDC Report #100820643** attached)
- \$223.92 payable to Mike Kreidler on 1/15/18 for "Staff lunch meeting Seattle) (See **PDC Report #100811480** attached). Even IF he included some staff with him on his dining adventures, that doesn't make it a legal use of campaign surplus funds.
- \$73.51 payable to Mike Kreidler on 11/10/17 for "reimburse for meal in KL" (see **PDC Report #100803435** attached). Whatever this was.
- Two "reimburse for office related meals" to Mike Kreidler for \$42.93 and \$19.95 on 11/21/16 (See **PDC Report #100736360** attached). It isn't clear how these were "office related" or even where they were (Shari's for breakfast, and River's Edge for Lunch?). Regardless, the surplus funds account is not legally intended to cover Kreidler's meals for life.

Presumably, many of the C4s which were filed with "Expenses less than \$50" reported also were unitemized expenditures for Kreidler's less expensive dining habits (See **PDC Report #100843254** as just one example).

Clearly, Kreidler has been abusing his campaign surplus account and nobody noticed (including me) until now, but better later than never to clean up the mess. I'm sure like everything else, this just started with the little things, and now it has become a lifestyle choice with the presumption there are no consequences for breaking the law.

That might be a safe assumption on Kreidler's part in light of the recent trend at the PDC to ignore violations like this, if the violator is high profile enough, but it is still worth exposing law-breakers even if the law won't be enforced.

Regardless, I encourage staff to contact Kreidler's campaign and see what his attorneys cook up as excuses for this illegal spending spree. I enjoy reading their responses, and as long as there are politicians like Kreidler in office, the PDC at least has job security.

Feel free to contact me if I have not provided adequate examples in this complaint. I've attached most (not all) of the obvious surplus funds reports with violations. There are more to be found, but this seemed like a good start.

Best Regards,

Glen Morgan

What impact does the alleged violation(s) have on the public?

The public has a right to know if the state insurance commissioner is using his surplus funds account as a slush fund to pay for his dining habits around the nation, pay for parties, give illegal contributions to other politicians, or just squander these funds on mystery gifts.

List of attached evidence or contact information where evidence may be found.

All C4s referenced in the complaint are attached as well as a few others. The C3s I referenced when referring to the one mega corporate donor were referenced by number in the complaint, but not attached.

List of potential witnesses with contact information to reach them.

Kreider himself, the staff who seem to get these funds distributed back to them as part of the illegal distribution of the surplus funds, the treasurer (just what the heck was he thinking?), and anyone else who wants to admit they were involved.

Complaint Certification:

I certify (or declare) under penalty of perjury under the laws of the State of Washington that information provided with this complaint is true and correct to the best of my knowledge and belief.

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4
(3/97)

PDC OFFICE USE
100673140

01-03-2016

Candidate or Committee Name (Do not abbreviate. Include full name)
 MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)
 Mailing Address
 PO Box 15017

City
Tumwater, WA

Zip + 4 98511-5017	Office Sought (Candidates) INSURANCE COMMISSIONER	Election Date 2016
Report Period Covered	From (last C-4) 12/01/15	To (end of period) 12/31/15
		Final Report? Yes No X

***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)?

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)	\$	44,796.86
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)	Show + or (-)	0.00
7. Net adjustments this period (Combine line 5 & 6)	Show + or (-)	0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)		44,796.86
9. Total pledge payments due (From line 2, Schedule B)		0.00

EXPENDITURES

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)		30,163.99
11. Total cash expenditures (From line 4, Schedule A)		657.07
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)		657.07
14. Loan principal repayments made (From line 2, Schedule L)		0.00
15. Corrections (From line 2 or 3, Schedule C)	Show + or (-)	0.00
16. Net adjustments this period (Combine lines 14 & 15)	Show + or (-)	0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)		30,821.06

CANDIDATES ONLY

	Won	Lost	Unopposed	Name not on ballot
Primary election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Treasurer's Daytime Telephone No.:

(360) 867-1084

CASH SUMMARY

18. Cash on hand (Line 8 minus line 17)	13,975.80
[Line 18 should equal your bank account balance(s) plus your petty cash balance.]	
19. Liabilities: (Sum of loans and debts owed)	0.00
20. Balance (Surplus or deficit) (Line 18 minus line 19)	13,975.80

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 MYRON "MIKE" KREIDLER	Date 01/11/16	Treasurer's Signature Jim Odiorne	Date
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CASH RECEIPTS AND EXPENDITURE

SCHEDULE A
to C4
(11/93)

2

Candidate or Committee Name (Do not abbreviate. Use full name.) MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds) Report Date 12/01/15 12/31/15

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	
12/03/15	KATHY MARSHALL PO Box 40256 Olympia, WA 98504		Food for employee recognition event	126.42
12/14/15	JASON SIEMS 4821 Forest Glen Ct SE Olympia, WA 98513		Food and supplies	90.31
12/14/15	SUE HEDRICK 400 17th Ave SE Olympia, WA 98501		food and supplies	146.93
12/14/15	JENNIFER KRAFT PO Box 40255 Olympia, WA 98504		food and supplies	137.21
12/24/15	MYRON "MIKE" B KREIDLER PO Box 15017 Tumwater, WA 98511		Staff appreciatin lunch	156.10
12/14/15	JENNIFER KRAFT PO Box 40255 Olympia, WA 98504		staff appreciation - holiday celebration	0.10

Total from attached pages \$ 0.00

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ 657.07

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4 (3/97)	PDC OFFICE USE
	100683897
	03-06-2016

Candidate or Committee Name (Do not abbreviate. Include full name) MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)			
Mailing Address PO Box 15017		City Tumwater, WA	
Zip + 4 98511-5017	Office Sought (Candidates) INSURANCE COMMISSIONER	Election Date 2016	*For PACs, Parties & Caucus Committees: During this report period, did the committee make an <u>independent expenditure</u> (i.e., an expense not considered a contribution supporting or opposing a state or local candidate)?
Report Period Covered From (last C-4) 02/01/16	To (end of period) 02/29/16	Final Report? Yes No X	

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)	\$	44,796.86
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) Show + or (-)		0.00
7. Net adjustments this period (Combine line 5 & 6) Show + or (-)		0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)		44,796.86
9. Total pledge payments due (From line 2, Schedule B)		0.00

EXPENDITURES

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)		30,821.06
11. Total cash expenditures (From line 4, Schedule A)		235.00
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)		235.00
14. Loan principal repayments made (From line 2, Schedule L)		0.00
15. Corrections (From line 2 or 3, Schedule C) Show + or (-)		0.00
16. Net adjustments this period (Combine lines 14 & 15) Show + or (-)		0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)		31,056.06

CANDIDATES ONLY			
Won	Lost	Unopposed	Name not on ballot
Primary election <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General election <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Treasurer's Daytime Telephone No.:
(360) 867-1084

CASH SUMMARY

18. Cash on hand (Line 8 minus line 17) [Line 18 should equal your bank account balance(s) plus your petty cash balance.]	13,740.80
19. Liabilities: (Sum of loans and debts owed)	0.00
20. Balance (Surplus or deficit) (Line 18 minus line 19)	13,740.80

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 MYRON "MIKE" KREIDLER	Date 03/10/16	Treasurer's Signature Jim Odiorne	Date
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CASH RECEIPTS AND EXPENDITURE

SCHEDULE A
to C4
(11/93)

2

Candidate or Committee Name (Do not abbreviate. Use full name.) MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds) Report Date 02/01/16 02/29/16

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)
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V - Voter Signature Gathering

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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	
02/02/16	CAPITOL FURNISHINGS 211 21st Ave SW Olympia, WA 98501		charity donation	30.00
02/18/16	GOLDWATER TAPLIN GROUP 1555 Palm Beach Lakes Blvd., West Palm Beach, FL 33401		unreimbursed office expense	55.00
02/18/16	CENTER FOR CHILDREN & YOUTH 615 Second Ave, Suite 275 Seattle, WA 98104		charity donation	150.00

4. TOTAL CASH EXPENDITURES Total from attached pages \$ 0.00
Enter also on line 11 of C4 \$ 235.00

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4 (3/97)	PDC OFFICE USE
	100689404
	04-10-2016

Candidate or Committee Name (Do not abbreviate. Include full name) MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)			
Mailing Address PO Box 15017		City Tumwater, WA	
Zip + 4 98511-5017	Office Sought (Candidates) INSURANCE COMMISSIONER	Election Date 2016	*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) 03/01/16	To (end of period) 03/31/16	
Final Report? Yes No X			

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)	\$	44,796.86
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)..... Show + or (-)		0.00
7. Net adjustments this period (Combine line 5 & 6)..... Show + or (-)		0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)		44,796.86
9. Total pledge payments due (From line 2, Schedule B)		0.00

EXPENDITURES

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)		31,056.06
11. Total cash expenditures (From line 4, Schedule A)		790.00
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)		790.00
14. Loan principal repayments made (From line 2, Schedule L)		0.00
15. Corrections (From line 2 or 3, Schedule C)..... Show + or (-)		0.00
16. Net adjustments this period (Combine lines 14 & 15)..... Show + or (-)		0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)		31,846.06

CANDIDATES ONLY			
Won	Lost	Unopposed	Name not on ballot
Primary election <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General election <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Treasurer's Daytime Telephone No.:
 (360) 867-1084

CASH SUMMARY

18. Cash on hand (Line 8 minus line 17) [Line 18 should equal your bank account balance(s) plus your petty cash balance.]	12,950.80
19. Liabilities: (Sum of loans and debts owed)	0.00
20. Balance (Surplus or deficit) (Line 18 minus line 19)	12,950.80

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 MYRON "MIKE" KREIDLER	Date 04/11/16	Treasurer's Signature Jim Odiorne	Date
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CASH RECEIPTS AND EXPENDITURE

SCHEDULE
to C4

A
(11/93)

2

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

Report Date

MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

03/01/16

03/31/16

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

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M - Management/Consulting Services
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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	
03/17/16	WSAJ 1809 7th Ave, Ste 1500 Seattle, WA 98101		Legal Education Seminar contribution	150.00
03/28/16	STATE AGENCY SOFTBALL LEAGUE PO Box 14062 Olympia, WA 98501		league entrance fee	640.00

Total from attached pages \$ 0.00

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ 790.00

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4
(3/97)

PDC OFFICE USE
100718380
AMENDS
100714033
09-05-2016

Candidate or Committee Name (Do not abbreviate. Include full name)
MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

Mailing Address
PO Box 15017

City
Tumwater, WA

Zip + 4 98511-5017	Office Sought (Candidates) INSURANCE COMMISSIONER	Election Date 2020
Report Period Covered	From (last C-4) 07/01/16	To (end of period) 07/31/16
		Final Report? Yes No X

***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)?

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)	\$	44,796.86
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)	Show + or (-)	0.00
7. Net adjustments this period (Combine line 5 & 6)	Show + or (-)	0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)		44,796.86
9. Total pledge payments due (From line 2, Schedule B)		0.00

EXPENDITURES

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)		31,959.48
11. Total cash expenditures (From line 4, Schedule A)		192.50
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)		192.50
14. Loan principal repayments made (From line 2, Schedule L)		0.00
15. Corrections (From line 2 or 3, Schedule C)	Show + or (-)	0.00
16. Net adjustments this period (Combine lines 14 & 15)	Show + or (-)	0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)		32,151.98

CANDIDATES ONLY

	Won	Lost	Unopposed	Name not on ballot
Primary election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Treasurer's Daytime Telephone No.:

(360) 867-1084

CASH SUMMARY

18. Cash on hand (Line 8 minus line 17)	12,644.88
[Line 18 should equal your bank account balance(s) plus your petty cash balance.]	
19. Liabilities: (Sum of loans and debts owed)	0.00
20. Balance (Surplus or deficit) (Line 18 minus line 19)	12,644.88

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

Date

MYRON "MIKE" KREIDLER

08/10/16

Treasurer's Signature

Date

Jim Odiorne

CASH RECEIPTS AND EXPENDITURE

SCHEDULE
to C4

A

(11/93)

2

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

Report Date

MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

07/01/16

07/31/16

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	
07/05/16	ANNALISA GELLERMANN 5000 Capital Blvd Tumwater, WA 98503		Reimburse for supplies TD&SWD	143.25
07/15/16	GOLDWATER TAPLIN GROUP 1555 Palm Beach Lakes Blvd., West Palm Beach, FL 33401		reimburse for unreimbursed office expense - meal	21.60
07/07/16	FIRST CITIZENS BANK Franklin & Legion Olympia, WA 98501		check printing	27.65

Total from attached pages \$ 0.00

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ 192.50

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4
(3/97)

PDC OFFICE USE

100718381
AMENDS
100718371
09-05-2016

Candidate or Committee Name (Do not abbreviate. Include full name)
 MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)
 Mailing Address
 PO Box 15017

City
 Tumwater, WA

Zip + 4 98511-5017	Office Sought (Candidates) INSURANCE COMMISSIONER	Election Date 2020
Report Period Covered	From (last C-4) 08/01/16	To (end of period) 08/31/16
		Final Report? Yes No X

***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)?

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)	\$	44,796.86
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)	Show + or (-)	0.00
7. Net adjustments this period (Combine line 5 & 6)	Show + or (-)	0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)		44,796.86
9. Total pledge payments due (From line 2, Schedule B)		0.00

EXPENDITURES

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)		32,151.98
11. Total cash expenditures (From line 4, Schedule A)		58.86
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)		58.86
14. Loan principal repayments made (From line 2, Schedule L)		0.00
15. Corrections (From line 2 or 3, Schedule C)	Show + or (-)	0.00
16. Net adjustments this period (Combine lines 14 & 15)	Show + or (-)	0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)		32,210.84

CANDIDATES ONLY

	Won	Lost	Unopposed	Name not on ballot
Primary election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Treasurer's Daytime Telephone No.:

(360) 867-1084

CASH SUMMARY

18. Cash on hand (Line 8 minus line 17)	12,586.02
[Line 18 should equal your bank account balance(s) plus your petty cash balance.]	
19. Liabilities: (Sum of loans and debts owed)	0.00
20. Balance (Surplus or deficit) (Line 18 minus line 19)	12,586.02

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 MYRON "MIKE" KREIDLER	Date 09/12/16	Treasurer's Signature Jim Odiorne	Date
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CASH RECEIPTS AND EXPENDITURE

SCHEDULE
to C4

A

(11/93)

2

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

Report Date

MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

08/01/16

08/31/16

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	
08/01/16	GOLDWATER TAPLIN GROUP 1555 Palm Beach Lakes Blvd., West Palm Beach, FL 33401		reimburse for meals	58.86

Total from attached pages \$ 0.00

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ 58.86

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4
(3/97)

PDC OFFICE USE
100724853

10-09-2016

Candidate or Committee Name (Do not abbreviate. Include full name)
 MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)
 Mailing Address
 PO Box 15017

City
Tumwater, WA

Zip + 4 98511-5017	Office Sought (Candidates) INSURANCE COMMISSIONER	Election Date 2020
Report Period Covered	From (last C-4) 09/01/16	To (end of period) 09/30/16
		Final Report? Yes No X

***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)?

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)	\$	44,796.86
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)	Show + or (-)	0.00
7. Net adjustments this period (Combine line 5 & 6)	Show + or (-)	0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)		44,796.86
9. Total pledge payments due (From line 2, Schedule B)		0.00

EXPENDITURES

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)		32,210.84
11. Total cash expenditures (From line 4, Schedule A)		4,327.04
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)		4,327.04
14. Loan principal repayments made (From line 2, Schedule L)		0.00
15. Corrections (From line 2 or 3, Schedule C)	Show + or (-)	0.00
16. Net adjustments this period (Combine lines 14 & 15)	Show + or (-)	0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)		36,537.88

CANDIDATES ONLY

	Won	Lost	Unopposed	Name not on ballot
Primary election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Treasurer's Daytime Telephone No.:

(360) 867-1084

CASH SUMMARY

18. Cash on hand (Line 8 minus line 17)	8,258.98
[Line 18 should equal your bank account balance(s) plus your petty cash balance.]	
19. Liabilities: (Sum of loans and debts owed)	0.00
20. Balance (Surplus or deficit) (Line 18 minus line 19)	8,258.98

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

Date

MYRON "MIKE" KREIDLER

10/11/16

Treasurer's Signature

Date

Jim Odiorne

CASH RECEIPTS AND EXPENDITURE

SCHEDULE
to C4

A

(11/93)

2

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

Report Date

MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

09/01/16

09/30/16

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	
09/05/16	WASHINGTON STATE DEMOCRATS P. O. Box 4027 Seattle, WA 98194		replacing voided check 2727	4,000.00
09/05/16	GOLDWATER TAPLIN GROUP 1555 Palm Beach Lakes Blvd., West Palm Beach, FL 33401		reimburse for meals	59.00
09/05/16	GREENBERG TAURIG PA 101 College Avenue Tallahassee, FL 32301		reimbursement for meals	52.42
09/06/16	FIRST CITIZENS BANK Franklin & Legion Olympia, WA 98501		STOP PAYMENT CHARGE	35.00
09/06/16	USPS 900 Jefferson St SE Olympia, WA 98501		certified mailing stop payment	6.47
09/26/16	MYRON "MIKE" B KREIDLER PO Box 15017 Tumwater, WA 98511		Reimburse for meals in DC	74.15

Total from attached pages \$ 100.00

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ 4,327.04

EXPENDITURES CONTINUATION SHEET (Attachment to Schedule A)

Page 3

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

Report Date

MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

09/01/16

09/30/16

Date Paid	Vendor or Recipient (Name and Address)	Code	Purpose of Expense and/or Description	Amount
09/26/16	MYRON "MIKE" B KREIDLER PO Box 15017 Tumwater, WA 98511		Reimburse for contribution to ACS-CAN	100.00

Page Total \$ 100.00

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4
(3/97)

PDC OFFICE USE
100736360

12-03-2016

Candidate or Committee Name (Do not abbreviate. Include full name)
 MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)
 Mailing Address
 PO Box 15017

City
Tumwater, WA

Zip + 4 98511-5017	Office Sought (Candidates) INSURANCE COMMISSIONER	Election Date 2020
Report Period Covered	From (last C-4) 11/01/16	To (end of period) 11/30/16
		Final Report? Yes No X

***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)?

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)	\$	44,796.86
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)	Show + or (-)	0.00
7. Net adjustments this period (Combine line 5 & 6)	Show + or (-)	0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)		44,796.86
9. Total pledge payments due (From line 2, Schedule B)		0.00

EXPENDITURES

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)		36,537.88
11. Total cash expenditures (From line 4, Schedule A)		62.88
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)		62.88
14. Loan principal repayments made (From line 2, Schedule L)		0.00
15. Corrections (From line 2 or 3, Schedule C)	Show + or (-)	0.00
16. Net adjustments this period (Combine lines 14 & 15)	Show + or (-)	0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)		36,600.76

CANDIDATES ONLY

	Won	Lost	Unopposed	Name not on ballot
Primary election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Treasurer's Daytime Telephone No.:
(360) 867-1084

CASH SUMMARY

18. Cash on hand (Line 8 minus line 17)	8,196.10
[Line 18 should equal your bank account balance(s) plus your petty cash balance.]	
19. Liabilities: (Sum of loans and debts owed)	0.00
20. Balance (Surplus or deficit) (Line 18 minus line 19)	8,196.10

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 MYRON "MIKE" KREIDLER	Date 12/12/16	Treasurer's Signature Jim Odiorne	Date
--	------------------	--------------------------------------	------

CASH RECEIPTS AND EXPENDITURE

SCHEDULE A
to C4
(11/93)

2

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

Report Date

MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

11/01/16

11/30/16

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	
11/21/16	MYRON "MIKE" B KREIDLER PO Box 15017 Tumwater, WA 98511		reimburse for office related meals	42.93
11/21/16	MYRON "MIKE" B KREIDLER PO Box 15017 Tumwater, WA 98511		reimburse for office related meals	19.95

Total from attached pages \$ 0.00

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ 62.88

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4
(3/97)

PDC OFFICE USE
100740142

01-08-2017

Candidate or Committee Name (Do not abbreviate. Include full name)
MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

Mailing Address
PO Box 15017

City
Tumwater, WA

Zip + 4 98511-5017	Office Sought (Candidates) INSURANCE COMMISSIONER	Election Date 2020
Report Period Covered	From (last C-4) 12/01/16	To (end of period) 12/31/16
		Final Report? Yes No X

***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?)

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)	\$	44,796.86
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)	Show + or (-)	0.00
7. Net adjustments this period (Combine line 5 & 6)	Show + or (-)	0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)		44,796.86
9. Total pledge payments due (From line 2, Schedule B)		0.00

EXPENDITURES

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)		36,500.76
11. Total cash expenditures (From line 4, Schedule A)		643.48
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)		643.48
14. Loan principal repayments made (From line 2, Schedule L)		0.00
15. Corrections (From line 2 or 3, Schedule C)	Show + or (-)	0.00
16. Net adjustments this period (Combine lines 14 & 15)	Show + or (-)	0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)		37,144.24

CANDIDATES ONLY

	Won	Lost	Unopposed	Name not on ballot
Primary election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Treasurer's Daytime Telephone No.:

(360) 867-1084

CASH SUMMARY

18. Cash on hand (Line 8 minus line 17)	7,652.62
[Line 18 should equal your bank account balance(s) plus your petty cash balance.]	
19. Liabilities: (Sum of loans and debts owed)	0.00
20. Balance (Surplus or deficit) (Line 18 minus line 19)	7,652.62

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

Date

MYRON "MIKE" KREIDLER

01/10/17

Treasurer's Signature

Date

Jim Odiorne

CASH RECEIPTS AND EXPENDITURE

SCHEDULE A
to C4
(11/93)

2

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

Report Date

MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

12/01/16

12/31/16

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	
12/18/16	MYRON "MIKE" B KREIDLER PO Box 15017 Tumwater, WA 98511		reimburse for staff meals at NAIC	311.15
12/18/16	SUE HEDRICK 400 17th Ave SE Olympia, WA 98501		staff celebration reimbursement	14.56
12/18/16	SUSAN MILLER 5000 Capitol Blvd Tumwater, WA 98503		staff celebration reimbursement	22.95
12/18/16	JENNIFER KRAFT PO Box 40255 Olympia, WA 98504		staff celebration reimbursement	91.76
12/18/16	MOLLY NOLLETTE 5000 Capitol Blvd Tumwater, WA 98503		reimbursement for Barclay retirement	100.19
12/27/16	MYRON "MIKE" B KREIDLER PO Box 15017 Tumwater, WA 98511		reimburse meals	102.87

Total from attached pages \$ 0.00

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ 643.48

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4 (3/97)	PDC OFFICE USE
	100753922
	04-02-2017

Candidate or Committee Name (Do not abbreviate. Include full name) MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)			
Mailing Address PO Box 15017		City Tumwater, WA	
Zip + 4 98511-5017	Office Sought (Candidates) INSURANCE COMMISSIONER	Election Date 2020	*For PACs, Parties & Caucus Committees: During this report period, did the committee make an <u>independent expenditure</u> (i.e., an expense not considered a contribution supporting or opposing a state or local candidate)?
Report Period Covered From (last C-4) 03/01/17	To (end of period) 03/31/17	Final Report? Yes No X	

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)	\$	84,796.86
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)	Show + or (-)	0.00
7. Net adjustments this period (Combine line 5 & 6)	Show + or (-)	0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)		84,796.86
9. Total pledge payments due (From line 2, Schedule B)		0.00

EXPENDITURES

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)		37,678.44
11. Total cash expenditures (From line 4, Schedule A)		318.56
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)		318.56
14. Loan principal repayments made (From line 2, Schedule L)		0.00
15. Corrections (From line 2 or 3, Schedule C)	Show + or (-)	0.00
16. Net adjustments this period (Combine lines 14 & 15)	Show + or (-)	0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)		37,997.00

CANDIDATES ONLY			
Won	Lost	Unopposed	Name not on ballot
Primary election <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General election <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Treasurer's Daytime Telephone No.:
(360) 867-1084

CASH SUMMARY

18. Cash on hand (Line 8 minus line 17)	46,799.86
[Line 18 should equal your bank account balance(s) plus your petty cash balance.]	
19. Liabilities: (Sum of loans and debts owed)	0.00
20. Balance (Surplus or deficit) (Line 18 minus line 19)	46,799.86

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 MYRON "MIKE" KREIDLER	Date 04/10/17	Treasurer's Signature Jim Odiorne	Date
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SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4 (3/97)	PDC OFFICE USE
	100760120
	05-10-2017

Candidate or Committee Name (Do not abbreviate. Include full name) MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)			
Mailing Address PO Box 15017		City Tumwater, WA	
Zip + 4 98511-5017	Office Sought (Candidates) INSURANCE COMMISSIONER	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) 04/01/17	To (end of period) 04/30/17	Final Report? Yes No X	

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)	\$	84,796.86
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)	Show + or (-)	0.00
7. Net adjustments this period (Combine line 5 & 6)	Show + or (-)	0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)		84,796.86
9. Total pledge payments due (From line 2, Schedule B)		0.00

EXPENDITURES

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)		37,997.00
11. Total cash expenditures (From line 4, Schedule A)		691.83
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)		691.83
14. Loan principal repayments made (From line 2, Schedule L)		0.00
15. Corrections (From line 2 or 3, Schedule C)	Show + or (-)	0.00
16. Net adjustments this period (Combine lines 14 & 15)	Show + or (-)	0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)		38,688.83

CANDIDATES ONLY			
Won	Lost	Unopposed	Name not on ballot
Primary election <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General election <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Treasurer's Daytime Telephone No.:

(360) 867-1084

CASH SUMMARY

18. Cash on hand (Line 8 minus line 17)	46,108.03
[Line 18 should equal your bank account balance(s) plus your petty cash balance.]	
19. Liabilities: (Sum of loans and debts owed)	0.00
20. Balance (Surplus or deficit) (Line 18 minus line 19)	46,108.03

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 MYRON "MIKE" KREIDLER	Date 05/10/17	Treasurer's Signature Jim Odiorne	Date
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CASH RECEIPTS AND EXPENDITURE

SCHEDULE
to C4

A

(11/93)

2

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

Report Date

MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

04/01/17

04/30/17

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	
04/02/17	MYRON "MIKE" B KREIDLER PO Box 15017 Tumwater, WA 98511		unreimbursed mean 3/17/17	36.83
04/02/17	STATE AGENCY SOFTBALL LEAGUE PO Box 14062 Olympia, WA 98501		registratin fee for agency softball tam	655.00

Total from attached pages \$ 0.00

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ 691.83

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4 (3/97)	PDC OFFICE USE
	100767320
	06-10-2017

Candidate or Committee Name (Do not abbreviate. Include full name) MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)			
Mailing Address PO Box 15017		City Tumwater, WA	
Zip + 4 98511-5017	Office Sought (Candidates) INSURANCE COMMISSIONER	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) 05/01/17	To (end of period) 05/31/17	
Final Report? Yes No X			

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)	\$	84,796.86
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) Show + or (-)		0.00
7. Net adjustments this period (Combine line 5 & 6) Show + or (-)		0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)		84,796.86
9. Total pledge payments due (From line 2, Schedule B)		0.00

EXPENDITURES

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)		38,688.83
11. Total cash expenditures (From line 4, Schedule A)		402.80
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)		402.80
14. Loan principal repayments made (From line 2, Schedule L)		0.00
15. Corrections (From line 2 or 3, Schedule C) Show + or (-)		0.00
16. Net adjustments this period (Combine lines 14 & 15) Show + or (-)		0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)		39,091.63

CANDIDATES ONLY			
Won	Lost	Unopposed	Name not on ballot
Primary election <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General election <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Treasurer's Daytime Telephone No.:
(360) 867-1084

CASH SUMMARY

18. Cash on hand (Line 8 minus line 17) [Line 18 should equal your bank account balance(s) plus your petty cash balance.]	45,705.23
19. Liabilities: (Sum of loans and debts owed)	0.00
20. Balance (Surplus or deficit) (Line 18 minus line 19)	45,705.23

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 MYRON "MIKE" KREIDLER	Date 06/12/17	Treasurer's Signature Jim Odiorne	Date
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CASH RECEIPTS AND EXPENDITURE

SCHEDULE
to C4

A

(11/93)

2

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

Report Date

MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

05/01/17

05/31/17

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	
05/11/17	MYRON "MIKE" B KREIDLER PO Box 15017 Tumwater, WA 98511		unreimbursed staff appreciation dinner at Denver NAIC	402.80

Total from attached pages \$ 0.00

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ 402.80

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4
(3/97)

PDC OFFICE USE
100773106

07-09-2017

Candidate or Committee Name (Do not abbreviate. Include full name) MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)			
Mailing Address PO Box 15017		City Tumwater, WA	
Zip + 4 98511-5017	Office Sought (Candidates) INSURANCE COMMISSIONER	Election Date 2020	*For PACs, Parties & Caucus Committees: During this report period, did the committee make an <u>independent expenditure</u> (i.e., an expense not considered a contribution) <u>supporting or opposing a state or local candidate</u> ?
Report Period Covered From (last C-4) 06/01/17	To (end of period) 06/30/17	Final Report? Yes No X	

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)	\$	84,796.86
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)	Show + or (-)	0.00
7. Net adjustments this period (Combine line 5 & 6)	Show + or (-)	0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)		84,796.86
9. Total pledge payments due (From line 2, Schedule B)		0.00

EXPENDITURES

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)		39,091.63
11. Total cash expenditures (From line 4, Schedule A)		1,325.21
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)		1,325.21
14. Loan principal repayments made (From line 2, Schedule L)		0.00
15. Corrections (From line 2 or 3, Schedule C)	Show + or (-)	0.00
16. Net adjustments this period (Combine lines 14 & 15)	Show + or (-)	0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)		40,416.84

CANDIDATES ONLY	Won	Lost	Unopposed	Name not on ballot
Primary election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Treasurer's Daytime Telephone No.:

(360) 867-1084

CASH SUMMARY

18. Cash on hand (Line 8 minus line 17)	44,380.02
[Line 18 should equal your bank account balance(s) plus your petty cash balance.]	
19. Liabilities: (Sum of loans and debts owed)	0.00
20. Balance (Surplus or deficit) (Line 18 minus line 19)	44,380.02

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 MYRON "MIKE" KREIDLER	Date 07/10/17	Treasurer's Signature Jim Odiorne	Date
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CASH RECEIPTS AND EXPENDITURE

SCHEDULE
to C4

A

(11/93)

2

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

Report Date

MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

06/01/17

06/30/17

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	
06/01/17	ANTHONY'S HOME PORT 704 Columbia St NW Olympia, WA 98501		Deposit - staff appreciation dinner	100.00
06/12/17	MYRON "MIKE" B KREIDLER PO Box 15017 Tumwater, WA 98511		reimburse for meal at Panorama event	18.70
06/19/17	MYRON "MIKE" B KREIDLER PO Box 15017 Tumwater, WA 98511		Flowers for John Adams	121.11
06/20/17	ANTHONY'S HOME PORT 704 Columbia St NW Olympia, WA 98501		balance on staff appreciation dinner	717.36
06/27/17	MYRON "MIKE" B KREIDLER PO Box 15017 Tumwater, WA 98511		reimburse meal with Pomeroy	25.00
06/27/17	CAMBIA HEALTH SOLUTIONS 100 SW Market St Olympia, OR 97201		Dinner tickets - Cambia Centennial	250.00

Total from attached pages \$ 93.04

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ 1,325.21

EXPENDITURES CONTINUATION SHEET (Attachment to Schedule A)

Page 3

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

Report Date

MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

06/01/17

06/30/17

Date Paid	Vendor or Recipient (Name and Address)	Code	Purpose of Expense and/or Description	Amount
06/30/17	LISA BORCHART 5000 Capitol Blvd Tumwater, WA 98501		Reimbuse - food and supplies - Take Kids to work	93.04

Page Total \$ 93.04

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4
(3/97)

PDC OFFICE USE
100784712

09-03-2017

Candidate or Committee Name (Do not abbreviate. Include full name)
MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

Mailing Address
PO Box 15017

City
Tumwater, WA

Zip + 4 98511-5017	Office Sought (Candidates) INSURANCE COMMISSIONER	Election Date 2020
Report Period Covered	From (last C-4) 08/01/17	To (end of period) 08/31/17
		Final Report? Yes No X

***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?)

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)	\$	84,796.86
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)	Show + or (-)	0.00
7. Net adjustments this period (Combine line 5 & 6)	Show + or (-)	0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)		84,796.86
9. Total pledge payments due (From line 2, Schedule B)		0.00

EXPENDITURES

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)		40,416.84
11. Total cash expenditures (From line 4, Schedule A)		649.61
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)		649.61
14. Loan principal repayments made (From line 2, Schedule L)		0.00
15. Corrections (From line 2 or 3, Schedule C)	Show + or (-)	0.00
16. Net adjustments this period (Combine lines 14 & 15)	Show + or (-)	0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)		41,066.45

CANDIDATES ONLY

	Won	Lost	Unopposed	Name not on ballot
Primary election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Treasurer's Daytime Telephone No.:
(360) 867-1084

CASH SUMMARY

18. Cash on hand (Line 8 minus line 17)	43,730.41
[Line 18 should equal your bank account balance(s) plus your petty cash balance.]	
19. Liabilities: (Sum of loans and debts owed)	0.00
20. Balance (Surplus or deficit) (Line 18 minus line 19)	43,730.41

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 MYRON "MIKE" KREIDLER	Date 09/11/17	Treasurer's Signature Jim Odiorne	Date
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CASH RECEIPTS AND EXPENDITURE

SCHEDULE
to C4

A
(11/93)

2

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

Report Date

MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

08/01/17

08/31/17

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	
08/28/17	MYRON "MIKE" B KREIDLER PO Box 15017 Tumwater, WA 98511		reimburse for softball team appreciation	149.61
08/28/17	DENNY HECK FOR CONGRESS P. o. Box 235 Olympia, WA 98507		contribution to other campaign	500.00

Total from attached pages \$ 0.00

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ 649.61

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4
(3/97)

PDC OFFICE USE
100800011

11-10-2017

Candidate or Committee Name (Do not abbreviate. Include full name)
MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

Mailing Address
PO Box 15017

City
Tumwater, WA

Zip + 4 98511-5017	Office Sought (Candidates) INSURANCE COMMISSIONER	Election Date 2020
Report Period Covered	From (last C-4) 09/01/17	To (end of period) 09/30/17
		Final Report? Yes No X

***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)?

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)	\$	84,796.86
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)	Show + or (-)	0.00
7. Net adjustments this period (Combine line 5 & 6)	Show + or (-)	0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)		84,796.86
9. Total pledge payments due (From line 2, Schedule B)		0.00

EXPENDITURES

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)		41,066.45
11. Total cash expenditures (From line 4, Schedule A)		1,326.26
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)		1,326.26
14. Loan principal repayments made (From line 2, Schedule L)		0.00
15. Corrections (From line 2 or 3, Schedule C)	Show + or (-)	0.00
16. Net adjustments this period (Combine lines 14 & 15)	Show + or (-)	0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)		42,392.71

CANDIDATES ONLY

	Won	Lost	Unopposed	Name not on ballot
Primary election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Treasurer's Daytime Telephone No.:

(360) 867-1084

CASH SUMMARY

18. Cash on hand (Line 8 minus line 17)	42,404.15
[Line 18 should equal your bank account balance(s) plus your petty cash balance.]	
19. Liabilities: (Sum of loans and debts owed)	0.00
20. Balance (Surplus or deficit) (Line 18 minus line 19)	42,404.15

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

Date

MYRON "MIKE" KREIDLER

10/10/17

Treasurer's Signature

Date

Jim Odiorne

CASH RECEIPTS AND EXPENDITURE

SCHEDULE
to C4

A

(11/93)

2

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

Report Date

MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

09/01/17

09/30/17

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	
09/18/17	JENNIFER KRAFT PO Box 40255 Olympia, WA 98504		reimburse - gifts for WZ2017	637.00
09/26/17	JENNIFER KRAFT PO Box 40255 Olympia, WA 98504		reimburse - gifts for WZ2017	677.26
09/26/17	MYRON "MIKE" B KREIDLER PO Box 15017 Tumwater, WA 98511		reimburse food costs at State of Reform	12.00

Total from attached pages \$ 0.00

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ 1,326.26

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4 (3/97)	PDC OFFICE USE
	100800013
	11-10-2017

Candidate or Committee Name (Do not abbreviate. Include full name) MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)			
Mailing Address PO Box 15017		City Tumwater, WA	
Zip + 4 98511-5017	Office Sought (Candidates) INSURANCE COMMISSIONER	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) 10/01/17	To (end of period) 10/31/17	Final Report? Yes No X	

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)	\$	84,796.86
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)	Show + or (-)	0.00
7. Net adjustments this period (Combine line 5 & 6)	Show + or (-)	0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)		84,796.86
9. Total pledge payments due (From line 2, Schedule B)		0.00

EXPENDITURES

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)		42,392.71
11. Total cash expenditures (From line 4, Schedule A)		61.18
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)		61.18
14. Loan principal repayments made (From line 2, Schedule L)		0.00
15. Corrections (From line 2 or 3, Schedule C)	Show + or (-)	0.00
16. Net adjustments this period (Combine lines 14 & 15)	Show + or (-)	0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)		42,453.89

CANDIDATES ONLY			
Won	Lost	Unopposed	Name not on ballot
Primary election <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General election <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Treasurer's Daytime Telephone No.:
(360) 867-1084

CASH SUMMARY

18. Cash on hand (Line 8 minus line 17)	42,342.97
[Line 18 should equal your bank account balance(s) plus your petty cash balance.]	
19. Liabilities: (Sum of loans and debts owed)	0.00
20. Balance (Surplus or deficit) (Line 18 minus line 19)	42,342.97

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 MYRON "MIKE" KREIDLER	Date 11/13/17	Treasurer's Signature Jim Odiorne	Date
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CASH RECEIPTS AND EXPENDITURE

SCHEDULE
to C4

A

(11/93)

2

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

Report Date

MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

10/01/17

10/31/17

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	
10/30/17	JENNIFER KRAFT PO Box 40255 Olympia, WA 98504		reimburse - gifts for WZ2017	61.18

Total from attached pages \$ 0.00

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ 61.18

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4
(3/97)

PDC OFFICE USE
100803435
12-10-2017

Candidate or Committee Name (Do not abbreviate. Include full name)
MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

Mailing Address
PO Box 15017

City
Tumwater, WA

Zip + 4 98511-5017	Office Sought (Candidates) INSURANCE COMMISSIONER	Election Date 2020
Report Period Covered	From (last C-4) 11/01/17	To (end of period) 11/30/17
		Final Report? Yes No X

***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)?

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)	\$	84,796.86
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)	Show + or (-)	0.00
7. Net adjustments this period (Combine line 5 & 6)	Show + or (-)	0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)		84,796.86
9. Total pledge payments due (From line 2, Schedule B)		0.00

EXPENDITURES

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)		42,453.89
11. Total cash expenditures (From line 4, Schedule A)		73.51
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)		73.51
14. Loan principal repayments made (From line 2, Schedule L)		0.00
15. Corrections (From line 2 or 3, Schedule C)	Show + or (-)	0.00
16. Net adjustments this period (Combine lines 14 & 15)	Show + or (-)	0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)		42,527.40

CANDIDATES ONLY

	Won	Lost	Unopposed	Name not on ballot
Primary election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Treasurer's Daytime Telephone No.:

(360) 867-1084

CASH SUMMARY

18. Cash on hand (Line 8 minus line 17)	42,269.46
[Line 18 should equal your bank account balance(s) plus your petty cash balance.]	
19. Liabilities: (Sum of loans and debts owed)	0.00
20. Balance (Surplus or deficit) (Line 18 minus line 19)	42,269.46

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

Date

Treasurer's Signature

Date

MYRON "MIKE" KREIDLER

12/11/17

Jim Odiorne

CASH RECEIPTS AND EXPENDITURE

SCHEDULE
to C4

A

(11/93)

2

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

Report Date

MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

11/01/17

11/30/17

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	
11/10/17	MYRON "MIKE" B KREIDLER PO Box 15017 Tumwater, WA 98511		reimburse for meal in KL	73.51

Total from attached pages \$ 0.00

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ 73.51

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4
(3/97)

PDC OFFICE USE
100807126

01-08-2018

Candidate or Committee Name (Do not abbreviate. Include full name) MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)			
Mailing Address PO Box 15017		City Tumwater, WA	
Zip + 4 98511-5017	Office Sought (Candidates) INSURANCE COMMISSIONER	Election Date 2020	*For PACs, Parties & Caucus Committees: During this report period, did the committee make an <u>independent expenditure</u> (i.e., an expense not considered a contribution) <u>supporting or opposing a state or local candidate?</u>
Report Period Covered From (last C-4) 12/01/17 To (end of period) 12/31/17	Final Report? Yes No X		

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)	\$	\$84,796.86
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)	Show + or (-)	\$0.00
7. Net adjustments this period (Combine line 5 & 6)	Show + or (-)	\$0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)		\$84,796.86
9. Total pledge payments due (From line 2, Schedule B)	\$0.00	

EXPENDITURES

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)		\$42,527.40
11. Total cash expenditures (From line 4, Schedule A)	\$1,392.99	
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)		\$1,392.99
14. Loan principal repayments made (From line 2, Schedule L)	\$0.00	
15. Corrections (From line 2 or 3, Schedule C)	Show + or (-)	\$0.00
16. Net adjustments this period (Combine lines 14 & 15)	Show + or (-)	\$0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)		\$43,920.39

CANDIDATES ONLY <table style="width:100%;"> <tr> <th></th> <th>Won</th> <th>Lost</th> <th>Unopposed</th> <th>Name not on ballot</th> </tr> <tr> <td>Primary election</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>General election</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> Treasurer's Daytime Telephone No.: (360) 867-1084		Won	Lost	Unopposed	Name not on ballot	Primary election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	General election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CASH SUMMARY 18. Cash on hand (Line 8 minus line 17) \$40,876.47 <small>[Line 18 should equal your bank account balance(s) plus your petty cash balance.]</small> 19. Liabilities: (Sum of loans and debts owed) \$0.00 20. Balance (Surplus or deficit) (Line 18 minus line 19) \$40,876.47
	Won	Lost	Unopposed	Name not on ballot												
Primary election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
General election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												

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 MYRON "MIKE" KREIDLER	Date 01/08/18	Treasurer's Signature Jim Odiorne	Date 01/08/18
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CASH RECEIPTS AND EXPENDITURE

SCHEDULE
to C4

A
(11/93)

2

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

Report Date

MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

12/01/17

12/31/17

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	
12/26/17	NELSON - TAPLIN-GOLDWATER 1555 Palm Beach Lakes Blvd Ste West Palm Beach, FL 33401		reimburse for dinner in Honolulu	\$75.00
12/26/17	MYRON "MIKE" B KREIDLER PO Box 15017 Tumwater, WA 98511		reimburse for staff appreciation dinner	\$807.32
12/26/17	SUE HEDRICK 400 17th Ave SE Olympia, WA 98501		reimburse for staff holiday party expenses	\$222.82
12/26/17	JENNIFER KRAFT PO Box 40255 Olympia, WA 98504		reimburse for staff holiday party expenses	\$247.85
12/14/17	NELSON - TAPLIN-GOLDWATER 1555 Palm Beach Lakes Blvd Ste West Palm Beach, FL 33401		reimburse for dinner in Santa Fe	\$40.00

Total from attached pages \$ **\$0.00**

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ **\$1,392.99**

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4
(3/97)

PDC OFFICE USE
 100811480
 02-10-2018

Candidate or Committee Name (Do not abbreviate. Include full name) MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)			
Mailing Address PO Box 15017		City Tumwater, WA	
Zip + 4 98511-5017	Office Sought (Candidates) INSURANCE COMMISSIONER	Election Date 2020	*For PACs, Parties & Caucus Committees: During this report period, did the committee make an <u>independent expenditure</u> (i.e., an expense not considered a contribution) <u>supporting or opposing a state or local candidate?</u>
Report Period Covered 01/01/18	To (end of period) 01/31/18	Final Report? Yes No X	

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)	\$	\$84,796.86
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)	Show + or (-)	\$0.00
7. Net adjustments this period (Combine line 5 & 6)	Show + or (-)	\$0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)		\$84,796.86
9. Total pledge payments due (From line 2, Schedule B)	\$0.00	

EXPENDITURES

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)		\$43,920.39
11. Total cash expenditures (From line 4, Schedule A)		\$223.92
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)		\$223.92
14. Loan principal repayments made (From line 2, Schedule L)		\$0.00
15. Corrections (From line 2 or 3, Schedule C)	Show + or (-)	\$0.00
16. Net adjustments this period (Combine lines 14 & 15)	Show + or (-)	\$0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)		\$44,144.31

CANDIDATES ONLY <table style="width:100%;"> <tr> <th style="width:15%;"></th> <th style="width:15%;">Won</th> <th style="width:15%;">Lost</th> <th style="width:15%;">Unopposed</th> <th style="width:15%;">Name not on ballot</th> </tr> <tr> <td>Primary election</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>General election</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table>		Won	Lost	Unopposed	Name not on ballot	Primary election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	General election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CASH SUMMARY 18. Cash on hand (Line 8 minus line 17) \$40,652.55 <small>[Line 18 should equal your bank account balance(s) plus your petty cash balance.]</small> 19. Liabilities: (Sum of loans and debts owed) \$0.00 20. Balance (Surplus or deficit) (Line 18 minus line 19) \$40,652.55
	Won	Lost	Unopposed	Name not on ballot												
Primary election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
General election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
Treasurer's Daytime Telephone No.: (360) 867-1084																

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 MYRON "MIKE" KREIDLER	Date 02/10/18	Treasurer's Signature Jim Odiorne	Date 02/10/18
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CASH RECEIPTS AND EXPENDITURE

SCHEDULE
to C4

A
(11/93)

2

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

Report Date

MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

01/01/18

01/31/18

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	
01/15/18	MYRON "MIKE" B KREIDLER PO Box 15017 Tumwater, WA 98511		staff lunch meeting Seattle	\$223.92

Total from attached pages \$ **\$0.00**

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ **\$223.92**

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4
(3/97)

PDC OFFICE USE
100820643

03-12-2018

Candidate or Committee Name (Do not abbreviate. Include full name) MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)			
Mailing Address PO Box 15017		City Tumwater, WA	
Zip + 4 98511-5017	Office Sought (Candidates) INSURANCE COMMISSIONER	Election Date 2020	*For PACs, Parties & Caucus Committees: During this report period, did the committee make an <u>independent expenditure</u> (i.e., an expense not considered a contribution) <u>supporting or opposing a state or local candidate?</u>
Report Period From (last C-4) Covered 02/01/18	To (end of period) 02/28/18	Final Report? Yes No X	

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)				
		\$		\$84,796.86
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)		Show + or (-)		\$0.00
7. Net adjustments this period (Combine line 5 & 6)		Show + or (-)		\$0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)				\$84,796.86
9. Total pledge payments due (From line 2, Schedule B)		\$0.00		

EXPENDITURES	
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)	
\$44,144.31	
11. Total cash expenditures (From line 4, Schedule A)	
\$180.93	
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)	
\$180.93	
14. Loan principal repayments made (From line 2, Schedule L)	
\$0.00	
15. Corrections (From line 2 or 3, Schedule C)	
Show + or (-) \$0.00	
16. Net adjustments this period (Combine lines 14 & 15)	
Show + or (-) \$0.00	
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)	
\$44,325.24	

CANDIDATES ONLY				CASH SUMMARY	
Won	Lost	Unopposed	Name not on ballot		
Primary election <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18. Cash on hand (Line 8 minus line 17)	
General election <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[Line 18 should equal your bank account balance(s) plus your petty cash balance.] \$40,471.62	
Treasurer's Daytime Telephone No.: (206) 682-7328				19. Liabilities: (Sum of loans and debts owed)	
				\$0.00	
				20. Balance (Surplus or deficit) (Line 18 minus line 19)	
				\$40,471.62	

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		Date	
MYRON "MIKE" KREIDLER		03/12/18	
Treasurer's Signature		Date	
Jay Petterson		03/12/18	

CASH RECEIPTS AND EXPENDITURE

SCHEDULE
to C4

A
(11/93)

2

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

Report Date

MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

02/01/18

02/28/18

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	\$110.00
02/05/18	MYRON "MIKE" B KREIDLER PO Box 15017 Tumwater, WA 98511		Meals: Commissioner Meeting, Orlando FL	\$70.93

Total from attached pages \$ **\$0.00**

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ **\$180.93**

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4
(3/97)

PDC OFFICE USE
100824981

04-10-2018

Candidate or Committee Name (Do not abbreviate. Include full name) MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)			
Mailing Address PO Box 15017		City Tumwater, WA	
Zip + 4 98511-5017	Office Sought (Candidates) INSURANCE COMMISSIONER	Election Date 2020	*For PACs, Parties & Caucus Committees: During this report period, did the committee make an <u>independent expenditure</u> (i.e., an expense not considered a contribution) <u>supporting or opposing a state or local candidate?</u>
Report Period Covered From (last C-4) 03/01/18 To (end of period) 03/31/18		Final Report? Yes No X	

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)	\$	\$84,796.86
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)	Show + or (-)	\$0.00
7. Net adjustments this period (Combine line 5 & 6)	Show + or (-)	\$0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)		\$84,796.86
9. Total pledge payments due (From line 2, Schedule B)	\$0.00	

EXPENDITURES

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)		\$44,325.24
11. Total cash expenditures (From line 4, Schedule A)	\$1,309.16	
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)	\$1,309.16	
14. Loan principal repayments made (From line 2, Schedule L)	\$0.00	
15. Corrections (From line 2 or 3, Schedule C)	Show + or (-)	\$0.00
16. Net adjustments this period (Combine lines 14 & 15)	Show + or (-)	\$0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)		\$45,634.40

CANDIDATES ONLY	CASH SUMMARY
Won Lost Unopposed Name not on ballot	18. Cash on hand (Line 8 minus line 17)
Primary election <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	[Line 18 should equal your bank account balance(s) plus your petty cash balance.]
General election <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	19. Liabilities: (Sum of loans and debts owed)
Treasurer's Daytime Telephone No.: (206) 682-7328	20. Balance (Surplus or deficit) (Line 18 minus line 19)
	\$39,162.46

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 MYRON "MIKE" KREIDLER	Date 04/10/18	Treasurer's Signature Jay Petterson	Date 04/10/18
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CASH RECEIPTS AND EXPENDITURE

SCHEDULE
to C4

A
(11/93)

2

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

Report Date

MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

03/01/18

03/31/18

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

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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	\$58.76
03/12/18	STATE AGENCY SOFTBALL LEAGUE PO Box 14062 Olympia, WA 98501		Agency Team Sponsorship	\$625.00
03/28/18	MYRON "MIKE" B KREIDLER PO Box 15017 Tumwater, WA 98511		Staff Meal: NAIC Meeting (3/24-3/27)	\$625.40

Total from attached pages \$ **\$0.00**

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ **\$1,309.16**

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4
(3/97)

PDC OFFICE USE
 100836260
 06-10-2018

Candidate or Committee Name (Do not abbreviate. Include full name) MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)			
Mailing Address PO Box 15017		City Tumwater, WA	
Zip + 4 98511-5017	Office Sought (Candidates) INSURANCE COMMISSIONER	Election Date 2020	*For PACs, Parties & Caucus Committees: During this report period, did the committee make an <u>independent expenditure</u> (i.e., an expense not considered a contribution) <u>supporting or opposing a state or local candidate?</u>
Report Period Covered 05/01/18	To (end of period) 05/31/18	Final Report? Yes No X	

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)	\$	\$84,796.86
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)	Show + or (-)	\$0.00
7. Net adjustments this period (Combine line 5 & 6)	Show + or (-)	\$0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)		\$84,796.86
9. Total pledge payments due (From line 2, Schedule B)	\$0.00	

EXPENDITURES

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)		\$45,634.24
11. Total cash expenditures (From line 4, Schedule A)		\$282.29
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)		\$282.29
14. Loan principal repayments made (From line 2, Schedule L)		\$0.00
15. Corrections (From line 2 or 3, Schedule C)	Show + or (-)	\$0.00
16. Net adjustments this period (Combine lines 14 & 15)	Show + or (-)	\$0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)		\$45,916.53

CANDIDATES ONLY	Won	Lost	Unopposed	Name not on ballot
Primary election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Treasurer's Daytime Telephone No.:
(206) 682-7328

CASH SUMMARY

18. Cash on hand (Line 8 minus line 17)		\$38,880.33
[Line 18 should equal your bank account balance(s) plus your petty cash balance.]		
19. Liabilities: (Sum of loans and debts owed)		\$0.00
20. Balance (Surplus or deficit) (Line 18 minus line 19)		\$38,880.33

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 MYRON "MIKE" KREIDLER	Date 06/10/18	Treasurer's Signature Jay Petterson	Date 06/10/18
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CASH RECEIPTS AND EXPENDITURE

SCHEDULE
to C4

A
(11/93)

2

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

Report Date

MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

05/01/18

05/31/18

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	\$63.98
05/07/18	AMY TESHERA PO Box 40255 Olympia, WA 98504		4/26 Event Food: Dominos Pizza	\$69.61
05/30/18	MIKE KREIDLER 1721 18th Ct NE Olympia, WA 98506-3411		Meals: Sonoma DC (Washington, DC)	\$148.70

Total from attached pages \$ **\$0.00**

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ **\$282.29**

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4
(3/97)

PDC OFFICE USE
 100843254
 07-10-2018

Candidate or Committee Name (Do not abbreviate. Include full name) MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)			
Mailing Address PO Box 15017		City Tumwater, WA	
Zip + 4 98511-5017	Office Sought (Candidates) INSURANCE COMMISSIONER	Election Date 2020	*For PACs, Parties & Caucus Committees: During this report period, did the committee make an <u>independent expenditure</u> (i.e., an expense not considered a contribution) <u>supporting or opposing a state or local candidate?</u>
Report Period Covered 06/01/18	To (end of period) 06/30/18	Final Report? Yes No X	

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)	\$	\$84,796.86
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)	Show + or (-)	\$0.00
7. Net adjustments this period (Combine line 5 & 6)	Show + or (-)	\$0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)		\$84,796.86
9. Total pledge payments due (From line 2, Schedule B)	\$0.00	

EXPENDITURES

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)		\$45,916.53
11. Total cash expenditures (From line 4, Schedule A)		\$43.83
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)		\$43.83
14. Loan principal repayments made (From line 2, Schedule L)		\$0.00
15. Corrections (From line 2 or 3, Schedule C)	Show + or (-)	\$0.00
16. Net adjustments this period (Combine lines 14 & 15)	Show + or (-)	\$0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)		\$45,960.36

CANDIDATES ONLY	Won	Lost	Unopposed	Name not on ballot
Primary election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Treasurer's Daytime Telephone No.:
(206) 682-7328

CASH SUMMARY

18. Cash on hand (Line 8 minus line 17)	\$38,836.50
[Line 18 should equal your bank account balance(s) plus your petty cash balance.]	
19. Liabilities: (Sum of loans and debts owed)	\$0.00
20. Balance (Surplus or deficit) (Line 18 minus line 19)	\$38,836.50

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 MYRON "MIKE" KREIDLER	Date 07/10/18	Treasurer's Signature Jay Petterson	Date 07/10/18
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SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4
(3/97)

PDC OFFICE USE
100851877

08-10-2018

Candidate or Committee Name (Do not abbreviate. Include full name) MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)			
Mailing Address PO Box 15017		City Tumwater, WA	
Zip + 4 98511-5017	Office Sought (Candidates) INSURANCE COMMISSIONER	Election Date 2020	*For PACs, Parties & Caucus Committees: During this report period, did the committee make an <u>independent expenditure</u> (i.e., an expense not considered a contribution) <u>supporting or opposing a state or local candidate?</u>
Report Period Covered From (last C-4) 07/01/18 To (end of period) 07/31/18	Final Report? Yes No X		

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)	\$	\$84,796.86
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)	Show + or (-)	\$0.00
7. Net adjustments this period (Combine line 5 & 6)	Show + or (-)	\$0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)		\$84,796.86
9. Total pledge payments due (From line 2, Schedule B)	\$0.00	

EXPENDITURES

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)		\$45,960.36
11. Total cash expenditures (From line 4, Schedule A)		\$50.11
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)		\$50.11
14. Loan principal repayments made (From line 2, Schedule L)		\$0.00
15. Corrections (From line 2 or 3, Schedule C)	Show + or (-)	\$0.00
16. Net adjustments this period (Combine lines 14 & 15)	Show + or (-)	\$0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)		\$46,010.47

CANDIDATES ONLY <table style="width:100%;"> <tr> <th></th> <th>Won</th> <th>Lost</th> <th>Unopposed</th> <th>Name not on ballot</th> </tr> <tr> <td>Primary election</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>General election</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> Treasurer's Daytime Telephone No.: (206) 682-7328		Won	Lost	Unopposed	Name not on ballot	Primary election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	General election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CASH SUMMARY 18. Cash on hand (Line 8 minus line 17) \$38,786.39 <small>[Line 18 should equal your bank account balance(s) plus your petty cash balance.]</small> 19. Liabilities: (Sum of loans and debts owed) \$0.00 20. Balance (Surplus or deficit) (Line 18 minus line 19) \$38,786.39
	Won	Lost	Unopposed	Name not on ballot												
Primary election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
General election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												

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 MYRON "MIKE" KREIDLER	Date 08/10/18	Treasurer's Signature Jay Petterson	Date 08/10/18
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CASH RECEIPTS AND EXPENDITURE

SCHEDULE
to C4

A
(11/93)

2

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

Report Date

MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

07/01/18

07/31/18

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	
07/02/18	MYRON "MIKE" B KREIDLER PO Box 15017 Tumwater, WA 98511		Meals: Din Tai Fung	\$50.11

Total from attached pages \$ **\$0.00**

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ **\$50.11**

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

Candidate or Committee Name (Do not abbreviate. Include full name) MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)			
Mailing Address PO Box 15017		City Tumwater, WA	
Zip + 4 98511-5017	Office Sought (Candidates) INSURANCE COMMISSIONER	Election Date 2020	*For PACs, Parties & Caucus Committees: During this report period, did the committee make an <u>independent expenditure</u> (i.e., an expense not considered a contribution) supporting or opposing a state or local candidate?
Report Period Covered From (last C-4) 08/01/18 To (end of period) 08/31/18	Final Report? Yes No X		

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) \$ \$84,796.86				
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) Show + or (-) \$0.00				
7. Net adjustments this period (Combine line 5 & 6) Show + or (-) \$0.00				
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7) \$84,796.86				
9. Total pledge payments due (From line 2, Schedule B) \$0.00				

EXPENDITURES	
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) \$46,010.47	
11. Total cash expenditures (From line 4, Schedule A) \$2,839.64	
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) \$2,839.64	
14. Loan principal repayments made (From line 2, Schedule L) \$0.00	
15. Corrections (From line 2 or 3, Schedule C) Show + or (-) \$0.00	
16. Net adjustments this period (Combine lines 14 & 15) Show + or (-) \$0.00	
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16) \$48,850.11	

CANDIDATES ONLY				CASH SUMMARY	
	Won	Lost	Unopposed	Name not on ballot	
Primary election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18. Cash on hand (Line 8 minus line 17) \$35,946.75 [Line 18 should equal your bank account balance(s) plus your petty cash balance.]
General election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	19. Liabilities: (Sum of loans and debts owed) \$0.00
Treasurer's Daytime Telephone No.: (206) 682-7328					20. Balance (Surplus or deficit) (Line 18 minus line 19) \$35,946.75

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 MYRON "MIKE" KREIDLER		Date 09/10/18	
Treasurer's Signature Jay Petterson		Date 09/10/18	

CASH RECEIPTS AND EXPENDITURE

SCHEDULE
to C4

A
(11/93)

2

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

Report Date

MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

08/01/18

08/31/18

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.

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DEFINITIONS
ON NEXT PAGE

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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	
08/01/18	MYRON "MIKE" B KREIDLER PO Box 15017 Tumwater, WA 98511		Non-reimbursed Public Office Expense:: Well 80, Olympia WA	\$476.40
08/27/18	MYRON "MIKE" B KREIDLER PO Box 15017 Tumwater, WA 98511		Non-reimbursed Public Office Expense: River's Edge, Olympia WA	\$2,279.58
08/01/18	MYRON "MIKE" B KREIDLER PO Box 15017 Tumwater, WA 98511		Non-reimbursed Public Office Expense: Water Street Cafe, Olympia WA	\$83.66

Total from attached pages \$ **\$0.00**

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ **\$2,839.64**

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4
(3/97)

PDC OFFICE USE
100880386

01-10-2019

Candidate or Committee Name (Do not abbreviate. Include full name) MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)			
Mailing Address PO Box 15017		City Tumwater, WA	
Zip + 4 98511-5017	Office Sought (Candidates) INSURANCE COMMISSIONER	Election Date 2020	*For PACs, Parties & Caucus Committees: During this report period, did the committee make an <u>independent expenditure</u> (i.e., an expense not considered a contribution) supporting or opposing a state or local candidate?
Report Period Covered From (last C-4) 12/01/18 To (end of period) 12/31/18	Final Report? Yes No X		

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)	\$	\$84,796.86
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)	Show + or (-)	\$0.00
7. Net adjustments this period (Combine line 5 & 6)	Show + or (-)	\$0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)		\$84,796.86
9. Total pledge payments due (From line 2, Schedule B)	\$0.00	

EXPENDITURES

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)		\$48,850.11
11. Total cash expenditures (From line 4, Schedule A)		\$40.00
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)		\$40.00
14. Loan principal repayments made (From line 2, Schedule L)		\$0.00
15. Corrections (From line 2 or 3, Schedule C)	Show + or (-)	\$0.00
16. Net adjustments this period (Combine lines 14 & 15)	Show + or (-)	\$0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)		\$48,890.11

CANDIDATES ONLY <table style="width:100%;"> <tr> <th></th> <th>Won</th> <th>Lost</th> <th>Unopposed</th> <th>Name not on ballot</th> </tr> <tr> <td>Primary election</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> <tr> <td>General election</td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> <td><input type="checkbox"/></td> </tr> </table> Treasurer's Daytime Telephone No.: (206) 682-7328		Won	Lost	Unopposed	Name not on ballot	Primary election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	General election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CASH SUMMARY 18. Cash on hand (Line 8 minus line 17) \$35,906.75 <small>[Line 18 should equal your bank account balance(s) plus your petty cash balance.]</small> 19. Liabilities: (Sum of loans and debts owed) \$0.00 20. Balance (Surplus or deficit) (Line 18 minus line 19) \$35,906.75
	Won	Lost	Unopposed	Name not on ballot												
Primary election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												
General election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>												

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 MYRON "MIKE" KREIDLER	Date 01/10/19	Treasurer's Signature Jay Petterson	Date 01/10/19
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CASH RECEIPTS AND EXPENDITURE

SCHEDULE
to C4

A
(11/93)

2

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

Report Date

MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

12/01/18

12/31/18

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
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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	\$40.00

Total from attached pages \$ **\$0.00**

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ **\$40.00**

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4
(3/97)

PDC OFFICE USE
 100883584
 02-07-2019

Candidate or Committee Name (Do not abbreviate. Include full name) MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)			
Mailing Address PO Box 15017		City Tumwater, WA	
Zip + 4 98511-5017	Office Sought (Candidates) INSURANCE COMMISSIONER	Election Date 2020	*For PACs, Parties & Caucus Committees: During this report period, did the committee make an <u>independent expenditure</u> (i.e., an expense not considered a contribution) <u>supporting or opposing a state or local candidate?</u>
Report Period Covered 01/01/19	To (end of period) 01/31/19	Final Report? Yes No X	

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)				
		\$	\$84,796.86	
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)		Show + or (-)	\$0.00	
7. Net adjustments this period (Combine line 5 & 6)		Show + or (-)	\$0.00	
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)			\$84,796.86	
9. Total pledge payments due (From line 2, Schedule B)		\$0.00		

EXPENDITURES	
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)	
\$48,890.11	
11. Total cash expenditures (From line 4, Schedule A)	
\$600.67	
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)	
\$600.67	
14. Loan principal repayments made (From line 2, Schedule L)	
\$0.00	
15. Corrections (From line 2 or 3, Schedule C)	
Show + or (-)	
\$0.00	
16. Net adjustments this period (Combine lines 14 & 15)	
Show + or (-)	
\$0.00	
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)	
\$49,490.78	

CANDIDATES ONLY				CASH SUMMARY	
Won	Lost	Unopposed	Name not on ballot		
Primary election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	18. Cash on hand (Line 8 minus line 17)	
General election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	[Line 18 should equal your bank account balance(s) plus your petty cash balance.]	
Treasurer's Daytime Telephone No.: (206) 682-7328				19. Liabilities: (Sum of loans and debts owed)	
				\$0.00	
				20. Balance (Surplus or deficit) (Line 18 minus line 19)	
				\$35,306.08	

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		Date	
MYRON "MIKE" KREIDLER		02/07/19	
Treasurer's Signature		Date	
Jay Petterson		02/07/19	

CASH RECEIPTS AND EXPENDITURE

SCHEDULE
to C4

A
(11/93)

2

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

Report Date

MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

01/01/19

01/31/19

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	\$184.52
01/08/19	ANNALISA GELLERMANN 5000 Capital Blvd Tumwater, WA 98503		Event Food: Wagner's European Bakery	\$83.82
01/08/19	ANNALISA GELLERMANN 5000 Capital Blvd Tumwater, WA 98503		Event Food: Cherry Street Coffee	\$100.66
01/08/19	ANNALISA GELLERMANN 5000 Capital Blvd Tumwater, WA 98503		Event Food: Wagner's European Bakery	\$173.97
01/08/19	ANNALISA GELLERMANN 5000 Capital Blvd Tumwater, WA 98503		Event Food: WinCo Foods	\$57.70

Total from attached pages \$ **\$0.00**

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ **\$600.67**

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4
(3/97)

PDC OFFICE USE
100896960

04-07-2019

Candidate or Committee Name (Do not abbreviate. Include full name) MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)			
Mailing Address PO Box 15017		City Tumwater, WA	
Zip + 4 98511-5017	Office Sought (Candidates) INSURANCE COMMISSIONER	Election Date 2020	*For PACs, Parties & Caucus Committees: During this report period, did the committee make an <u>independent expenditure</u> (i.e., an expense not considered a contribution) <u>supporting or opposing a state or local candidate?</u>
Report Period Covered From (last C-4) 03/01/19 To (end of period) 03/31/19	Final Report? Yes No X		

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)	\$ \$84,796.86
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)	Show + or (-) \$0.00
7. Net adjustments this period (Combine line 5 & 6)	Show + or (-) \$0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)	\$84,796.86
9. Total pledge payments due (From line 2, Schedule B)	\$0.00

EXPENDITURES

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)	\$49,490.78
11. Total cash expenditures (From line 4, Schedule A)	\$325.00
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)	\$325.00
14. Loan principal repayments made (From line 2, Schedule L)	\$0.00
15. Corrections (From line 2 or 3, Schedule C)	Show + or (-) \$0.00
16. Net adjustments this period (Combine lines 14 & 15)	Show + or (-) \$0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)	\$49,815.78

CANDIDATES ONLY	Won	Lost	Unopposed	Name not on ballot
Primary election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Treasurer's Daytime Telephone No.:
(206) 682-7328

CASH SUMMARY

18. Cash on hand (Line 8 minus line 17)	\$34,981.08
[Line 18 should equal your bank account balance(s) plus your petty cash balance.]	
19. Liabilities: (Sum of loans and debts owed)	\$0.00
20. Balance (Surplus or deficit) (Line 18 minus line 19)	\$34,981.08

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 MYRON "MIKE" KREIDLER	Date 04/07/19	Treasurer's Signature Jay Petterson	Date 04/07/19
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CASH RECEIPTS AND EXPENDITURE

SCHEDULE
to C4

A
(11/93)

2

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

Report Date

MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

03/01/19

03/31/19

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	
03/21/19	DARRYL COLEMAN PO Box 40255 Olympia, WA 98504		Team Sponsorship Reimbursement: State Agency Softball League	\$325.00

Total from attached pages \$ **\$0.00**

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ **\$325.00**

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4
(3/97)

PDC OFFICE USE
100903071

05-10-2019

Candidate or Committee Name (Do not abbreviate. Include full name) MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)			
Mailing Address PO Box 15017		City Tumwater, WA	
Zip + 4 98511-5017	Office Sought (Candidates) INSURANCE COMMISSIONER	Election Date 2020	*For PACs, Parties & Caucus Committees: During this report period, did the committee make an <u>independent expenditure</u> (i.e., an expense not considered a contribution) <u>supporting or opposing a state or local candidate?</u>
Report Period Covered From (last C-4) 04/01/19 To (end of period) 04/30/19	Final Report? Yes No X		

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)	\$ \$84,796.86
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)	Show + or (-) \$0.00
7. Net adjustments this period (Combine line 5 & 6)	Show + or (-) \$0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)	\$84,796.86
9. Total pledge payments due (From line 2, Schedule B)	\$0.00

EXPENDITURES

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)	\$49,815.78
11. Total cash expenditures (From line 4, Schedule A)	\$291.01
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)	\$291.01
14. Loan principal repayments made (From line 2, Schedule L)	\$0.00
15. Corrections (From line 2 or 3, Schedule C)	Show + or (-) \$0.00
16. Net adjustments this period (Combine lines 14 & 15)	Show + or (-) \$0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)	\$50,106.79

CANDIDATES ONLY	Won	Lost	Unopposed	Name not on ballot
Primary election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Treasurer's Daytime Telephone No.:
(206) 682-7328

CASH SUMMARY

18. Cash on hand (Line 8 minus line 17)	\$34,690.07
[Line 18 should equal your bank account balance(s) plus your petty cash balance.]	
19. Liabilities: (Sum of loans and debts owed)	\$0.00
20. Balance (Surplus or deficit) (Line 18 minus line 19)	\$34,690.07

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 MYRON "MIKE" KREIDLER	Date 05/10/19	Treasurer's Signature Jay Petterson	Date 05/10/19
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CASH RECEIPTS AND EXPENDITURE

SCHEDULE
to C4

A
(11/93)

2

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

Report Date

MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds)

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 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	\$91.21
04/23/19	MYRON "MIKE" B KREIDLER PO Box 15017 Tumwater, WA 98511		Staff Meal Reimbursement: Anthony's Restaurant, Olympia WA	\$115.64
04/30/19	MELANIE ANDERSON 1740 SW Grandview Ave Chehalis, WA 98532		Beverages: Costco	\$84.16

Total from attached pages \$ **\$0.00**

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ **\$291.01**

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4

(3/97)

PDC OFFICE USE

100907757

06-06-2019

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

(Mike Kreidler Surplus Funds)

Mailing Address

PO Box 15017

City

Tumwater, WA

Zip + 4

98511

Office Sought (Candidates)

INSURANCE COMMISSIONER

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)

05/01/19

To (end of period)

05/31/19

Final Report?

Yes No **X**

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)	\$	\$84,796.86
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)	Show + or (-)	\$0.00
7. Net adjustments this period (Combine line 5 & 6)	Show + or (-)	\$0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)		\$84,796.86
9. Total pledge payments due (From line 2, Schedule B)	\$0.00	

EXPENDITURES

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)		\$50,106.79
11. Total cash expenditures (From line 4, Schedule A)		\$143.00
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)		\$143.00
14. Loan principal repayments made (From line 2, Schedule L)		\$0.00
15. Corrections (From line 2 or 3, Schedule C)	Show + or (-)	\$0.00
16. Net adjustments this period (Combine lines 14 & 15)	Show + or (-)	\$0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)		\$50,249.79

CANDIDATES ONLY

Name not

Won

Lost

Unopposed

on ballot

Primary election

☐
☐
☐
☐

General election

☐
☐
☐
☐

Treasurer's Daytime Telephone No.:

(206) 682-7328

CASH SUMMARY

18. Cash on hand (Line 8 minus line 17)	\$34,547.07
[Line 18 should equal your bank account balance(s) plus your petty cash balance.]	
19. Liabilities: (Sum of loans and debts owed)	\$0.00
20. Balance (Surplus or deficit) (Line 18 minus line 19)	\$34,547.07

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

Date

MIKE KREIDLER SURPLUS FUNDS

06/06/19

Treasurer's Signature

Date

Josie Olsen Petterson

06/06/19

CASH RECEIPTS AND EXPENDITURE

SCHEDULE
to C4

A
(11/93)

2

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

Report Date

(Mike Kreidler Surplus Funds)

05/01/19

05/31/19

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	
05/17/19	MYRON "MIKE" B KREIDLER PO Box 15017 Tumwater, WA 98511		Meals: Hank's Capitol Hill, Washington DC	\$143.00

4. TOTAL CASH EXPENDITURES

Total from attached pages \$ **\$0.00**

Enter also on line 11 of C4 \$ **\$143.00**

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4
(3/97)

PDC OFFICE USE

100934852

10-05-2019

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

(Mike Kreidler Surplus Funds)

Mailing Address

PO Box 15017

City

Tumwater, WA

Zip + 4

98511

Office Sought (Candidates)

INSURANCE COMMISSIONER

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)

09/01/19

To (end of period)

09/30/19

Final Report?

Yes No **X**

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)	\$	\$84,796.86
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)	Show + or (-)	\$0.00
7. Net adjustments this period (Combine line 5 & 6)	Show + or (-)	\$0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)		\$84,796.86
9. Total pledge payments due (From line 2, Schedule B)	\$0.00	

EXPENDITURES

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)		\$50,249.79
11. Total cash expenditures (From line 4, Schedule A)		\$48.45
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)		\$48.45
14. Loan principal repayments made (From line 2, Schedule L)		\$0.00
15. Corrections (From line 2 or 3, Schedule C)	Show + or (-)	\$0.00
16. Net adjustments this period (Combine lines 14 & 15)	Show + or (-)	\$0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)		\$50,298.24

CANDIDATES ONLY

Name not

Won

Lost

Unopposed

on ballot

Primary election

☐
☐
☐
☐

General election

☐
☐
☐
☐

Treasurer's Daytime Telephone No.:

(206) 682-7328

CASH SUMMARY

18. Cash on hand (Line 8 minus line 17)	\$34,498.62
[Line 18 should equal your bank account balance(s) plus your petty cash balance.]	
19. Liabilities: (Sum of loans and debts owed)	\$0.00
20. Balance (Surplus or deficit) (Line 18 minus line 19)	\$34,498.62

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

Date

MIKE KREIDLER SURPLUS FUNDS

10/05/19

Treasurer's Signature

Date

Josie Olsen

10/05/19

CASH RECEIPTS AND EXPENDITURE

SCHEDULE
to C4

A
(11/93)

2

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

Report Date

(Mike Kreidler Surplus Funds)

09/01/19

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 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	\$48.45

Total from attached pages \$ **\$0.00**

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ **\$48.45**

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4
(3/97)

PDC OFFICE USE
 100956995
 02-10-2020

Candidate or Committee Name (Do not abbreviate. Include full name) (Mike Kreidler Surplus Funds)			
Mailing Address PO Box 15017		City Tumwater, WA	
Zip + 4 98511	Office Sought (Candidates) INSURANCE COMMISSIONER	Election Date 2020	*For PACs, Parties & Caucus Committees: During this report period, did the committee make an <u>independent expenditure</u> (i.e., an expense not considered a contribution) <u>supporting or opposing a state or local candidate?</u>
Report Period Covered 01/01/20	To (end of period) 01/31/20	Final Report? Yes No X	

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)	\$	\$84,796.86
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)	Show + or (-)	\$0.00
7. Net adjustments this period (Combine line 5 & 6)	Show + or (-)	\$0.00
8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7)		\$84,796.86
9. Total pledge payments due (From line 2, Schedule B)	\$0.00	

EXPENDITURES

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)		\$50,298.24
11. Total cash expenditures (From line 4, Schedule A)		\$917.05
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)		\$917.05
14. Loan principal repayments made (From line 2, Schedule L)		\$0.00
15. Corrections (From line 2 or 3, Schedule C)	Show + or (-)	\$0.00
16. Net adjustments this period (Combine lines 14 & 15)	Show + or (-)	\$0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)		\$51,215.29

CANDIDATES ONLY	Won	Lost	Unopposed	Name not on ballot
Primary election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
General election	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Treasurer's Daytime Telephone No.:
(206) 682-7328

CASH SUMMARY

18. Cash on hand (Line 8 minus line 17) <small>[Line 18 should equal your bank account balance(s) plus your petty cash balance.]</small>		\$33,581.57
19. Liabilities: (Sum of loans and debts owed)		\$0.00
20. Balance (Surplus or deficit) (Line 18 minus line 19)		\$33,581.57

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 MIKE KREIDLER SURPLUS FUNDS	Date 02/10/20	Treasurer's Signature Josie Olsen	Date 02/10/20
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CASH RECEIPTS AND EXPENDITURE

SCHEDULE
to C4

A
(11/93)

2

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

Report Date

(Mike Kreidler Surplus Funds)

01/01/20

01/31/20

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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**

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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	
01/06/20	SANDRA MURPHY 2871 Hyland St Dupont, WA 98327		Event Supplies Reimbursement: Sub Vendors TBD	\$330.86
01/06/20	HAILEY HAMILTON 6311 85th Street Ct E Puyallup, WA 98371		Event Supplies Reimbursement: Sub Vendors TBD	\$271.86
01/06/20	ANNALISA GELLERMANN 5000 Capital Blvd Tumwater, WA 98503		Event Supplies Reimbursement: Sub Vendors TBD	\$314.33

Total from attached pages \$ **\$0.00**

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ **\$917.05**