PUBLIC DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 0LYMPIA WA 98504-0908 (360) 753-1111 TOLL FREE 1-877-601-2828

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4(3/97)

PDC OFFICE USE 100866432 AMENDS 100865943 10-16-2018

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

	Elect Linda Od	sterman)			
Mailing Address 4714 Durham St SE				City Lacey, WA	
Zip + 4 98503	Office Sought (Cand		Election Date	*For PACs, Parties & Cau this report period, did the comm	
Report Period From (last C-	4) To (er	nd of period)	Final Report?	expenditure (i.e., an expense	not considered a contribution)
Covered 09/01/1	8 10	/15/18	Yes No X	supporting or opposing a state	or local candidate?
RECEIPTS				*See next page	Yes No
Previous total cash and in kir (if beginning a new campaign	nd contributions (From n or calendar year, see	line 8, last C-4) e instruction bool	klet)		\$ \$3,970.40
2. Cash received (From line 2,	Schedule A)			*** \$1,055.00	
3. In kind contributions received	d (From line 1, Schedu	ıle B)		\$97 . 87	
4. Total cash and in kind contril	butions received this p	eriod (Line 2 plu	s 3)		\$1,152.87
5. Loan principal repayments m	nade (From line 2, Sch	edule L)		\$0.00	
6. Corrections (From line 1 or 3	s, 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 contril	butions during campai	gn (Combine line	es 1, 4 & 7)		\$5,123.27
9. Total pledge payments due (From line 2, Schedule	В)	\$0.00		
EXPENDITURES		l l	40000		
Previous total cash and in king (If beginning a new campaign	nd expenditures (From n or calendar year, see	line 17, last C-4 e instruction bool) klet)	<u> </u>	\$1,517.24
11. Total cash expenditures (Fro	om line 4, Schedule A)			<u>\$1,715.61</u>	
12. In kind expenditures (goods	& services) (From line	1, Schedule B).		\$97.87	
13. Total cash and in kind expen	ditures made this peri	od (Line 11 plus	line 12)		\$1,813.48
14. Loan principal repayments m	nade (From line 2, Sch	edule L)		\$0.00	
15. Corrections (From line 2 or 3	s, Schedule C)		Show + or (\$0.00	
16. Net adjustments this period ((Combine lines 14 & 1	5)		Show + or (-)	\$0.00
17. Total cash and in kind expen	ditures during campai	gn (Combine line	es 10, 13 and 16)		\$3,330.72
CANDIDATES ONLY Won Lost	Name not Unopposed on ballot		nd (Line 8 minus line	17)	\$1,792.55
Primary election		-		nnce(s) plus your petty cash balance.]	
General election Treasurer's Daytime Telephone N	Mo :	19. Liabilities:	Sum or loans and der	ots owed)	\$4,417.62
(360)556-1048	10	20. Balance (Su	urplus or deficit) (Line	18 minus line 19)	(\$2,625.07)
CERTIFICATION: I certify that the in	formation herein and on	accompanying sch	edules and attachments	is true and correct to the best of mv k	
Candidate's Signature	Date		Treasurer's Signatur		Date
LINDA OOSTERMAN	10	/16/18	Shawn D Myers	5	10/16/18

CASH RECEIPTS AND EXPENDITURE

SCHEDULE

10/15/18

\$1,055.00

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

Report Date

LINDA OOSTERMAN	(Re-Elect	Linda	Oosterman))
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09/01/18

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	Т	otal deposits
09/01/2018	\$100.00	10/13/2018	\$150.00				
09/18/2018	\$365.00	10/13/2018	\$390.00				
10/02/2018	\$50.00						
2. TOTAL CASH RECE	IPTS			Enter al	so on line 2 of C4	\$	\$1,055.

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;
- When reporting payments to vendors for travel expenses, identify the traveler and travel purpose in the Description block; and 2)
- If expenditures are made directly or indirectly to compensate a person or entity for soliciting signatures on a statewide initiative or referendum 3) petition, use code "V" and provide the following information on an attached sheet: name and address of each person/entity compensated, amount paid each during the reporting period, and cumulative total paid all persons to date to gather signatures.

CODE **DEFINITIONS** ON NEXT PAGE

- C Contributions (monetary, in-kind & transfers)
- I Independent Expenditures
- L Literature, Brochures, Printing
- B Broadcast Advertising (Radio, TV)
- N Newspaper and Periodical Advertising
- O Other Advertising (yard signs, buttons, etc.)
- V Voter Signature Gathering

- P Postage, Mailing Permits
- S Surveys and Polls
- F Fundraising Event Expenses T - Travel, Accommodations, Meals
- M Management/Consulting Services
- W Wages, Salaries, Benefits
- G General Operation and Overhead

3. EXPENDITURES

- a) Expenditures of \$50 or less, including those from petty cash, need not be itemized. Add up these expenditures and show the total in the amount column on the first line below..
- b) Itemize each expenditure of more than \$50 by date paid, name and address of vendor, code/description, and amount.
- c) For each payment to a candidate, campaign worker, PR firm, advertising agency or credit card company, attach a list of detailed expenses or copies of receipts/invoices supporting the payment.

Date Paid	Vendor or Recipient (Name and Address)	Code	Purpose of Expense and/or Description		Amount
N/A	Expenses of \$50 or less	N/A	N/A		
10/09/18	THE OLYMPIA 522 Franklin St SE Olympia, WA 98501		Advertising		\$1,420.00
10/13/18	PERCIVAL CONSULTING GROUP 120 State Ave NE #1045 Olympia, WA 98501		Facebook post boost		\$99.92
10/14/18	PERCIVAL CONSULTING GROUP 120 State Ave NE #1045 Olympia, WA 98501		Facbook ads		\$195.69
	1		Total from attached pag	es \$	\$0.00

Enter also on line 11 of C4

\$1,715.61

IN KIND CONTRIBUTIONS, PLEDGES, ORDERS, DEBTS, OBLIGATIONS

SCHEDULE TO C4 **B** (11/93)

3

Candidate or Committee Name (Do not abbreviate. Use full name.)
LINDA OOSTERMAN (Re-Elect Linda Oosterman)

Report Date 09/01/18 10/15/18

1. IN KIND CONTRIBUTIONS RECEIVED (goods, services, discounts, etc.)

Date	Contributor's Name and Address	Description of	Fair Market	Aggregate	P	G	If total over \$100,
Received		Contribution	Value	Total	R I	E N	Employer Name, City, State & Occup
.0/10/18	MEREN GADMAN 7304 38th Dr SE Lacey, WA 98503	Food and Beverages	\$50.00	\$50.00			
.0/10/18	SHAWN MYERS 685 T St SE Olympia, WA 98501	Food and beverages	\$47.87	\$298.27	0]	Lym	ce of the State pia WA STATE TREASURER
	<u> </u>	TOTAL THIS PAGE	\$97.87		<u> </u>		

IN KIND CONTRIBUTIONS, PLEDGES, ORDERS, DEBTS, OBLIGATIONS

SCHEDULE TO C4 B

4

Candidate or Committee Name (Do not abbreviate. Use full name.)
LINDA OOSTERMAN (Re-Elect Linda Oosterman)

Report Date

09/01/18 10/15/18

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

Expenditure Date	Vendor's/Recipient's Name and Address	Amount Owed	Code	OR Description of Obligation		
9/04/2018	PERCIVAL CONSULTING GROUP 120 State Ave NE #1045 Olympia WA, 98501	2000.00		Consulting		
0/03/2018	EXPRESS SIGNS 3522 112th St E Tacoma WA, 98446	417.62		Signs		
	TOTAL THIS PA	GE 2417.62				

LOANS

SCHEDULE TO C4

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5

Candidate or Committee Name

LINDA OOSTERMAN (Re-Elect Linda Oosterman)

Report Date

09/01/18 10/15/18

4. LOANS STILL OWED. List each loan that has previously been reported and still has a balance due.

Date	Lender's Name and Address	Original Amount	Principal Repaid or Forgiven	Amount Owed
5/12/18	LINDA OOSTERMAN 4714 Durham St SE Lacey, WA 98503	Original Amount \$2,000.00	\$0.00	\$2,000.00
			Subtotal This Page	\$2,000.00