

## SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

**C4**(3/97)

PDC OFFICE USE

100332350

10-31-2009

TOLL FREE 1-877-601-2828

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

Judy Clibborn - Surplus Funds Account Mailing Address City PO Box 808 Mercer Island, WA Zip + 4Office Sought (Candidates) Election Date \*For PACs, Parties & Caucus Committees: During 98040-0808 State Representative 11/02/10 this report period, did the committee make an independent Report Period From (last C-4) To (end of period) Final Report? expenditure (i.e., an expense not considered a contribution) supporting or opposing a state or local candidate? Covered 09/01/09 10/31/09 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) ......\$ 20,993.17 2. Cash received (From line 2, Schedule A) ..... In kind contributions received (From line 1, Schedule B)..... Total cash and in kind contributions received this period (Line 2 plus 3)...... 0.00 Loan principal repayments made (From line 2, Schedule L)..... Corrections (From line 1 or 3, Schedule C)......Show + or (-) 0.00 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) 12. In kind expenditures (goods & services) (From line 1, Schedule B) ...... 13. Total cash and in kind expenditures made this period (Line 11 plus line 12)..... 0.00 14. Loan principal repayments made (From line 2, Schedule L)..... 15. Corrections (From line 2 or 3, Schedule C)......Show + or (-) 0.00 17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)..... **CANDIDATES ONLY** Name not **CASH SUMMARY** 18. Cash on hand (Line 8 minus line 17)......\_\_\_\_\_\_ 19,839.46 Won Lost Unopposed on ballot [Line 18 should equal your bank account balance(s) plus your petty cash balance.] Primary election 19. Liabilities: (Sum of loans and debts owed) ..... General election Treasurer's Daytime Telephone No.: 20. Balance (Surplus or deficit) (Line 18 minus line 19) ..... (206)325-501319,589.46 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 Treasurer's Signature 10/31/09 10/31/09 Judy Clibborn Jason Bennett

## **CASH RECEIPTS AND EXPENDITURE**

**SCHEDULE** to C4

A	
(11/93)	

Ua	andidate or Committee Name	(Do not abi	previate. Use full name	.)		ne	port Date
Juc	dy Clibborn - Sur	plus Fur	nds Account			09/01/09	10/31/09
1.	CASH RECEIPTS (Contrib	utions) whic	h have been reported o	n C3. List each dep	oosit made since last C4	report was submitted.	
Da	ate of deposit	Amount	Date of deposit	Amount	Date of deposit	Amount	Total deposits
2.	TOTAL CASH RECEIPTS				Enter al	so on line 2 of C4 _\$	<u>0.00</u>
1) 2) 3)	committee, identify the When reporting payment If expenditures are made petition, use code "V"	e:  od or earmark ne candidate s to vendors e directly or in " and provide	sed contributions to a ca or committee in the De- for travel expenses, ide adirectly to compensate to the following information	andidate or committe scription block; entify the traveler ar a person or entity fon on an attached s	ee or <u>independent expen</u> od travel purpose in the D	nditures that benefit a concept that benefit a concept that benefit a concept that the benefit and the benefi	candidate or or referendum
	CODE DEFINITIONS ON NEXT PAG	E B N O	- Contributions (moneta Independent Expenditu Literature, Brochures, - Broadcast Advertising - Newspaper and Period - Other Advertising (yardustre - Voter Signature Gathe	res Printing (Radio, TV) dical Advertising d signs, buttons, etc	S - Su F - Fu T - Tra M - Ma C.) W - W	ostage, Mailing Permits irveys and Polls indraising Event Exper avel, Accommodations anagement/Consulting /ages, Salaries, Benefi eneral Operation and C	nses s, Meals g Services its

## 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	0.00
			Total from attached page	<b>a a a a</b>

Total from attached pages	\$	
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## IN KIND CONTRIBUTIONS, PLEDGES, ORDERS, DEBTS, OBLIGATIONS

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

3

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

Judy Clibborn - Surplus Funds Account

Report Date

09/01/09 10/31/09

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
.0/05/2009	Judy R Clibborn 8140 SE 44th Street Mercer Island, WA 98040-3904	:	250	G	reimburse for Eastside Democrats Dinner ad
		TOTAL THIS PAGE	250.00		