

## 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 Kriedler, 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 Kriedler'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 Kriedler'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

|                     |                |
|---------------------|----------------|
| <b>C4</b><br>(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<br>98511-5017  | Office Sought (Candidates)<br>INSURANCE COMMISSIONER | Election Date<br>2016 |
| Report Period Covered<br>From (last C-4)<br>12/01/15<br>To (end of period)<br>12/31/15 | Final Report?<br>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  |                          |                          |                          | Name not on ballot       |
|------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Won              | Lost                     | Unopposed                |                          |                          |
| 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<br>MYRON "MIKE" KREIDLER | Date<br>01/11/16 | Treasurer's Signature<br>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) 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<br>DEFINITIONS<br>ON NEXT PAGE | C - Contributions (monetary, in-kind & transfers)<br>I - Independent Expenditures<br>L - Literature, Brochures, Printing<br>B - Broadcast Advertising (Radio, TV)<br>N - Newspaper and Periodical Advertising<br>O - Other Advertising (yard signs, buttons, etc.)<br>V - Voter Signature Gathering | P - Postage, Mailing Permits<br>S - Surveys and Polls<br>F - Fundraising Event Expenses<br>T - Travel, Accommodations, Meals<br>M - Management/Consulting Services<br>W - Wages, Salaries, Benefits<br>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<br>PO Box 40256<br>Olympia, WA 98504           |      | Food for employee recognition event      | 126.42 |
| 12/14/15  | JASON SIEMS<br>4821 Forest Glen Ct SE<br>Olympia, WA 98513    |      | Food and supplies                        | 90.31  |
| 12/14/15  | SUE HEDRICK<br>400 17th Ave SE<br>Olympia, WA 98501           |      | food and supplies                        | 146.93 |
| 12/14/15  | JENNIFER KRAFT<br>PO Box 40255<br>Olympia, WA 98504           |      | food and supplies                        | 137.21 |
| 12/24/15  | MYRON "MIKE" B KREIDLER<br>PO Box 15017<br>Tumwater, WA 98511 |      | Staff appreciatin lunch                  | 156.10 |
| 12/14/15  | JENNIFER KRAFT<br>PO Box 40255<br>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

|                     |                |
|---------------------|----------------|
| <b>C4</b><br>(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<br>98511-5017  | Office Sought (Candidates)<br>INSURANCE COMMISSIONER | Election Date<br>2016 |
| Report Period Covered<br>From (last C-4)<br>02/01/16<br>To (end of period)<br>02/29/16 | Final Report?<br>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) ..... |        | 30,821.06 |
| 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                           |                          |                          |                          | Name not on ballot |
|---|--------------------------|--------------------------|--------------------------|--------------------|
| Won                                       | Lost                     | Unopposed                |                          |                    |
| 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) .....                                     | 13,740.80 |
| [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) .....                    | 13,740.80 |

**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<br>MYRON "MIKE" KREIDLER | Date<br>03/10/16 | Treasurer's Signature<br>Jim Odiorne | Date |
|--|------------------|--------------------------------------|------|

# CASH RECEIPTS AND EXPENDITURE

**SCHEDULE**  
 to C4  
A  
(11/93)

Candidate or Committee Name (Do not abbreviate. Use full name.) Report Date  
 MYRON "MIKE" B KREIDLER (Mike Kreidler Surplus Funds) 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<br>DEFINITIONS<br>ON NEXT PAGE | C - Contributions (monetary, in-kind & transfers)<br>I - Independent Expenditures<br>L - Literature, Brochures, Printing<br>B - Broadcast Advertising (Radio, TV)<br>N - Newspaper and Periodical Advertising<br>O - Other Advertising (yard signs, buttons, etc.)<br>V - Voter Signature Gathering | P - Postage, Mailing Permits<br>S - Surveys and Polls<br>F - Fundraising Event Expenses<br>T - Travel, Accommodations, Meals<br>M - Management/Consulting Services<br>W - Wages, Salaries, Benefits<br>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<br>211 21st Ave SW<br>Olympia, WA 98501                         |      | charity donation                      | 30.00  |
| 02/18/16  | GOLDWATER TAPLIN GROUP<br>1555 Palm Beach Lakes Blvd.,<br>West Palm Beach, FL 33401 |      | unreimbursed office expense           | 55.00  |
| 02/18/16  | CENTER FOR CHILDREN & YOUTH<br>615 Second Ave, Suite 275<br>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

|                     |                |
|---------------------|----------------|
| <b>C4</b><br>(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<br>98511-5017                                | Office Sought (Candidates)<br>INSURANCE COMMISSIONER | Election Date<br>2016     |
| Report Period Covered<br>From (last C-4)<br>03/01/16 | To (end of period)<br>03/31/16                       | Final Report?<br>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) ..... |        | 31,056.06 |
| 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) .....  | 12,950.80 |
| <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) .....                                   | 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<br>MYRON "MIKE" KREIDLER | Date<br>04/11/16 | Treasurer's Signature<br>Jim Odiorne | Date |
|--|------------------|--------------------------------------|------|

# CASH RECEIPTS AND EXPENDITURE

**SCHEDULE**  
to C4 **A**  
(11/93)

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

**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<br>DEFINITIONS<br>ON NEXT PAGE | C - Contributions (monetary, in-kind & transfers)<br>I - Independent Expenditures<br>L - Literature, Brochures, Printing<br>B - Broadcast Advertising (Radio, TV)<br>N - Newspaper and Periodical Advertising<br>O - Other Advertising (yard signs, buttons, etc.)<br>V - Voter Signature Gathering | P - Postage, Mailing Permits<br>S - Surveys and Polls<br>F - Fundraising Event Expenses<br>T - Travel, Accommodations, Meals<br>M - Management/Consulting Services<br>W - Wages, Salaries, Benefits<br>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<br>1809 7th Ave, Ste 1500<br>Seattle, WA 98101               |      | Legal Education Seminar contribution  | 150.00 |
| 03/28/16  | STATE AGENCY SOFTBALL LEAGUE<br>PO Box 14062<br>Olympia, WA 98501 |      | league entrance fee                   | 640.00 |
|           |   |      |                                       |        |
|           |   |      |                                       |        |
|           |   |      |                                       |        |
|           |   |      |                                       |        |

4. TOTAL CASH EXPENDITURES Total from attached pages \$ 0.00  
Enter also on line 11 of C4 \$ 790.00

# SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

|                     |                |
|---------------------|----------------|
| <b>C4</b><br>(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<br>98511-5017  | Office Sought (Candidates)<br>INSURANCE COMMISSIONER | Election Date<br>2020 |
| Report Period Covered<br>From (last C-4)<br>07/01/16<br>To (end of period)<br>07/31/16 | Final Report?<br>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  |                          |                          |                          | Name not on ballot       |
|------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Won              | Lost                     | Unopposed                |                          |                          |
| 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 |
| <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) .....                                   | 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<br>MYRON "MIKE" KREIDLER | Date<br>08/10/16 | Treasurer's Signature<br>Jim Odiorne | Date |
|--|------------------|--------------------------------------|------|

# CASH RECEIPTS AND EXPENDITURE

**SCHEDULE**  
 to C4  
A  
(11/93)

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<br>DEFINITIONS<br>ON NEXT PAGE | C - Contributions (monetary, in-kind & transfers)<br>I - Independent Expenditures<br>L - Literature, Brochures, Printing<br>B - Broadcast Advertising (Radio, TV)<br>N - Newspaper and Periodical Advertising<br>O - Other Advertising (yard signs, buttons, etc.)<br>V - Voter Signature Gathering | P - Postage, Mailing Permits<br>S - Surveys and Polls<br>F - Fundraising Event Expenses<br>T - Travel, Accommodations, Meals<br>M - Management/Consulting Services<br>W - Wages, Salaries, Benefits<br>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<br>5000 Capital Blvd<br>Tumwater, WA 98503                      |      | Reimburse for supplies<br>TD&SWD                    | 143.25 |
| 07/15/16  | GOLDWATER TAPLIN GROUP<br>1555 Palm Beach Lakes Blvd.,<br>West Palm Beach, FL 33401 |      | reimburse for unreimbursed<br>office expense - meal | 21.60  |
| 07/07/16  | FIRST CITIZENS BANK<br>Franklin & Legion<br>Olympia, WA 98501                       |      | check printing                                      | 27.65  |
|           |   |      |   |        |
|           |   |      |   |        |
|           |   |      |   |        |

4. TOTAL CASH EXPENDITURES Total from attached pages \$ 0.00  
Enter also on line 11 of C4 \$ 192.50

# SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

|                     |                       |
|---------------------|-----------------------|
| <b>C4</b><br>(3/97) | <b>PDC OFFICE USE</b> |
|                     | 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<br>98511-5017                                | Office Sought (Candidates)<br>INSURANCE COMMISSIONER | Election Date<br>2020     |
| Report Period Covered<br>From (last C-4)<br>08/01/16 | To (end of period)<br>08/31/16                       | Final Report?<br>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                           |                          |                          |  | Name not                 |
|---|--------------------------|--------------------------|--|--------------------------|
| Won                                       | Lost                     | Unopposed                |  | 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<br>MYRON "MIKE" KREIDLER | Date<br>09/12/16 | Treasurer's Signature<br>Jim Odiorne | Date |
|--|------------------|--------------------------------------|------|

# CASH RECEIPTS AND EXPENDITURE

**SCHEDULE**  
to C4 **A**  
(11/93)

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<br>DEFINITIONS<br>ON NEXT PAGE | C - Contributions (monetary, in-kind & transfers)<br>I - Independent Expenditures<br>L - Literature, Brochures, Printing<br>B - Broadcast Advertising (Radio, TV)<br>N - Newspaper and Periodical Advertising<br>O - Other Advertising (yard signs, buttons, etc.)<br>V - Voter Signature Gathering | P - Postage, Mailing Permits<br>S - Surveys and Polls<br>F - Fundraising Event Expenses<br>T - Travel, Accommodations, Meals<br>M - Management/Consulting Services<br>W - Wages, Salaries, Benefits<br>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<br>1555 Palm Beach Lakes Blvd.,<br>West Palm Beach, FL 33401 |      | reimburse for meals                   | 58.86  |
|           |   |      |                                       |        |
|           |   |      |                                       |        |
|           |   |      |                                       |        |
|           |   |      |                                       |        |
|           |   |      |                                       |        |

4. TOTAL CASH EXPENDITURES Total from attached pages \$ 0.00  
Enter also on line 11 of C4 \$ 58.86

# SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

|                     |                |
|---------------------|----------------|
| <b>C4</b><br>(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<br>98511-5017  | Office Sought (Candidates)<br>INSURANCE COMMISSIONER | Election Date<br>2020 |
| Report Period Covered<br>From (last C-4)<br>09/01/16<br>To (end of period)<br>09/30/16 | Final Report?<br>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  |                          |                          |                          | Name not on ballot       |
|------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Won              | Lost                     | Unopposed                |                          |                          |
| 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<br>MYRON "MIKE" KREIDLER | Date<br>10/11/16 | Treasurer's Signature<br>Jim Odiorne | Date |
|--|------------------|--------------------------------------|------|

# 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<br>DEFINITIONS<br>ON NEXT PAGE | C - Contributions (monetary, in-kind & transfers)<br>I - Independent Expenditures<br>L - Literature, Brochures, Printing<br>B - Broadcast Advertising (Radio, TV)<br>N - Newspaper and Periodical Advertising<br>O - Other Advertising (yard signs, buttons, etc.)<br>V - Voter Signature Gathering | P - Postage, Mailing Permits<br>S - Surveys and Polls<br>F - Fundraising Event Expenses<br>T - Travel, Accommodations, Meals<br>M - Management/Consulting Services<br>W - Wages, Salaries, Benefits<br>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<br>P. O. Box 4027<br>Seattle, WA 98194                   |      | replacing voided check 2727           | 4,000.00 |
| 09/05/16  | GOLDWATER TAPLIN GROUP<br>1555 Palm Beach Lakes Blvd.,<br>West Palm Beach, FL 33401 |      | reimburse for meals                   | 59.00    |
| 09/05/16  | GREENBERG TAURIG PA<br>101 College Avenue<br>Tallahassee, FL 32301                  |      | reimbursement for meals               | 52.42    |
| 09/06/16  | FIRST CITIZENS BANK<br>Franklin & Legion<br>Olympia, WA 98501                       |      | STOP PAYMENT CHARGE                   | 35.00    |
| 09/06/16  | USPS<br>900 Jefferson St SE<br>Olympia, WA 98501                                    |      | certified mailing stop payment        | 6.47     |
| 09/26/16  | MYRON "MIKE" B KREIDLER<br>PO Box 15017<br>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



**SUMMARY, FULL REPORT  
 RECEIPTS AND  
 EXPENDITURES**

|                     |                |
|---------------------|----------------|
| <b>C4</b><br>(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<br>98511-5017                                | Office Sought (Candidates)<br>INSURANCE COMMISSIONER | Election Date<br>2020     |
| Report Period Covered<br>From (last C-4)<br>11/01/16 | To (end of period)<br>11/30/16                       | Final Report?<br>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 |
| <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) .....                                   | 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<br>MYRON "MIKE" KREIDLER | Date<br>12/12/16 | Treasurer's Signature<br>Jim Odiorne | Date |
|--|------------------|--------------------------------------|------|

# 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) 11/01/16 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<br>DEFINITIONS<br>ON NEXT PAGE | C - Contributions (monetary, in-kind & transfers)<br>I - Independent Expenditures<br>L - Literature, Brochures, Printing<br>B - Broadcast Advertising (Radio, TV)<br>N - Newspaper and Periodical Advertising<br>O - Other Advertising (yard signs, buttons, etc.)<br>V - Voter Signature Gathering | P - Postage, Mailing Permits<br>S - Surveys and Polls<br>F - Fundraising Event Expenses<br>T - Travel, Accommodations, Meals<br>M - Management/Consulting Services<br>W - Wages, Salaries, Benefits<br>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<br>PO Box 15017<br>Tumwater, WA 98511 |      | reimburse for office related meals    | 42.93  |
| 11/21/16  | MYRON "MIKE" B KREIDLER<br>PO Box 15017<br>Tumwater, WA 98511 |      | reimburse for office related meals    | 19.95  |
|           |   |      |                                       |        |
|           |   |      |                                       |        |
|           |   |      |                                       |        |
|           |   |      |                                       |        |

4. TOTAL CASH EXPENDITURES Total from attached pages \$ 0.00  
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<br>98511-5017                                | Office Sought (Candidates)<br>INSURANCE COMMISSIONER | Election Date<br>2020     | *For PACs, Parties & Caucus Committees: During this report period, did the committee make an <b>independent expenditure</b> (i.e., an expense not considered a contribution supporting or opposing a state or local candidate)? |
| Report Period Covered<br>From (last C-4)<br>12/01/16 | To (end of period)<br>12/31/16                       | Final Report?<br>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) ..... |  | 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"/> |

**CASH SUMMARY**

|  |          |
|--|----------|
| 18. Cash on hand (Line 8 minus line 17) .....  | 7,652.62 |
| <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) .....                                   | 7,652.62 |

**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<br>MYRON "MIKE" KREIDLER | Date<br>01/10/17 | Treasurer's Signature<br>Jim Odiorne | Date |
|--|------------------|--------------------------------------|------|

# 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) 12/01/16 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<br>(Name and Address)                     | Code | Purpose of Expense<br>and/or Description | Amount |
|-----------|---|------|--|--------|
| N/A       | Expenses of \$50 or less                                      | N/A  | N/A                                      |        |
| 12/18/16  | MYRON "MIKE" B KREIDLER<br>PO Box 15017<br>Tumwater, WA 98511 |      | reimburse for staff meals at<br>NAIC     | 311.15 |
| 12/18/16  | SUE HEDRICK<br>400 17th Ave SE<br>Olympia, WA 98501           |      | staff celebration<br>reimbursement       | 14.56  |
| 12/18/16  | SUSAN MILLER<br>5000 Capitol Blvd<br>Tumwater, WA 98503       |      | staff celebration<br>reimbursement       | 22.95  |
| 12/18/16  | JENNIFER KRAFT<br>PO Box 40255<br>Olympia, WA 98504           |      | staff celebration<br>reimbursement       | 91.76  |
| 12/18/16  | MOLLY NOLLETTE<br>5000 Capitol Blvd<br>Tumwater, WA 98503     |      | reimbursement for Barclay<br>retirement  | 100.19 |
| 12/27/16  | MYRON "MIKE" B KREIDLER<br>PO Box 15017<br>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

|                     |                |
|---------------------|----------------|
| <b>C4</b><br>(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<br>98511-5017                                | Office Sought (Candidates)<br>INSURANCE COMMISSIONER | Election Date<br>2020     |
| Report Period Covered<br>From (last C-4)<br>03/01/17 | To (end of period)<br>03/31/17                       | Final Report?<br>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) ..... |        | 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 |
| <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) .....                                   | 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<br>MYRON "MIKE" KREIDLER | Date<br>04/10/17 | Treasurer's Signature<br>Jim Odiorne | Date |
|--|------------------|--------------------------------------|------|

# 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) 03/01/17 03/31/17

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<br>DEFINITIONS<br>ON NEXT PAGE | C - Contributions (monetary, in-kind & transfers)<br>I - Independent Expenditures<br>L - Literature, Brochures, Printing<br>B - Broadcast Advertising (Radio, TV)<br>N - Newspaper and Periodical Advertising<br>O - Other Advertising (yard signs, buttons, etc.)<br>V - Voter Signature Gathering | P - Postage, Mailing Permits<br>S - Surveys and Polls<br>F - Fundraising Event Expenses<br>T - Travel, Accommodations, Meals<br>M - Management/Consulting Services<br>W - Wages, Salaries, Benefits<br>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<br>(Name and Address)                                     | Code | Purpose of Expense<br>and/or Description | Amount |
|-----------|---|------|--|--------|
| N/A       | Expenses of \$50 or less  | N/A  | N/A                                      |        |
| 03/06/17  | MYRON "MIKE" B KREIDLER<br>PO Box 15017<br>Tumwater, WA 98511                 |      | unreimbursed meal - 2/21/17              | 18.56  |
| 03/06/17  | CENTER FOR CHILDREN & YOUTH<br>615 Second Ave, Suite 275<br>Seattle, WA 98104 |      | donation - award breakfast               | 300.00 |
|           |   |      |  |        |
|           |   |      |  |        |
|           |   |      |  |        |
|           |   |      |  |        |

4. TOTAL CASH EXPENDITURES Total from attached pages \$ 0.00  
Enter also on line 11 of C4 \$ 318.56

# SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

|                     |                |
|---------------------|----------------|
| <b>C4</b><br>(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<br>98511-5017                                | Office Sought (Candidates)<br>INSURANCE COMMISSIONER | Election Date<br>2020     |
| Report Period Covered<br>From (last C-4)<br>04/01/17 | To (end of period)<br>04/30/17                       | Final Report?<br>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) ..... |        | 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                    |                          |                          |                          | Name not on ballot       |
|------------------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Won                                | Lost                     | Unopposed                |                          |                          |
| 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 |
| <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) .....                                   | 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<br>MYRON "MIKE" KREIDLER | Date<br>05/10/17 | Treasurer's Signature<br>Jim Odiorne | Date |
|--|------------------|--------------------------------------|------|

# CASH RECEIPTS AND EXPENDITURE

**SCHEDULE A**  
to C4  
(11/93)

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<br>DEFINITIONS<br>ON NEXT PAGE | C - Contributions (monetary, in-kind & transfers)<br>I - Independent Expenditures<br>L - Literature, Brochures, Printing<br>B - Broadcast Advertising (Radio, TV)<br>N - Newspaper and Periodical Advertising<br>O - Other Advertising (yard signs, buttons, etc.)<br>V - Voter Signature Gathering | P - Postage, Mailing Permits<br>S - Surveys and Polls<br>F - Fundraising Event Expenses<br>T - Travel, Accommodations, Meals<br>M - Management/Consulting Services<br>W - Wages, Salaries, Benefits<br>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<br>PO Box 15017<br>Tumwater, WA 98511     |      | unreimbursed mean 3/17/17               | 36.83  |
| 04/02/17  | STATE AGENCY SOFTBALL LEAGUE<br>PO Box 14062<br>Olympia, WA 98501 |      | registratin fee for agency softball tam | 655.00 |
|           |   |      |   |        |
|           |   |      |   |        |
|           |   |      |   |        |
|           |   |      |   |        |

4. TOTAL CASH EXPENDITURES Total from attached pages \$ 0.00  
Enter also on line 11 of C4 \$ 691.83

# SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

|                     |                |
|---------------------|----------------|
| <b>C4</b><br>(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<br>98511-5017                                | Office Sought (Candidates)<br>INSURANCE COMMISSIONER | Election Date<br>2020     |
| Report Period Covered<br>From (last C-4)<br>05/01/17 | To (end of period)<br>05/31/17                       | Final Report?<br>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) ..... |        | 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  |                          |                          |                          | Name not on ballot       |
|------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Won              | Lost                     | Unopposed                |                          |                          |
| 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) .....                                     | 45,705.23 |
| [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) .....                    | 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<br>MYRON "MIKE" KREIDLER | Date<br>06/12/17 | Treasurer's Signature<br>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) 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<br>DEFINITIONS<br>ON NEXT PAGE | C - Contributions (monetary, in-kind & transfers)<br>I - Independent Expenditures<br>L - Literature, Brochures, Printing<br>B - Broadcast Advertising (Radio, TV)<br>N - Newspaper and Periodical Advertising<br>O - Other Advertising (yard signs, buttons, etc.)<br>V - Voter Signature Gathering | P - Postage, Mailing Permits<br>S - Surveys and Polls<br>F - Fundraising Event Expenses<br>T - Travel, Accommodations, Meals<br>M - Management/Consulting Services<br>W - Wages, Salaries, Benefits<br>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<br>PO Box 15017<br>Tumwater, WA 98511 |      | unreimbursed staff appreciation dinner at Denver NAIC | 402.80 |
|           |   |      |   |        |
|           |   |      |   |        |
|           |   |      |   |        |
|           |   |      |   |        |
|           |   |      |   |        |
|           |   |      |   |        |

4. TOTAL CASH EXPENDITURES Total from attached pages \$ 0.00  
Enter also on line 11 of C4 \$ 402.80

# SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

|                     |                |
|---------------------|----------------|
| <b>C4</b><br>(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<br>98511-5017                                | Office Sought (Candidates)<br>INSURANCE COMMISSIONER | Election Date<br>2020     |
| Report Period Covered<br>From (last C-4)<br>06/01/17 | To (end of period)<br>06/30/17                       | Final Report?<br>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) ..... |          | 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<br>MYRON "MIKE" KREIDLER | Date<br>07/10/17 | Treasurer's Signature<br>Jim Odiorne | Date |
|--|------------------|--------------------------------------|------|

# 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<br>DEFINITIONS<br>ON NEXT PAGE | C - Contributions (monetary, in-kind & transfers)<br>I - Independent Expenditures<br>L - Literature, Brochures, Printing<br>B - Broadcast Advertising (Radio, TV)<br>N - Newspaper and Periodical Advertising<br>O - Other Advertising (yard signs, buttons, etc.)<br>V - Voter Signature Gathering | P - Postage, Mailing Permits<br>S - Surveys and Polls<br>F - Fundraising Event Expenses<br>T - Travel, Accommodations, Meals<br>M - Management/Consulting Services<br>W - Wages, Salaries, Benefits<br>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<br>(Name and Address)                        | Code | Purpose of Expense<br>and/or Description | Amount |
|-----------|--|------|--|--------|
| N/A       | Expenses of \$50 or less   | N/A  | N/A                                      |        |
| 06/01/17  | ANTHONY'S HOME PORT<br>704 Columbia St NW<br>Olympia, WA 98501   |      | Deposit - staff appreciation dinner      | 100.00 |
| 06/12/17  | MYRON "MIKE" B KREIDLER<br>PO Box 15017<br>Tumwater, WA 98511    |      | reimburse for meal at Panorama event     | 18.70  |
| 06/19/17  | MYRON "MIKE" B KREIDLER<br>PO Box 15017<br>Tumwater, WA 98511    |      | Flowers for John Adams                   | 121.11 |
| 06/20/17  | ANTHONY'S HOME PORT<br>704 Columbia St NW<br>Olympia, WA 98501   |      | balance on staff appreciation dinner     | 717.36 |
| 06/27/17  | MYRON "MIKE" B KREIDLER<br>PO Box 15017<br>Tumwater, WA 98511    |      | reimburse meal with Pomeroy              | 25.00  |
| 06/27/17  | CAMBIA HEALTH SOLUTIONS<br>100 SW Market St<br>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



# SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

|                     |                |
|---------------------|----------------|
| <b>C4</b><br>(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<br>98511-5017                                | Office Sought (Candidates)<br>INSURANCE COMMISSIONER | Election Date<br>2020     |
| Report Period Covered<br>From (last C-4)<br>08/01/17 | To (end of period)<br>08/31/17                       | Final Report?<br>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<br>MYRON "MIKE" KREIDLER | Date<br>09/11/17 | Treasurer's Signature<br>Jim Odiorne | Date |
|--|------------------|--------------------------------------|------|

# CASH RECEIPTS AND EXPENDITURE

**SCHEDULE A**  
 to C4  
(11/93)

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<br>DEFINITIONS<br>ON NEXT PAGE | C - Contributions (monetary, in-kind & transfers)<br>I - Independent Expenditures<br>L - Literature, Brochures, Printing<br>B - Broadcast Advertising (Radio, TV)<br>N - Newspaper and Periodical Advertising<br>O - Other Advertising (yard signs, buttons, etc.)<br>V - Voter Signature Gathering | P - Postage, Mailing Permits<br>S - Surveys and Polls<br>F - Fundraising Event Expenses<br>T - Travel, Accommodations, Meals<br>M - Management/Consulting Services<br>W - Wages, Salaries, Benefits<br>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<br>PO Box 15017<br>Tumwater, WA 98511 |      | reimburse for softball team appreciation | 149.61 |
| 08/28/17  | DENNY HECK FOR CONGRESS<br>P. o. Box 235<br>Olympia, WA 98507 |      | contribution to other campaign           | 500.00 |
|           |   |      |  |        |
|           |   |      |  |        |
|           |   |      |  |        |
|           |   |      |  |        |

4. TOTAL CASH EXPENDITURES Total from attached pages \$ 0.00  
Enter also on line 11 of C4 \$ 649.61

# SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

|                     |                |
|---------------------|----------------|
| <b>C4</b><br>(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<br>98511-5017                                | Office Sought (Candidates)<br>INSURANCE COMMISSIONER | Election Date<br>2020     |
| Report Period Covered<br>From (last C-4)<br>09/01/17 | To (end of period)<br>09/30/17                       | Final Report?<br>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  |                          |                          |                          | Name not on ballot       |
|------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Won              | Lost                     | Unopposed                |                          |                          |
| 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<br>MYRON "MIKE" KREIDLER | Date<br>10/10/17 | Treasurer's Signature<br>Jim Odiorne | Date |
|--|------------------|--------------------------------------|------|

# 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<br>DEFINITIONS<br>ON NEXT PAGE | C - Contributions (monetary, in-kind & transfers)<br>I - Independent Expenditures<br>L - Literature, Brochures, Printing<br>B - Broadcast Advertising (Radio, TV)<br>N - Newspaper and Periodical Advertising<br>O - Other Advertising (yard signs, buttons, etc.)<br>V - Voter Signature Gathering | P - Postage, Mailing Permits<br>S - Surveys and Polls<br>F - Fundraising Event Expenses<br>T - Travel, Accommodations, Meals<br>M - Management/Consulting Services<br>W - Wages, Salaries, Benefits<br>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<br>(Name and Address)                     | Code | Purpose of Expense<br>and/or Description   | Amount |
|-----------|---|------|--|--------|
| N/A       | Expenses of \$50 or less                                      | N/A  | N/A  |        |
| 09/18/17  | JENNIFER KRAFT<br>PO Box 40255<br>Olympia, WA 98504           |      | reimburse - gifts for WZ2017               | 637.00 |
| 09/26/17  | JENNIFER KRAFT<br>PO Box 40255<br>Olympia, WA 98504           |      | reimburse - gifts for WZ2017               | 677.26 |
| 09/26/17  | MYRON "MIKE" B KREIDLER<br>PO Box 15017<br>Tumwater, WA 98511 |      | reimburse food costs at<br>State of Reform | 12.00  |
|           |   |      |  |        |
|           |   |      |  |        |
|           |   |      |  |        |

4. TOTAL CASH EXPENDITURES Total from attached pages \$ 0.00  
Enter also on line 11 of C4 \$ 1,326.26



# CASH RECEIPTS AND EXPENDITURE

**SCHEDULE A**  
 to C4  
(11/93)

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<br>DEFINITIONS<br>ON NEXT PAGE | C - Contributions (monetary, in-kind & transfers)<br>I - Independent Expenditures<br>L - Literature, Brochures, Printing<br>B - Broadcast Advertising (Radio, TV)<br>N - Newspaper and Periodical Advertising<br>O - Other Advertising (yard signs, buttons, etc.)<br>V - Voter Signature Gathering | P - Postage, Mailing Permits<br>S - Surveys and Polls<br>F - Fundraising Event Expenses<br>T - Travel, Accommodations, Meals<br>M - Management/Consulting Services<br>W - Wages, Salaries, Benefits<br>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<br>PO Box 40255<br>Olympia, WA 98504 |      | reimburse - gifts for WZ2017          | 61.18  |
|           |   |      |                                       |        |
|           |   |      |                                       |        |
|           |   |      |                                       |        |
|           |   |      |                                       |        |
|           |   |      |                                       |        |
|           |   |      |                                       |        |

4. TOTAL CASH EXPENDITURES Total from attached pages \$ 0.00  
Enter also on line 11 of C4 \$ 61.18

# SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

|                     |                |
|---------------------|----------------|
| <b>C4</b><br>(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<br>98511-5017                                | Office Sought (Candidates)<br>INSURANCE COMMISSIONER | Election Date<br>2020     |
| Report Period Covered<br>From (last C-4)<br>11/01/17 | To (end of period)<br>11/30/17                       | Final Report?<br>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   |                          |                          |                          | Name not                 |
|---|--------------------------|--------------------------|--------------------------|--------------------------|
|   | Won                      | Lost                     | Unopposed                | 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"/> |
| <b>Treasurer's Daytime Telephone No.:</b><br>(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<br>MYRON "MIKE" KREIDLER | Date<br>12/11/17 | Treasurer's Signature<br>Jim Odiorne | Date |
|--|------------------|--------------------------------------|------|

# CASH RECEIPTS AND EXPENDITURE

**SCHEDULE A**  
 to C4  
(11/93)

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<br>DEFINITIONS<br>ON NEXT PAGE | C - Contributions (monetary, in-kind & transfers)<br>I - Independent Expenditures<br>L - Literature, Brochures, Printing<br>B - Broadcast Advertising (Radio, TV)<br>N - Newspaper and Periodical Advertising<br>O - Other Advertising (yard signs, buttons, etc.)<br>V - Voter Signature Gathering | P - Postage, Mailing Permits<br>S - Surveys and Polls<br>F - Fundraising Event Expenses<br>T - Travel, Accommodations, Meals<br>M - Management/Consulting Services<br>W - Wages, Salaries, Benefits<br>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<br>(Name and Address)                     | Code | Purpose of Expense<br>and/or Description | Amount |
|-----------|---|------|--|--------|
| N/A       | Expenses of \$50 or less                                      | N/A  | N/A                                      |        |
| 11/10/17  | MYRON "MIKE" B KREIDLER<br>PO Box 15017<br>Tumwater, WA 98511 |      | reimburse for meal in KL                 | 73.51  |
|           |   |      |  |        |
|           |   |      |  |        |
|           |   |      |  |        |
|           |   |      |  |        |
|           |   |      |  |        |
|           |   |      |  |        |
|           |   |      |  |        |

4. TOTAL CASH EXPENDITURES Total from attached pages \$ 0.00  
Enter also on line 11 of C4 \$ 73.51

**SUMMARY, FULL REPORT  
 RECEIPTS AND  
 EXPENDITURES**

|                     |                |
|---------------------|----------------|
| <b>C4</b><br>(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<br><b>98511-5017</b>   | Office Sought (Candidates)<br><b>INSURANCE COMMISSIONER</b> | Election Date<br><b>2020</b> |
| Report Period Covered<br>From (last C-4) <b>12/01/17</b><br>To (end of period) <b>12/31/17</b> | Final Report?<br>Yes No <b>X</b>                            |                              |

**\*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) ..... | \$             |     | <b>\$84,796.86</b> |
| 2. Cash received (From line 2, Schedule A) .....   | \$             |     | <b>\$0.00</b>      |
| 3. In kind contributions received (From line 1, Schedule B) .....  |                |     | <b>\$0.00</b>      |
| 4. Total cash and in kind contributions received this period (Line 2 plus 3) .....   |                |     | <b>\$0.00</b>      |
| 5. Loan principal repayments made (From line 2, Schedule L) .....  |                |     | <b>\$0.00</b>      |
| 6. Corrections (From line 1 or 3, Schedule C) .....  |                |     | <b>\$0.00</b>      |
| 7. Net adjustments this period (Combine line 5 & 6) .....  |                |     | <b>\$0.00</b>      |
| 8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7) .....   |                |     | <b>\$84,796.86</b> |
| 9. Total pledge payments due (From line 2, Schedule B) .....   |                |     | <b>\$0.00</b>      |

| 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) ..... |                   | <b>\$42,527.40</b> |
| 11. Total cash expenditures (From line 4, Schedule A) .....   | <b>\$1,392.99</b> |                    |
| 12. In kind expenditures (goods & services) (From line 1, Schedule B) .....   | <b>\$0.00</b>     |                    |
| 13. Total cash and in kind expenditures made this period (Line 11 plus line 12) .....   |                   | <b>\$1,392.99</b>  |
| 14. Loan principal repayments made (From line 2, Schedule L) .....  | <b>\$0.00</b>     |                    |
| 15. Corrections (From line 2 or 3, Schedule C) .....  |                   | <b>\$0.00</b>      |
| 16. Net adjustments this period (Combine lines 14 & 15) .....   |                   | <b>\$0.00</b>      |
| 17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16) .....   |                   | <b>\$43,920.39</b> |

**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) .....  | <b>\$40,876.47</b> |
| <small>[Line 18 should equal your bank account balance(s) plus your petty cash balance.]</small> |                    |
| 19. Liabilities: (Sum of loans and debts owed) .....   | <b>\$0.00</b>      |
| 20. Balance (Surplus or deficit) (Line 18 minus line 19) .....                                   | <b>\$40,876.47</b> |

**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<br><b>MYRON "MIKE" KREIDLER</b> | Date<br><b>01/08/18</b> | Treasurer's Signature<br><b>Jim Odiorne</b> | Date<br><b>01/08/18</b> |
|---|-------------------------|---|-------------------------|

# 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<br>(Name and Address)  | Code | Purpose of Expense<br>and/or Description      | Amount   |
|-----------|--|------|---|----------|
| N/A       | Expenses of \$50 or less   | N/A  | N/A   |          |
| 12/26/17  | NELSON - TAPLIN-GOLDWATER<br>1555 Palm Beach Lakes Blvd Ste<br>West Palm Beach, FL 33401 |      | reimburse for dinner in<br>Honolulu           | \$75.00  |
| 12/26/17  | MYRON "MIKE" B KREIDLER<br>PO Box 15017<br>Tumwater, WA 98511                            |      | reimburse for staff<br>appreciation dinner    | \$807.32 |
| 12/26/17  | SUE HEDRICK<br>400 17th Ave SE<br>Olympia, WA 98501                                      |      | reimburse for staff holiday<br>party expenses | \$222.82 |
| 12/26/17  | JENNIFER KRAFT<br>PO Box 40255<br>Olympia, WA 98504                                      |      | reimburse for staff holiday<br>party expenses | \$247.85 |
| 12/14/17  | NELSON - TAPLIN-GOLDWATER<br>1555 Palm Beach Lakes Blvd Ste<br>West Palm Beach, FL 33401 |      | reimburse for dinner in<br>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

|                     |                |
|---------------------|----------------|
| <b>C4</b><br>(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<br><b>98511-5017</b>   | Office Sought (Candidates)<br><b>INSURANCE COMMISSIONER</b> | Election Date<br><b>2020</b> |
| Report Period Covered<br>From (last C-4) <b>01/01/18</b><br>To (end of period) <b>01/31/18</b> | Final Report?<br>Yes No <b>X</b>                            |                              |

**\*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) ..... | \$             |               | <b>\$84,796.86</b> |
| 2. Cash received (From line 2, Schedule A) .....   | \$             |               | <b>\$0.00</b>      |
| 3. In kind contributions received (From line 1, Schedule B) .....  |                |               | <b>\$0.00</b>      |
| 4. Total cash and in kind contributions received this period (Line 2 plus 3) .....   |                |               | <b>\$0.00</b>      |
| 5. Loan principal repayments made (From line 2, Schedule L) .....  |                |               | <b>\$0.00</b>      |
| 6. Corrections (From line 1 or 3, Schedule C) .....  |                | Show + or (-) | <b>\$0.00</b>      |
| 7. Net adjustments this period (Combine line 5 & 6) .....  |                | Show + or (-) | <b>\$0.00</b>      |
| 8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7) .....   |                |               | <b>\$84,796.86</b> |
| 9. Total pledge payments due (From line 2, Schedule B) .....   |                |               | <b>\$0.00</b>      |

| 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) ..... |                 | <b>\$43,920.39</b>          |
| 11. Total cash expenditures (From line 4, Schedule A) .....   | <b>\$223.92</b> |                             |
| 12. In kind expenditures (goods & services) (From line 1, Schedule B) .....   | <b>\$0.00</b>   |                             |
| 13. Total cash and in kind expenditures made this period (Line 11 plus line 12) .....   |                 | <b>\$223.92</b>             |
| 14. Loan principal repayments made (From line 2, Schedule L) .....  | <b>\$0.00</b>   |                             |
| 15. Corrections (From line 2 or 3, Schedule C) .....  |                 | Show + or (-) <b>\$0.00</b> |
| 16. Net adjustments this period (Combine lines 14 & 15) .....   |                 | Show + or (-) <b>\$0.00</b> |
| 17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16) .....   |                 | <b>\$44,144.31</b>          |

**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) .....  | <b>\$40,652.55</b> |
| <small>[Line 18 should equal your bank account balance(s) plus your petty cash balance.]</small> |                    |
| 19. Liabilities: (Sum of loans and debts owed) .....   | <b>\$0.00</b>      |
| 20. Balance (Surplus or deficit) (Line 18 minus line 19) .....                                   | <b>\$40,652.55</b> |

**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<br><b>MYRON "MIKE" KREIDLER</b> | Date<br><b>02/10/18</b> | Treasurer's Signature<br><b>Jim Odiorne</b> | Date<br><b>02/10/18</b> |
|---|-------------------------|---|-------------------------|

# 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.

|  |   |   |
|--|---|---|
| <b>CODE<br/>DEFINITIONS<br/>ON NEXT PAGE</b> | C - Contributions (monetary, in-kind & transfers)<br>I - Independent Expenditures<br>L - Literature, Brochures, Printing<br>B - Broadcast Advertising (Radio, TV)<br>N - Newspaper and Periodical Advertising<br>O - Other Advertising (yard signs, buttons, etc.)<br>V - Voter Signature Gathering | P - Postage, Mailing Permits<br>S - Surveys and Polls<br>F - Fundraising Event Expenses<br>T - Travel, Accommodations, Meals<br>M - Management/Consulting Services<br>W - Wages, Salaries, Benefits<br>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<br>(Name and Address)                     | Code | Purpose of Expense<br>and/or Description | Amount   |
|-----------|---|------|--|----------|
| N/A       | Expenses of \$50 or less                                      | N/A  | N/A                                      |          |
| 01/15/18  | MYRON "MIKE" B KREIDLER<br>PO Box 15017<br>Tumwater, WA 98511 |      | staff lunch meeting Seattle              | \$223.92 |
|           |   |      |  |          |
|           |   |      |  |          |
|           |   |      |  |          |
|           |   |      |  |          |
|           |   |      |  |          |
|           |   |      |  |          |
|           |   |      |  |          |

4. TOTAL CASH EXPENDITURES

Total from attached pages \$ **\$0.00**  
Enter also on line 11 of C4 \$ **\$223.92**

**SUMMARY, FULL REPORT  
 RECEIPTS AND  
 EXPENDITURES**

|                     |                |
|---------------------|----------------|
| <b>C4</b><br>(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<br><b>98511-5017</b>   | Office Sought (Candidates)<br><b>INSURANCE COMMISSIONER</b> | Election Date<br><b>2020</b> |
| Report Period Covered<br>From (last C-4) <b>02/01/18</b><br>To (end of period) <b>02/28/18</b> | Final Report?<br>Yes No <b>X</b>                            |                              |

**\*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) ..... | \$             |     | <b>\$84,796.86</b> |
| 2. Cash received (From line 2, Schedule A) .....   | \$             |     | <b>\$0.00</b>      |
| 3. In kind contributions received (From line 1, Schedule B) .....  |                |     | <b>\$0.00</b>      |
| 4. Total cash and in kind contributions received this period (Line 2 plus 3) .....   |                |     | <b>\$0.00</b>      |
| 5. Loan principal repayments made (From line 2, Schedule L) .....  |                |     | <b>\$0.00</b>      |
| 6. Corrections (From line 1 or 3, Schedule C) .....  |                |     | <b>\$0.00</b>      |
| 7. Net adjustments this period (Combine line 5 & 6) .....  |                |     | <b>\$0.00</b>      |
| 8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7) .....   |                |     | <b>\$84,796.86</b> |
| 9. Total pledge payments due (From line 2, Schedule B) .....   | <b>\$0.00</b>  |     |                    |

| 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) ..... | <b>\$44,144.31</b> |
| 11. Total cash expenditures (From line 4, Schedule A) .....   | <b>\$180.93</b>    |
| 12. In kind expenditures (goods & services) (From line 1, Schedule B) .....   | <b>\$0.00</b>      |
| 13. Total cash and in kind expenditures made this period (Line 11 plus line 12) .....   | <b>\$180.93</b>    |
| 14. Loan principal repayments made (From line 2, Schedule L) .....  | <b>\$0.00</b>      |
| 15. Corrections (From line 2 or 3, Schedule C) .....  | <b>\$0.00</b>      |
| 16. Net adjustments this period (Combine lines 14 & 15) .....   | <b>\$0.00</b>      |
| 17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16) .....   | <b>\$44,325.24</b> |

**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) .....  | <b>\$40,471.62</b> |
| <small>[Line 18 should equal your bank account balance(s) plus your petty cash balance.]</small> |                    |
| 19. Liabilities: (Sum of loans and debts owed) .....   | <b>\$0.00</b>      |
| 20. Balance (Surplus or deficit) (Line 18 minus line 19) .....                                   | <b>\$40,471.62</b> |

**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<br><b>MYRON "MIKE" KREIDLER</b> | Date<br><b>03/12/18</b> | Treasurer's Signature<br><b>Jay Petterson</b> | Date<br><b>03/12/18</b> |
|---|-------------------------|---|-------------------------|

# 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)**

**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<br>(Name and Address)                     | Code | Purpose of Expense<br>and/or Description   | Amount   |
|-----------|---|------|--|----------|
| N/A       | Expenses of \$50 or less                                      | N/A  | N/A  | \$110.00 |
| 02/05/18  | MYRON "MIKE" B KREIDLER<br>PO Box 15017<br>Tumwater, WA 98511 |      | Meals: Commissioner Meeting,<br>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**

|                     |                |
|---------------------|----------------|
| <b>C4</b><br>(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<br><b>98511-5017</b>   | Office Sought (Candidates)<br><b>INSURANCE COMMISSIONER</b> | Election Date<br><b>2020</b> |
| Report Period Covered<br>From (last C-4) <b>03/01/18</b><br>To (end of period) <b>03/31/18</b> | Final Report?<br>Yes No <b>X</b>                            |                              |

**\*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) ..... | \$             |     | <b>\$84,796.86</b> |
| 2. Cash received (From line 2, Schedule A) .....   | \$             |     | <b>\$0.00</b>      |
| 3. In kind contributions received (From line 1, Schedule B) .....  |                |     | <b>\$0.00</b>      |
| 4. Total cash and in kind contributions received this period (Line 2 plus 3) .....   |                |     | <b>\$0.00</b>      |
| 5. Loan principal repayments made (From line 2, Schedule L) .....  |                |     | <b>\$0.00</b>      |
| 6. Corrections (From line 1 or 3, Schedule C) .....  |                |     | <b>\$0.00</b>      |
| 7. Net adjustments this period (Combine line 5 & 6) .....  |                |     | <b>\$0.00</b>      |
| 8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7) .....   |                |     | <b>\$84,796.86</b> |
| 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) ..... |                   | <b>\$44,325.24</b> |
| 11. Total cash expenditures (From line 4, Schedule A) .....   | <b>\$1,309.16</b> |                    |
| 12. In kind expenditures (goods & services) (From line 1, Schedule B) .....   | <b>\$0.00</b>     |                    |
| 13. Total cash and in kind expenditures made this period (Line 11 plus line 12) .....   |                   | <b>\$1,309.16</b>  |
| 14. Loan principal repayments made (From line 2, Schedule L) .....  | <b>\$0.00</b>     |                    |
| 15. Corrections (From line 2 or 3, Schedule C) .....  |                   | <b>\$0.00</b>      |
| 16. Net adjustments this period (Combine lines 14 & 15) .....   |                   | <b>\$0.00</b>      |
| 17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16) .....   |                   | <b>\$45,634.40</b> |

**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) .....  | <b>\$39,162.46</b> |
| <small>[Line 18 should equal your bank account balance(s) plus your petty cash balance.]</small> |                    |
| 19. Liabilities: (Sum of loans and debts owed) .....   | <b>\$0.00</b>      |
| 20. Balance (Surplus or deficit) (Line 18 minus line 19) .....                                   | <b>\$39,162.46</b> |

**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<br><b>MYRON "MIKE" KREIDLER</b> | Date<br><b>04/10/18</b> | Treasurer's Signature<br><b>Jay Petterson</b> | Date<br><b>04/10/18</b> |
|---|-------------------------|---|-------------------------|

# CASH RECEIPTS AND EXPENDITURE

**SCHEDULE A**  
to C4  
(11/93)

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.

|  |   |   |
|--|---|---|
| <b>CODE<br/>DEFINITIONS<br/>ON NEXT PAGE</b> | C - Contributions (monetary, in-kind & transfers)<br>I - Independent Expenditures<br>L - Literature, Brochures, Printing<br>B - Broadcast Advertising (Radio, TV)<br>N - Newspaper and Periodical Advertising<br>O - Other Advertising (yard signs, buttons, etc.)<br>V - Voter Signature Gathering | P - Postage, Mailing Permits<br>S - Surveys and Polls<br>F - Fundraising Event Expenses<br>T - Travel, Accommodations, Meals<br>M - Management/Consulting Services<br>W - Wages, Salaries, Benefits<br>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<br>(Name and Address)                         | Code | Purpose of Expense<br>and/or Description | Amount         |
|-----------|---|------|--|----------------|
| N/A       | Expenses of \$50 or less  | N/A  | N/A                                      | <b>\$58.76</b> |
| 03/12/18  | STATE AGENCY SOFTBALL LEAGUE<br>PO Box 14062<br>Olympia, WA 98501 |      | Agency Team Sponsorship                  | \$625.00       |
| 03/28/18  | MYRON "MIKE" B KREIDLER<br>PO Box 15017<br>Tumwater, WA 98511     |      | Staff Meal: NAIC Meeting<br>(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**

|                     |                |
|---------------------|----------------|
| <b>C4</b><br>(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<br><b>98511-5017</b>   | Office Sought (Candidates)<br><b>INSURANCE COMMISSIONER</b> | Election Date<br><b>2020</b> |
| Report Period Covered<br>From (last C-4) <b>05/01/18</b><br>To (end of period) <b>05/31/18</b> | Final Report?<br>Yes No <b>X</b>                            |                              |

**\*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) ..... | \$             |     | <b>\$84,796.86</b> |
| 2. Cash received (From line 2, Schedule A) .....   | \$             |     | <b>\$0.00</b>      |
| 3. In kind contributions received (From line 1, Schedule B).....   |                |     | <b>\$0.00</b>      |
| 4. Total cash and in kind contributions received this period (Line 2 plus 3).....  |                |     | <b>\$0.00</b>      |
| 5. Loan principal repayments made (From line 2, Schedule L).....   |                |     | <b>\$0.00</b>      |
| 6. Corrections (From line 1 or 3, Schedule C)..... Show + or (-)   |                |     | <b>\$0.00</b>      |
| 7. Net adjustments this period (Combine line 5 & 6)..... Show + or (-)   |                |     | <b>\$0.00</b>      |
| 8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7) .....   |                |     | <b>\$84,796.86</b> |
| 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) ..... | <b>\$45,634.24</b> |
| 11. Total cash expenditures (From line 4, Schedule A) .....   | <b>\$282.29</b>    |
| 12. In kind expenditures (goods & services) (From line 1, Schedule B) .....   | <b>\$0.00</b>      |
| 13. Total cash and in kind expenditures made this period (Line 11 plus line 12).....  | <b>\$282.29</b>    |
| 14. Loan principal repayments made (From line 2, Schedule L).....   | <b>\$0.00</b>      |
| 15. Corrections (From line 2 or 3, Schedule C)..... Show + or (-)   | <b>\$0.00</b>      |
| 16. Net adjustments this period (Combine lines 14 & 15)..... Show + or (-)  | <b>\$0.00</b>      |
| 17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16).....  | <b>\$45,916.53</b> |

**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) .....  | <b>\$38,880.33</b> |
| <small>[Line 18 should equal your bank account balance(s) plus your petty cash balance.]</small> |                    |
| 19. Liabilities: (Sum of loans and debts owed) .....   | <b>\$0.00</b>      |
| 20. Balance (Surplus or deficit) (Line 18 minus line 19) .....                                   | <b>\$38,880.33</b> |

**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<br><b>MYRON "MIKE" KREIDLER</b> | Date<br><b>06/10/18</b> | Treasurer's Signature<br><b>Jay Petterson</b> | Date<br><b>06/10/18</b> |
|---|-------------------------|---|-------------------------|

# 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)**

**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<br>(Name and Address)                  | Code | Purpose of Expense<br>and/or Description | Amount         |
|-----------|--|------|--|----------------|
| N/A       | Expenses of \$50 or less                                   | N/A  | N/A                                      | <b>\$63.98</b> |
| 05/07/18  | AMY TESHARA<br>PO Box 40255<br>Olympia, WA 98504           |      | 4/26 Event Food: Dominos<br>Pizza        | \$69.61        |
| 05/30/18  | MIKE KREIDLER<br>1721 18th Ct NE<br>Olympia, WA 98506-3411 |      | Meals: Sonoma DC<br>(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**

|                     |                |
|---------------------|----------------|
| <b>C4</b><br>(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<br><b>98511-5017</b>   | Office Sought (Candidates)<br><b>INSURANCE COMMISSIONER</b> | Election Date<br><b>2020</b> |
| Report Period Covered<br>From (last C-4) <b>06/01/18</b><br>To (end of period) <b>06/30/18</b> | Final Report?<br>Yes No <b>X</b>                            |                              |

**\*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) ..... | \$             |     | <b>\$84,796.86</b> |
| 2. Cash received (From line 2, Schedule A) .....   | \$             |     | <b>\$0.00</b>      |
| 3. In kind contributions received (From line 1, Schedule B).....   |                |     | <b>\$0.00</b>      |
| 4. Total cash and in kind contributions received this period (Line 2 plus 3).....  |                |     | <b>\$0.00</b>      |
| 5. Loan principal repayments made (From line 2, Schedule L).....   |                |     | <b>\$0.00</b>      |
| 6. Corrections (From line 1 or 3, Schedule C)..... Show + or (-)   |                |     | <b>\$0.00</b>      |
| 7. Net adjustments this period (Combine line 5 & 6)..... Show + or (-)   |                |     | <b>\$0.00</b>      |
| 8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7) .....   |                |     | <b>\$84,796.86</b> |
| 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) ..... | <b>\$45,916.53</b> |
| 11. Total cash expenditures (From line 4, Schedule A) .....   | <b>\$43.83</b>     |
| 12. In kind expenditures (goods & services) (From line 1, Schedule B) .....   | <b>\$0.00</b>      |
| 13. Total cash and in kind expenditures made this period (Line 11 plus line 12).....  | <b>\$43.83</b>     |
| 14. Loan principal repayments made (From line 2, Schedule L).....   | <b>\$0.00</b>      |
| 15. Corrections (From line 2 or 3, Schedule C)..... Show + or (-)   | <b>\$0.00</b>      |
| 16. Net adjustments this period (Combine lines 14 & 15)..... Show + or (-)  | <b>\$0.00</b>      |
| 17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16).....  | <b>\$45,960.36</b> |

**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) .....  | <b>\$38,836.50</b> |
| <small>[Line 18 should equal your bank account balance(s) plus your petty cash balance.]</small> |                    |
| 19. Liabilities: (Sum of loans and debts owed) .....   | <b>\$0.00</b>      |
| 20. Balance (Surplus or deficit) (Line 18 minus line 19) .....                                   | <b>\$38,836.50</b> |

**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<br><b>MYRON "MIKE" KREIDLER</b> | Date<br><b>07/10/18</b> | Treasurer's Signature<br><b>Jay Petterson</b> | Date<br><b>07/10/18</b> |
|---|-------------------------|---|-------------------------|

# 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)**

06/01/18

06/30/18

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.

|  |  |  |
|--|--|--|
| <p>CODE<br/>DEFINITIONS<br/>ON NEXT PAGE</p> | <p>C - Contributions (monetary, in-kind &amp; transfers)<br/>I - Independent Expenditures<br/>L - Literature, Brochures, Printing<br/>B - Broadcast Advertising (Radio, TV)<br/>N - Newspaper and Periodical Advertising<br/>O - Other Advertising (yard signs, buttons, etc.)<br/>V - Voter Signature Gathering</p> | <p>P - Postage, Mailing Permits<br/>S - Surveys and Polls<br/>F - Fundraising Event Expenses<br/>T - Travel, Accommodations, Meals<br/>M - Management/Consulting Services<br/>W - Wages, Salaries, Benefits<br/>G - General Operation and Overhead</p> |
|--|--|--|

**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<br>(Name and Address) | Code | Purpose of Expense<br>and/or Description | Amount         |
|-----------|---|------|--|----------------|
| N/A       | Expenses of \$50 or less                  | N/A  | N/A                                      | <b>\$43.83</b> |
|           |   |      |  |                |
|           |   |      |  |                |
|           |   |      |  |                |
|           |   |      |  |                |
|           |   |      |  |                |
|           |   |      |  |                |
|           |   |      |  |                |
|           |   |      |  |                |
|           |   |      |  |                |

4. TOTAL CASH EXPENDITURES Total from attached pages \$ **\$0.00**  
Enter also on line 11 of C4 \$ **\$43.83**

**SUMMARY, FULL REPORT  
 RECEIPTS AND  
 EXPENDITURES**

|                     |                |
|---------------------|----------------|
| <b>C4</b><br>(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 City  
**PO Box 15017** **Tumwater, WA**

|  |   |                              |
|--|---|------------------------------|
| Zip + 4<br><b>98511-5017</b>   | Office Sought (Candidates)<br><b>INSURANCE COMMISSIONER</b> | Election Date<br><b>2020</b> |
| Report Period Covered<br>From (last C-4) <b>07/01/18</b><br>To (end of period) <b>07/31/18</b> | Final Report?<br>Yes No <b>X</b>                            |                              |

**\*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) ..... | \$             |               | <b>\$84,796.86</b> |
| 2. Cash received (From line 2, Schedule A) .....   | \$             | <b>\$0.00</b> |                    |
| 3. In kind contributions received (From line 1, Schedule B).....   |                | <b>\$0.00</b> |                    |
| 4. Total cash and in kind contributions received this period (Line 2 plus 3).....  |                |               | <b>\$0.00</b>      |
| 5. Loan principal repayments made (From line 2, Schedule L).....   |                | <b>\$0.00</b> |                    |
| 6. Corrections (From line 1 or 3, Schedule C)..... Show + or (-)   |                | <b>\$0.00</b> |                    |
| 7. Net adjustments this period (Combine line 5 & 6)..... Show + or (-)   |                |               | <b>\$0.00</b>      |
| 8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7) .....   |                |               | <b>\$84,796.86</b> |
| 9. Total pledge payments due (From line 2, Schedule B).....  | <b>\$0.00</b>  |               |                    |

| 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) ..... | <b>\$45,960.36</b> |
| 11. Total cash expenditures (From line 4, Schedule A) .....   | <b>\$50.11</b>     |
| 12. In kind expenditures (goods & services) (From line 1, Schedule B) .....   | <b>\$0.00</b>      |
| 13. Total cash and in kind expenditures made this period (Line 11 plus line 12).....  | <b>\$50.11</b>     |
| 14. Loan principal repayments made (From line 2, Schedule L).....   | <b>\$0.00</b>      |
| 15. Corrections (From line 2 or 3, Schedule C)..... Show + or (-)   | <b>\$0.00</b>      |
| 16. Net adjustments this period (Combine lines 14 & 15)..... Show + or (-)  | <b>\$0.00</b>      |
| 17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16).....  | <b>\$46,010.47</b> |

**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) .....  | <b>\$38,786.39</b> |
| <small>[Line 18 should equal your bank account balance(s) plus your petty cash balance.]</small> |                    |
| 19. Liabilities: (Sum of loans and debts owed) .....   | <b>\$0.00</b>      |
| 20. Balance (Surplus or deficit) (Line 18 minus line 19) .....                                   | <b>\$38,786.39</b> |

**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<br><b>MYRON "MIKE" KREIDLER</b> | Date<br><b>08/10/18</b> | Treasurer's Signature<br><b>Jay Petterson</b> | Date<br><b>08/10/18</b> |
|---|-------------------------|---|-------------------------|

# 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)**

**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<br>(Name and Address)                     | Code | Purpose of Expense<br>and/or Description | Amount  |
|-----------|---|------|--|---------|
| N/A       | Expenses of \$50 or less                                      | N/A  | N/A                                      |         |
| 07/02/18  | MYRON "MIKE" B KREIDLER<br>PO Box 15017<br>Tumwater, WA 98511 |      | Meals: Din Tai Fung                      | \$50.11 |
|           |   |      |  |         |
|           |   |      |  |         |
|           |   |      |  |         |
|           |   |      |  |         |
|           |   |      |  |         |
|           |   |      |  |         |
|           |   |      |  |         |

4. TOTAL CASH EXPENDITURES Total from attached pages \$           \$0.00  
Enter also on line 11 of C4 \$           \$50.11

**SUMMARY, FULL REPORT  
 RECEIPTS AND  
 EXPENDITURES**

|                     |                |
|---------------------|----------------|
| <b>C4</b><br>(3/97) | PDC OFFICE USE |
|                     | 100858023      |
|                     | 09-10-2018     |

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<br><b>98511-5017</b>   | Office Sought (Candidates)<br><b>INSURANCE COMMISSIONER</b> | Election Date<br><b>2020</b> |
| Report Period Covered<br>From (last C-4) <b>08/01/18</b><br>To (end of period) <b>08/31/18</b> | Final Report?<br>Yes No <b>X</b>                            |                              |

**\*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) ..... | \$             |     | <b>\$84,796.86</b> |
| 2. Cash received (From line 2, Schedule A) .....   | \$             |     | <b>\$0.00</b>      |
| 3. In kind contributions received (From line 1, Schedule B) .....  |                |     | <b>\$0.00</b>      |
| 4. Total cash and in kind contributions received this period (Line 2 plus 3) .....   |                |     | <b>\$0.00</b>      |
| 5. Loan principal repayments made (From line 2, Schedule L) .....  |                |     | <b>\$0.00</b>      |
| 6. Corrections (From line 1 or 3, Schedule C) .....  |                |     | <b>\$0.00</b>      |
| 7. Net adjustments this period (Combine line 5 & 6) .....  |                |     | <b>\$0.00</b>      |
| 8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7) .....   |                |     | <b>\$84,796.86</b> |
| 9. Total pledge payments due (From line 2, Schedule B) .....   |                |     | <b>\$0.00</b>      |

| 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) ..... | <b>\$46,010.47</b> |
| 11. Total cash expenditures (From line 4, Schedule A) .....   | <b>\$2,839.64</b>  |
| 12. In kind expenditures (goods & services) (From line 1, Schedule B) .....   | <b>\$0.00</b>      |
| 13. Total cash and in kind expenditures made this period (Line 11 plus line 12) .....   | <b>\$2,839.64</b>  |
| 14. Loan principal repayments made (From line 2, Schedule L) .....  | <b>\$0.00</b>      |
| 15. Corrections (From line 2 or 3, Schedule C) .....  | <b>\$0.00</b>      |
| 16. Net adjustments this period (Combine lines 14 & 15) .....   | <b>\$0.00</b>      |
| 17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16) .....   | <b>\$48,850.11</b> |

**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) .....                                     | <b>\$35,946.75</b> |
| [Line 18 should equal your bank account balance(s) plus your petty cash balance.] |                    |
| 19. Liabilities: (Sum of loans and debts owed) .....                              | <b>\$0.00</b>      |
| 20. Balance (Surplus or deficit) (Line 18 minus line 19) .....                    | <b>\$35,946.75</b> |

**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<br><b>MYRON "MIKE" KREIDLER</b> | Date<br><b>09/10/18</b> | Treasurer's Signature<br><b>Jay Petterson</b> | Date<br><b>09/10/18</b> |
|---|-------------------------|---|-------------------------|

# CASH RECEIPTS AND EXPENDITURE

**SCHEDULE**  
to C4 A  
(11/93)

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.

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<br>(Name and Address)                     | Code | Purpose of Expense<br>and/or Description                                  | Amount     |
|-----------|---|------|---|------------|
| N/A       | Expenses of \$50 or less                                      | N/A  | N/A   |            |
| 08/01/18  | MYRON "MIKE" B KREIDLER<br>PO Box 15017<br>Tumwater, WA 98511 |      | Non-reimbursed Public Office<br>Expense:: Well 80, Olympia<br>WA          | \$476.40   |
| 08/27/18  | MYRON "MIKE" B KREIDLER<br>PO Box 15017<br>Tumwater, WA 98511 |      | Non-reimbursed Public Office<br>Expense: River's Edge,<br>Olympia WA      | \$2,279.58 |
| 08/01/18  | MYRON "MIKE" B KREIDLER<br>PO Box 15017<br>Tumwater, WA 98511 |      | Non-reimbursed Public Office<br>Expense: Water Street Cafe,<br>Olympia WA | \$83.66    |
|           |   |      |   |            |
|           |   |      |   |            |
|           |   |      |   |            |

4. TOTAL CASH EXPENDITURES Total from attached pages \$           \$0.00  
Enter also on line 11 of C4 \$           \$2,839.64

**SUMMARY, FULL REPORT  
 RECEIPTS AND  
 EXPENDITURES**

|                     |                |
|---------------------|----------------|
| <b>C4</b><br>(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<br><b>98511-5017</b>   | Office Sought (Candidates)<br><b>INSURANCE COMMISSIONER</b> | Election Date<br><b>2020</b> |
| Report Period Covered<br>From (last C-4) <b>12/01/18</b><br>To (end of period) <b>12/31/18</b> | Final Report?<br>Yes No <b>X</b>                            |                              |

**\*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) ..... | \$             |     | <b>\$84,796.86</b> |
| 2. Cash received (From line 2, Schedule A) .....   | \$             |     | <b>\$0.00</b>      |
| 3. In kind contributions received (From line 1, Schedule B) .....  |                |     | <b>\$0.00</b>      |
| 4. Total cash and in kind contributions received this period (Line 2 plus 3) .....   |                |     | <b>\$0.00</b>      |
| 5. Loan principal repayments made (From line 2, Schedule L) .....  |                |     | <b>\$0.00</b>      |
| 6. Corrections (From line 1 or 3, Schedule C) .....  |                |     | <b>\$0.00</b>      |
| 7. Net adjustments this period (Combine line 5 & 6) .....  |                |     | <b>\$0.00</b>      |
| 8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7) .....   |                |     | <b>\$84,796.86</b> |
| 9. Total pledge payments due (From line 2, Schedule B) .....   |                |     | <b>\$0.00</b>      |

| 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) ..... | <b>\$48,850.11</b> |
| 11. Total cash expenditures (From line 4, Schedule A) .....   | <b>\$40.00</b>     |
| 12. In kind expenditures (goods & services) (From line 1, Schedule B) .....   | <b>\$0.00</b>      |
| 13. Total cash and in kind expenditures made this period (Line 11 plus line 12) .....   | <b>\$40.00</b>     |
| 14. Loan principal repayments made (From line 2, Schedule L) .....  | <b>\$0.00</b>      |
| 15. Corrections (From line 2 or 3, Schedule C) .....  | <b>\$0.00</b>      |
| 16. Net adjustments this period (Combine lines 14 & 15) .....   | <b>\$0.00</b>      |
| 17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16) .....   | <b>\$48,890.11</b> |

**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) .....  | <b>\$35,906.75</b> |
| <small>[Line 18 should equal your bank account balance(s) plus your petty cash balance.]</small> |                    |
| 19. Liabilities: (Sum of loans and debts owed) .....   | <b>\$0.00</b>      |
| 20. Balance (Surplus or deficit) (Line 18 minus line 19) .....                                   | <b>\$35,906.75</b> |

**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<br><b>MYRON "MIKE" KREIDLER</b> | Date<br><b>01/10/19</b> | Treasurer's Signature<br><b>Jay Petterson</b> | Date<br><b>01/10/19</b> |
|---|-------------------------|---|-------------------------|

# CASH RECEIPTS AND EXPENDITURE

**SCHEDULE A**  
to C4  
(11/93)

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.

|  |   |   |
|--|---|---|
| <b>CODE<br/>DEFINITIONS<br/>ON NEXT PAGE</b> | C - Contributions (monetary, in-kind & transfers)<br>I - Independent Expenditures<br>L - Literature, Brochures, Printing<br>B - Broadcast Advertising (Radio, TV)<br>N - Newspaper and Periodical Advertising<br>O - Other Advertising (yard signs, buttons, etc.)<br>V - Voter Signature Gathering | P - Postage, Mailing Permits<br>S - Surveys and Polls<br>F - Fundraising Event Expenses<br>T - Travel, Accommodations, Meals<br>M - Management/Consulting Services<br>W - Wages, Salaries, Benefits<br>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<br>(Name and Address) | Code | Purpose of Expense<br>and/or Description | Amount         |
|-----------|---|------|--|----------------|
| N/A       | Expenses of \$50 or less                  | N/A  | N/A                                      | <b>\$40.00</b> |
|           |   |      |  |                |
|           |   |      |  |                |
|           |   |      |  |                |
|           |   |      |  |                |
|           |   |      |  |                |
|           |   |      |  |                |
|           |   |      |  |                |
|           |   |      |  |                |

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<br><b>98511-5017</b>   | Office Sought (Candidates)<br><b>INSURANCE COMMISSIONER</b> | Election Date<br><b>2020</b> | *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<br>From (last C-4) <b>01/01/19</b><br>To (end of period) <b>01/31/19</b> | Final Report?<br>Yes No <b>X</b>                            |                              |   |

**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) ..... | \$             |               | <b>\$84,796.86</b> |
| 2. Cash received (From line 2, Schedule A) .....   | \$             | <b>\$0.00</b> |                    |
| 3. In kind contributions received (From line 1, Schedule B).....   |                | <b>\$0.00</b> |                    |
| 4. Total cash and in kind contributions received this period (Line 2 plus 3).....  |                |               | <b>\$0.00</b>      |
| 5. Loan principal repayments made (From line 2, Schedule L).....   |                | <b>\$0.00</b> |                    |
| 6. Corrections (From line 1 or 3, Schedule C)..... Show + or (-)   |                | <b>\$0.00</b> |                    |
| 7. Net adjustments this period (Combine line 5 & 6)..... Show + or (-)   |                |               | <b>\$0.00</b>      |
| 8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7) .....   |                |               | <b>\$84,796.86</b> |
| 9. Total pledge payments due (From line 2, Schedule B) .....   | <b>\$0.00</b>  |               |                    |

**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) ..... |                 | <b>\$48,890.11</b> |
| 11. Total cash expenditures (From line 4, Schedule A) .....   | <b>\$600.67</b> |                    |
| 12. In kind expenditures (goods & services) (From line 1, Schedule B) .....   | <b>\$0.00</b>   |                    |
| 13. Total cash and in kind expenditures made this period (Line 11 plus line 12).....  |                 | <b>\$600.67</b>    |
| 14. Loan principal repayments made (From line 2, Schedule L).....   | <b>\$0.00</b>   |                    |
| 15. Corrections (From line 2 or 3, Schedule C)..... Show + or (-)   | <b>\$0.00</b>   |                    |
| 16. Net adjustments this period (Combine lines 14 & 15)..... Show + or (-)  |                 | <b>\$0.00</b>      |
| 17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16).....  |                 | <b>\$49,490.78</b> |

| 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) .....                                     | <b>\$35,306.08</b> |
| 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.] |                    |
| Treasurer's Daytime Telephone No.:<br><b>(206) 682-7328</b> |                          |                          |                          | 19. Liabilities: (Sum of loans and debts owed) .....                              | <b>\$0.00</b>      |
|   |                          |                          |                          | 20. Balance (Surplus or deficit) (Line 18 minus line 19) .....                    | <b>\$35,306.08</b> |

**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<br><b>MYRON "MIKE" KREIDLER</b> | Date<br><b>02/07/19</b> | Treasurer's Signature<br><b>Jay Petterson</b> | Date<br><b>02/07/19</b> |
|---|-------------------------|---|-------------------------|

# 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)**

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<br>(Name and Address)                      | Code | Purpose of Expense<br>and/or Description | Amount   |
|-----------|--|------|--|----------|
| N/A       | Expenses of \$50 or less                                       | N/A  | N/A                                      | \$184.52 |
| 01/08/19  | ANNALISA GELLERMANN<br>5000 Capital Blvd<br>Tumwater, WA 98503 |      | Event Food: Wagner's<br>European Bakery  | \$83.82  |
| 01/08/19  | ANNALISA GELLERMANN<br>5000 Capital Blvd<br>Tumwater, WA 98503 |      | Event Food: Cherry Street<br>Coffee      | \$100.66 |
| 01/08/19  | ANNALISA GELLERMANN<br>5000 Capital Blvd<br>Tumwater, WA 98503 |      | Event Food: Wagner's<br>European Bakery  | \$173.97 |
| 01/08/19  | ANNALISA GELLERMANN<br>5000 Capital Blvd<br>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**

|                     |                |
|---------------------|----------------|
| <b>C4</b><br>(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<br><b>98511-5017</b>   | Office Sought (Candidates)<br><b>INSURANCE COMMISSIONER</b> | Election Date<br><b>2020</b> |
| Report Period Covered<br>From (last C-4) <b>03/01/19</b><br>To (end of period) <b>03/31/19</b> | Final Report?<br>Yes No <b>X</b>                            |                              |

**\*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) ..... | \$             |     | <b>\$84,796.86</b> |
| 2. Cash received (From line 2, Schedule A) .....   | \$             |     | <b>\$0.00</b>      |
| 3. In kind contributions received (From line 1, Schedule B) .....  |                |     | <b>\$0.00</b>      |
| 4. Total cash and in kind contributions received this period (Line 2 plus 3) .....   |                |     | <b>\$0.00</b>      |
| 5. Loan principal repayments made (From line 2, Schedule L) .....  |                |     | <b>\$0.00</b>      |
| 6. Corrections (From line 1 or 3, Schedule C) .....  |                |     | <b>\$0.00</b>      |
| 7. Net adjustments this period (Combine line 5 & 6) .....  |                |     | <b>\$0.00</b>      |
| 8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7) .....   |                |     | <b>\$84,796.86</b> |
| 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) ..... |                 | <b>\$49,490.78</b> |
| 11. Total cash expenditures (From line 4, Schedule A) .....   | <b>\$325.00</b> |                    |
| 12. In kind expenditures (goods & services) (From line 1, Schedule B) .....   | <b>\$0.00</b>   |                    |
| 13. Total cash and in kind expenditures made this period (Line 11 plus line 12) .....   |                 | <b>\$325.00</b>    |
| 14. Loan principal repayments made (From line 2, Schedule L) .....  | <b>\$0.00</b>   |                    |
| 15. Corrections (From line 2 or 3, Schedule C) .....  |                 | <b>\$0.00</b>      |
| 16. Net adjustments this period (Combine lines 14 & 15) .....   |                 | <b>\$0.00</b>      |
| 17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16) .....   |                 | <b>\$49,815.78</b> |

**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) .....  | <b>\$34,981.08</b> |
| <small>[Line 18 should equal your bank account balance(s) plus your petty cash balance.]</small> |                    |
| 19. Liabilities: (Sum of loans and debts owed) .....   | <b>\$0.00</b>      |
| 20. Balance (Surplus or deficit) (Line 18 minus line 19) .....                                   | <b>\$34,981.08</b> |

**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<br><b>MYRON "MIKE" KREIDLER</b> | Date<br><b>04/07/19</b> | Treasurer's Signature<br><b>Jay Petterson</b> | Date<br><b>04/07/19</b> |
|---|-------------------------|---|-------------------------|

# 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)**

**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<br>(Name and Address)           | Code | Purpose of Expense<br>and/or Description                           | Amount   |
|-----------|---|------|--|----------|
| N/A       | Expenses of \$50 or less                            | N/A  | N/A  |          |
| 03/21/19  | DARRYL COLEMAN<br>PO Box 40255<br>Olympia, WA 98504 |      | Team Sponsorship<br>Reimbursement: State Agency<br>Softball League | \$325.00 |
|           |   |      |  |          |
|           |   |      |  |          |
|           |   |      |  |          |
|           |   |      |  |          |
|           |   |      |  |          |
|           |   |      |  |          |

4. TOTAL CASH EXPENDITURES Total from attached pages \$           \$0.00  
Enter also on line 11 of C4 \$           \$325.00

**SUMMARY, FULL REPORT  
 RECEIPTS AND  
 EXPENDITURES**

|                     |                |
|---------------------|----------------|
| <b>C4</b><br>(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<br><b>98511-5017</b>   | Office Sought (Candidates)<br><b>INSURANCE COMMISSIONER</b> | Election Date<br><b>2020</b> |
| Report Period Covered<br>From (last C-4) <b>04/01/19</b><br>To (end of period) <b>04/30/19</b> | Final Report?<br>Yes No <b>X</b>                            |                              |

**\*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) ..... | \$             |     | <b>\$84,796.86</b> |
| 2. Cash received (From line 2, Schedule A) .....   | \$             |     | <b>\$0.00</b>      |
| 3. In kind contributions received (From line 1, Schedule B).....   |                |     | <b>\$0.00</b>      |
| 4. Total cash and in kind contributions received this period (Line 2 plus 3).....  |                |     | <b>\$0.00</b>      |
| 5. Loan principal repayments made (From line 2, Schedule L).....   |                |     | <b>\$0.00</b>      |
| 6. Corrections (From line 1 or 3, Schedule C)..... Show + or (-)   |                |     | <b>\$0.00</b>      |
| 7. Net adjustments this period (Combine line 5 & 6)..... Show + or (-)   |                |     | <b>\$0.00</b>      |
| 8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7) .....   |                |     | <b>\$84,796.86</b> |
| 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) ..... | <b>\$49,815.78</b> |
| 11. Total cash expenditures (From line 4, Schedule A) .....   | <b>\$291.01</b>    |
| 12. In kind expenditures (goods & services) (From line 1, Schedule B) .....   | <b>\$0.00</b>      |
| 13. Total cash and in kind expenditures made this period (Line 11 plus line 12).....  | <b>\$291.01</b>    |
| 14. Loan principal repayments made (From line 2, Schedule L).....   | <b>\$0.00</b>      |
| 15. Corrections (From line 2 or 3, Schedule C)..... Show + or (-)   | <b>\$0.00</b>      |
| 16. Net adjustments this period (Combine lines 14 & 15)..... Show + or (-)  | <b>\$0.00</b>      |
| 17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16).....  | <b>\$50,106.79</b> |

**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) .....  | <b>\$34,690.07</b> |
| <small>[Line 18 should equal your bank account balance(s) plus your petty cash balance.]</small> |                    |
| 19. Liabilities: (Sum of loans and debts owed) .....   | <b>\$0.00</b>      |
| 20. Balance (Surplus or deficit) (Line 18 minus line 19) .....                                   | <b>\$34,690.07</b> |

**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<br><b>MYRON "MIKE" KREIDLER</b> | Date<br><b>05/10/19</b> | Treasurer's Signature<br><b>Jay Petterson</b> | Date<br><b>05/10/19</b> |
|---|-------------------------|---|-------------------------|

# 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)**

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<br>(Name and Address)                       | Code | Purpose of Expense<br>and/or Description                         | Amount   |
|-----------|---|------|--|----------|
| N/A       | Expenses of \$50 or less  | N/A  | N/A  | \$91.21  |
| 04/23/19  | MYRON "MIKE" B KREIDLER<br>PO Box 15017<br>Tumwater, WA 98511   |      | Staff Meal Reimbursement:<br>Anthony's Restaurant,<br>Olympia WA | \$115.64 |
| 04/30/19  | MELANIE ANDERSON<br>1740 SW Grandview Ave<br>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**

|                     |                |
|---------------------|----------------|
| <b>C4</b><br>(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<br><b>98511</b>                                     | Office Sought (Candidates)<br><b>INSURANCE COMMISSIONER</b> | Election Date<br><b>2020</b>     |
| Report Period Covered<br>From (last C-4)<br><b>05/01/19</b> | To (end of period)<br><b>05/31/19</b>                       | Final Report?<br>Yes No <b>X</b> |

**\*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) ..... | \$             |               | <b>\$84,796.86</b> |
| 2. Cash received (From line 2, Schedule A) .....   | \$             | <b>\$0.00</b> |                    |
| 3. In kind contributions received (From line 1, Schedule B).....   |                | <b>\$0.00</b> |                    |
| 4. Total cash and in kind contributions received this period (Line 2 plus 3).....  |                |               | <b>\$0.00</b>      |
| 5. Loan principal repayments made (From line 2, Schedule L).....   |                | <b>\$0.00</b> |                    |
| 6. Corrections (From line 1 or 3, Schedule C)..... Show + or (-)   |                | <b>\$0.00</b> |                    |
| 7. Net adjustments this period (Combine line 5 & 6)..... Show + or (-)   |                |               | <b>\$0.00</b>      |
| 8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7) .....   |                |               | <b>\$84,796.86</b> |
| 9. Total pledge payments due (From line 2, Schedule B) .....   |                | <b>\$0.00</b> |                    |

| 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) ..... | <b>\$50,106.79</b> |
| 11. Total cash expenditures (From line 4, Schedule A) .....   | <b>\$143.00</b>    |
| 12. In kind expenditures (goods & services) (From line 1, Schedule B) .....   | <b>\$0.00</b>      |
| 13. Total cash and in kind expenditures made this period (Line 11 plus line 12).....  | <b>\$143.00</b>    |
| 14. Loan principal repayments made (From line 2, Schedule L).....   | <b>\$0.00</b>      |
| 15. Corrections (From line 2 or 3, Schedule C)..... Show + or (-)   | <b>\$0.00</b>      |
| 16. Net adjustments this period (Combine lines 14 & 15)..... Show + or (-)  | <b>\$0.00</b>      |
| 17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16).....  | <b>\$50,249.79</b> |

**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) .....                                     | <b>\$34,547.07</b> |
| [Line 18 should equal your bank account balance(s) plus your petty cash balance.] |                    |
| 19. Liabilities: (Sum of loans and debts owed) .....                              | <b>\$0.00</b>      |
| 20. Balance (Surplus or deficit) (Line 18 minus line 19) .....                    | <b>\$34,547.07</b> |

**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<br><b>MIKE KREIDLER SURPLUS FUNDS</b> | Date<br><b>06/06/19</b> | Treasurer's Signature<br><b>Josie Olsen Petterson</b> | Date<br><b>06/06/19</b> |
|---|-------------------------|---|-------------------------|

# CASH RECEIPTS AND EXPENDITURE

**SCHEDULE A**  
 to C4  
(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<br>(Name and Address)                     | Code | Purpose of Expense<br>and/or Description     | Amount   |
|-----------|---|------|--|----------|
| N/A       | Expenses of \$50 or less                                      | N/A  | N/A  |          |
| 05/17/19  | MYRON "MIKE" B KREIDLER<br>PO Box 15017<br>Tumwater, WA 98511 |      | Meals: Hank's Capitol Hill,<br>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

|                     |                |
|---------------------|----------------|
| <b>C4</b><br>(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<br><b>98511</b>  | Office Sought (Candidates)<br><b>INSURANCE COMMISSIONER</b> | Election Date<br><b>2020</b> |
| Report Period Covered<br>From (last C-4) <b>09/01/19</b><br>To (end of period) <b>09/30/19</b> | Final Report?<br>Yes No <b>X</b>                            |                              |

**\*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) ..... | \$             |     | <b>\$84,796.86</b> |
| 2. Cash received (From line 2, Schedule A) .....   | \$             |     | <b>\$0.00</b>      |
| 3. In kind contributions received (From line 1, Schedule B) .....  |                |     | <b>\$0.00</b>      |
| 4. Total cash and in kind contributions received this period (Line 2 plus 3) .....   |                |     | <b>\$0.00</b>      |
| 5. Loan principal repayments made (From line 2, Schedule L) .....  |                |     | <b>\$0.00</b>      |
| 6. Corrections (From line 1 or 3, Schedule C) .....  | Show + or (-)  |     | <b>\$0.00</b>      |
| 7. Net adjustments this period (Combine line 5 & 6) .....  | Show + or (-)  |     | <b>\$0.00</b>      |
| 8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7) .....   |                |     | <b>\$84,796.86</b> |
| 9. Total pledge payments due (From line 2, Schedule B) .....   | <b>\$0.00</b>  |     |                    |

| 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) ..... |                | <b>\$50,249.79</b> |
| 11. Total cash expenditures (From line 4, Schedule A) .....   | <b>\$48.45</b> |                    |
| 12. In kind expenditures (goods & services) (From line 1, Schedule B) .....   | <b>\$0.00</b>  |                    |
| 13. Total cash and in kind expenditures made this period (Line 11 plus line 12) .....   |                | <b>\$48.45</b>     |
| 14. Loan principal repayments made (From line 2, Schedule L) .....  | <b>\$0.00</b>  |                    |
| 15. Corrections (From line 2 or 3, Schedule C) .....  | Show + or (-)  | <b>\$0.00</b>      |
| 16. Net adjustments this period (Combine lines 14 & 15) .....   | Show + or (-)  | <b>\$0.00</b>      |
| 17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16) .....   |                | <b>\$50,298.24</b> |

**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) .....                                     | <b>\$34,498.62</b> |
| [Line 18 should equal your bank account balance(s) plus your petty cash balance.] |                    |
| 19. Liabilities: (Sum of loans and debts owed) .....                              | <b>\$0.00</b>      |
| 20. Balance (Surplus or deficit) (Line 18 minus line 19) .....                    | <b>\$34,498.62</b> |

**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<br><b>MIKE KREIDLER SURPLUS FUNDS</b> | Date<br><b>10/05/19</b> | Treasurer's Signature<br><b>Josie Olsen</b> | Date<br><b>10/05/19</b> |
|---|-------------------------|---|-------------------------|

# 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<br>(Name and Address) | Code | Purpose of Expense<br>and/or Description | Amount         |
|-----------|---|------|--|----------------|
| N/A       | Expenses of \$50 or less                  | N/A  | N/A                                      | <b>\$48.45</b> |
|           |   |      |  |                |
|           |   |      |  |                |
|           |   |      |  |                |
|           |   |      |  |                |
|           |   |      |  |                |
|           |   |      |  |                |
|           |   |      |  |                |
|           |   |      |  |                |
|           |   |      |  |                |

4. TOTAL CASH EXPENDITURES Total from attached pages \$ **\$0.00**  
Enter also on line 11 of C4 \$ **\$48.45**

**SUMMARY, FULL REPORT  
 RECEIPTS AND  
 EXPENDITURES**

|                     |                |
|---------------------|----------------|
| <b>C4</b><br>(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<br><b>98511</b>  | Office Sought (Candidates)<br><b>INSURANCE COMMISSIONER</b> | Election Date<br><b>2020</b> |
| Report Period Covered<br>From (last C-4) <b>01/01/20</b><br>To (end of period) <b>01/31/20</b> | Final Report?<br>Yes No <b>X</b>                            |                              |

**\*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) ..... | \$             |     | <b>\$84,796.86</b> |
| 2. Cash received (From line 2, Schedule A) .....   | \$             |     | <b>\$0.00</b>      |
| 3. In kind contributions received (From line 1, Schedule B).....   |                |     | <b>\$0.00</b>      |
| 4. Total cash and in kind contributions received this period (Line 2 plus 3).....  |                |     | <b>\$0.00</b>      |
| 5. Loan principal repayments made (From line 2, Schedule L).....   |                |     | <b>\$0.00</b>      |
| 6. Corrections (From line 1 or 3, Schedule C)..... Show + or (-)   |                |     | <b>\$0.00</b>      |
| 7. Net adjustments this period (Combine line 5 & 6)..... Show + or (-)   |                |     | <b>\$0.00</b>      |
| 8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7) .....   |                |     | <b>\$84,796.86</b> |
| 9. Total pledge payments due (From line 2, Schedule B) .....   | <b>\$0.00</b>  |     |                    |

| 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) ..... |                 | <b>\$50,298.24</b> |
| 11. Total cash expenditures (From line 4, Schedule A) .....   | <b>\$917.05</b> |                    |
| 12. In kind expenditures (goods & services) (From line 1, Schedule B) .....   | <b>\$0.00</b>   |                    |
| 13. Total cash and in kind expenditures made this period (Line 11 plus line 12).....  |                 | <b>\$917.05</b>    |
| 14. Loan principal repayments made (From line 2, Schedule L).....   | <b>\$0.00</b>   |                    |
| 15. Corrections (From line 2 or 3, Schedule C)..... Show + or (-)   | <b>\$0.00</b>   |                    |
| 16. Net adjustments this period (Combine lines 14 & 15)..... Show + or (-)  |                 | <b>\$0.00</b>      |
| 17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16).....  |                 | <b>\$51,215.29</b> |

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

**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<br><b>MIKE KREIDLER SURPLUS FUNDS</b> | Date<br><b>02/10/20</b> | Treasurer's Signature<br><b>Josie Olsen</b> | Date<br><b>02/10/20</b> |
|---|-------------------------|---|-------------------------|

# CASH RECEIPTS AND EXPENDITURE

**SCHEDULE A**  
 to C4  
(11/93)

Candidate or Committee Name (Do not abbreviate. Use full name.) Report Date  
**(Mike Kreidler Surplus Funds)** **01/01/20** **01/31/20**

1. CASH RECEIPTS (Contributions) which have been reported on C3. List each deposit made since last C4 report was submitted.

| Date of deposit | Amount | Date of deposit | Amount | Date of deposit | Amount | Total deposits |
|-----------------|--------|-----------------|--------|-----------------|--------|----------------|
|                 |        |                 |        |                 |        |                |

2. TOTAL CASH RECEIPTS Enter 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.

|  |   |   |
|--|---|---|
| <b>CODE<br/>DEFINITIONS<br/>ON NEXT PAGE</b> | C - Contributions (monetary, in-kind & transfers)<br>I - Independent Expenditures<br>L - Literature, Brochures, Printing<br>B - Broadcast Advertising (Radio, TV)<br>N - Newspaper and Periodical Advertising<br>O - Other Advertising (yard signs, buttons, etc.)<br>V - Voter Signature Gathering | P - Postage, Mailing Permits<br>S - Surveys and Polls<br>F - Fundraising Event Expenses<br>T - Travel, Accommodations, Meals<br>M - Management/Consulting Services<br>W - Wages, Salaries, Benefits<br>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   |          |
| 01/06/20  | SANDRA MURPHY<br>2871 Hyland St<br>Dupont, WA 98327            |      | Event Supplies<br>Reimbursement: Sub Vendors<br>TBD | \$330.86 |
| 01/06/20  | HAILEY HAMILTON<br>6311 85th Street Ct E<br>Puyallup, WA 98371 |      | Event Supplies<br>Reimbursement: Sub Vendors<br>TBD | \$271.86 |
| 01/06/20  | ANNALISA GELLERMANN<br>5000 Capital Blvd<br>Tumwater, WA 98503 |      | Event Supplies<br>Reimbursement: Sub Vendors<br>TBD | \$314.33 |
|           |  |      |   |          |
|           |  |      |   |          |
|           |  |      |   |          |

4. TOTAL CASH EXPENDITURES Total from attached pages \$ **\$0.00**  
Enter also on line 11 of C4 \$ **\$917.05**