

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4(3/97)

PDC OFFICE USE 100897250

04-08-2019

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

KELLY M CHAMBERS (Ke	lly M. Chamber	s Surplus	Account)		
Mailing Address 1002 N. Meridian, STE					
Zip + 4 98371-4409	didates) Election Date SENTATIVE 2023		*For PACs, Parties & Ca	aucus Committees: During	
, , ,		nd of period) Final Report?			se not considered a contribution)
Covered 03/01/1	.9 03	/31/19	Yes No X	supporting or opposing a sta	te or local candidate?
RECEIPTS				*See next page	Yes No
Previous total cash and in ki (if beginning a new campaig	ind contributions (From In or calendar year, see	line 8, last C-4) instruction bool	klet)		\$ \$4,000.00
2. Cash received (From line 2,	Schedule A)			····· \$ \$0.00	_
3. In kind contributions receive	ed (From line 1, Schedu	ıle B)		\$0.00	-
4. Total cash and in kind contri	ibutions received this p	eriod (Line 2 plu	s 3)		\$0.00
5. Loan principal repayments r					-
6. Corrections (From line 1 or 3	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 contri	ibutions during campai	gn (Combine line	es 1, 4 & 7)	 1	\$4,000.00
9. Total pledge payments due	(From line 2, Schedule	B)	\$0.00		
EXPENDITURES					
 Previous total cash and in king (If beginning a new campaig) 	ind expenditures (From gn or calendar year, see	line 17, last C-4 e instruction bool	l) klet)		\$0.00
11. Total cash expenditures (Fro	om line 4, Schedule A)			\$0.00	<u> </u>
12. In kind expenditures (goods	& services) (From line	1, Schedule B).		\$0.00	ב
13. Total cash and in kind exper	nditures made this peri	od (Line 11 plus	line 12)		\$0.00
14. Loan principal repayments r	made (From line 2, Sch	\$0.00	<u> </u>		
15. Corrections (From line 2 or 3		Show + or	\$0.00	<u>)</u>	
16. Net adjustments this period	(Combine lines 14 & 1	5)		Show + or (-)	\$0.00
17. Total cash and in kind exper	nditures during campai	gn (Combine line	es 10, 13 and 16)		\$0.00
CANDIDATES ONLY	Name not				
Won Lost	Unopposed on ballot		and (Line 8 minus line equal your bank account ba	\$4,000.00	
Primary election		19. Liabilities:	(Sum of loans and de	\$0.00	
Treasurer's Daytime Telephone				<u> </u>	
(253)220-5590	_	20. Balance (Si	urplus or deficit) (Line	e 18 minus line 19)	\$4,000.00
CERTIFICATION: I certify that the in	nformation herein and on a	accompanying sch			
Candidate's Signature		Treasurer's Signatu	ure	Date	
KELLY CHAMBERS	/08/19	Jason Michau	ıd	04/08/19	

CASH RECEIPTS AND EXPENDITURE

SCHEDULE to C4

Α	
(11/93)	

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

Report Date

Ou	nalaato or committee r	tarrio (Boriot abi	oromato. Coo i	an marrio.,				
KEL	LY M CHAMBERS	(Kelly M.	Chambers	Surplus	Account)		03/01/19	03/31/19
1.	CASH RECEIPTS (Co	ontributions) whic	h have been re	ported on C3.	List each dep	osit made since last C4 i	report was submitted.	
Da	te of deposit	Amount	Date of depos	sit	Amount	Date of deposit	Amount	Total deposits
2.	TOTAL CASH RECEIF	PTS				Enter als	so on line 2 of C4	\$0.00
	CODES FOR CLASSI	FYING EXPEND	TURES: If one	of the following	ng codes is use	ed to describe an expend	liture, no other descri	ption is generally
	needed. The exception	ns are:						
1)						ee or independent expendent	ditures that benefit a	candidate or
		tify the candidate						
2)						d travel purpose in the D		
3)						or soliciting signatures or		
	petition, use cod	de "V" and provide	the following i	nformation on	an attached s	heet: name and address	of each person/entity	y compensated,

CODE **DEFINITIONS** ON NEXT PAGE

- amount paid each during the reporting period, and cumulative total paid all persons to date to gather signatures. 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

Enter also on line 11 of C4

\$0.00

G - General Operation and Overhead

3. EXPENDITURES

4. TOTAL CASH 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	A	mount
N/A	Expenses of \$50 or less	N/A	N/A		
			Total from attached pag	es \$	\$0.00