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

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4(3/97)

PDC OFFICE USE 100824026

04-09-2018

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

NOEL FRAME (Noel Fram	e Surplus Funds	Account	t)					
Mailing Address City PO Box 99143 Seattle, WA								
Zip + 4 99143	Office Sought (Candidates STATE REPRESENT)				*For PACs, Parties & (
Report Period From (last C-4	To (end of p	eriod)	Final	Report?	9	expenditure (i.e., an expe	nse not cons	sidered a contribution)
Covered 03/01/18	03/31/	18	Yes	No X	3	supporting or opposing a s	tate or local	candidate?
RECEIPTS						*See next page	Yes	No
Previous total cash and in kin (if beginning a new campaign	d contributions (From line 8 or calendar year, see instru	, last C-4) uction book	det)			, -	···_\$	\$43,368.94
2. Cash received (From line 2, S	Schedule A)					\$ \$0.0	<u>)</u>	
3. In kind contributions received					\$0.0	<u>) </u>		
4. Total cash and in kind contrib	utions received this period (Line 2 plus	s 3)					\$0.00
5. Loan principal repayments made (From line 2, Schedule L)						\$0.00	<u>) </u>	
6. Corrections (From line 1 or 3,	Schedule C)			. Show + c	or (-)	\$0.0	<u>) </u>	
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)								\$43,368.94
9. Total pledge payments due (F	From line 2, Schedule B)			\$0.00				
EXPENDITURES								
Previous total cash and in kin (If beginning a new campaign	d expenditures (From line 1 or calendar year, see instru	7, last C-4 uction book) (let)					\$30,750.00
11. Total cash expenditures (Fror	m line 4, Schedule A)		•••••			\$0.	<u>00</u>	
12. In kind expenditures (goods & services) (From line 1, Schedule B)						. <u> </u>	0.0	
13. Total cash and in kind expend	ditures made this period (Lir	ne 11 plus	line 12)					\$0.00
14. Loan principal repayments made (From line 2, Schedule L)						\$0.	00	
15. Corrections (From line 2 or 3,	Schedule C)			. Show + c	or (-)	\$0.	00	
16. Net adjustments this period (0		•••••			Show + or (·)	\$0.00	
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)								\$30,750.00
CANDIDATES ONLY Name not CASH SUMMARY								*** *** ***
Won Lost Unopposed on ballot 18. Cash on hand (Line 8 minus line 17 [Line 18 should equal your bank account balance						··	\$12,618.94	
Primary election					s owed)		\$0.00	
Treasurer's Daytime Telephone N	o.:	` -					\$0.00	
(206)682-7328		20. Balance (Surplus or deficit) (Line 18 minus line 19)						\$12,618.94
CERTIFICATION: I certify that the information herein and on accompanying schedules and attachments is true and correct to the best of my knowledge.).
Candidate's Signature Date Treasurer's Signature								Date
NOEL FRAME	EL FRAME 04/09/18 Suz			ne Nau	ght	ton		04/09/18

CASH RECEIPTS AND EXPENDITURE

SCHEDULE to C4

2

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

Report Date

		(20					'	
NOE	L FRAME (Noel E	Frame Surp	olus Funds	Account)		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.								
Da	te of deposit	Amount	Date of deposit	Amount	Date of deposit	Amount	Total deposits	
2.	TOTAL CASH RECEIPT	ΓS			Enter al	so 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			-				
1)								
٥)	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 If expenditures are made directly or indirectly to compensate a person or entity for soliciting signatures on a statewide initiative or referendum 							
3)								
		•		formation on an attached s			compensated,	
	amount paid each	n during the repo	orting period, and	d cumulative total paid all p	ersons 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	
			•	
			Total from attached pag	20 O

Total from attached pages

\$0.00

Enter also on line 11 of C4

\$0.00