

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4(3/97)

PDC OFFICE USE 100907531

06-05-2019

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

| (KELLY M. CHAMBERS SU | RPLUS ACCOUNT) | | | | | | | | |
|--|--|--|----------------|-----------------------|-------------------|-----------------------|-------------------|---------------|---------------------|
| Mailing Address 1002 N. MERIDIAN, STE 100 PMB 207 | | | | | City PUYALLUP, WA | | | | |
| Zip + 4 98371-4409 | Office Sought (Candid | , | Electi 2023 | ion Da 3 | te | | | | nittees: During |
| Report Period From (last C | -4) To (end | of period) | Final | Repor | t? | expenditure (i.e. | , an expense | not conside | red a contribution) |
| Covered 05/01/1 | L9 05/ | 31/19 | Yes | No | x | supporting or opp | oosing a state | or local car | ndidate? |
| RECEIPTS | | | 1 | | | *See next page | | Yes | No |
| Previous total cash and in k (if beginning a new campaig | ind contributions (From li gn or calendar year, see i | ne 8, last C-4) nstruction bool | klet) | | | | | \$ | \$4,000.00 |
| 2. Cash received (From line 2, | Schedule A) | | | | | ··· _ \$ | \$0.00 | | |
| 3. In kind contributions receive | ed (From line 1, Schedule | B) | | | | | \$0.00 | | |
| 4. Total cash and in kind contr | ibutions received this per | iod (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) | | | | | Sr | now + or (-) | | \$0.00 |
| 8. Total cash and in kind contr | ibutions during campaign | (Combine line | es 1, 4 & 7 | ') | | | <u>-</u> | | \$4,000.00 |
| 9. Total pledge payments due | (From line 2, Schedule B |) | | \$0. | 00 | | | | |
| EXPENDITURES | | | | | | | | | |
| Previous total cash and in k (If beginning a new campaig | ind expenditures (From li gn or calendar year, see i | ne 17, last C-4 nstruction boo | l) klet) | | | | | | \$0.00 |
| 11. Total cash expenditures (Fro | om line 4, Schedule A) | | | | | | \$0.00 | | |
| 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) | | | | | | | | \$0.00 | |
| 14. Loan principal repayments r | made (From line 2, Scheo | lule 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) | | | | | Sr | now + or (-) | | \$0.00 |
| 17. Total cash and in kind exper | | • | | and 16 |) | | | | \$0.00 |
| CANDIDATES ONLY Won Lost | CASH SUMMARY 18. Cash on hand (Line 8 minus line 17) | | | | | | \$4,000.00 | | |
| [Line 18 should equal your bank account balance | | | | | | | 4 = 7 = 0 = 0 = 0 | | |
| Primary election | | 19. Liabilities: (Sum of loans and debts owed) | | | | <u>-</u> | | \$0.00 | |
| Treasurer's Daytime Telephone | 00 Balanca (Si | Balance (Surplus or deficit) (Line 18 minus line 19) | | | | | | | |
| (253)220-5590 | | | | aciicit) | (LINE | 10 minus iine 19). | | | \$4,000.00 |
| CERTIFICATION: I certify that the in | nformation herein and on ac | companying sch | edules and | attachr | nents is | s true and correct to | the best of my | knowledge. | |
| Candidate's Signature | ERTIFICATION: 1 certify that the information herein and on accompanying schedul andidate's Signature Date Tr | | | Treasurer's Signature | | | | Date | |
| KELLY CHAMBERS | LY CHAMBERS 06/05/19 J. | | | MIC | ПІТАН | Michaud | | 0.0 | 5/05/19 |

CASH RECEIPTS AND EXPENDITURE

SCHEDULE

| 1 | |
|-----|--|
| 93) | |

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

Report Date

| Carididate of Committee | Name (Do not ab | bicviate. Osciuli name.) | | | | port 2 ato |
|-------------------------|---------------------|------------------------------|---------------------------------|--------------------------|--------------------------|--------------------|
| (KELLY M. CHAMBE | ERS SURPLUS | ACCOUNT) | | | 05/01/19 | 05/31/19 |
| 1. CASH RECEIPTS (C | Contributions) whic | h have been reported on C | List each dep | oosit made since last C4 | report was submitted. | |
| Date of deposit | Amount | Date of deposit | Amount | Date of deposit | Amount | Total deposits |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 2. TOTAL CASH RECE | IPTS | | | Enter al | so on line 2 of C4 | \$0.00 |
| CODES FOR CLASS | | ITURES: If one of the follow | ving codes is use | ed to describe an expend | liture, no other descrip | otion is generally |

- If expenditures are in-kind or earmarked contributions to a candidate or committee or independent expenditures that benefit a candidate or 1) 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)
- 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

Enter also on line 11 of C4

\$0.00

- F Fundraising Event Expenses
- T Travel, Accommodations, Meals
- M Management/Consulting Services W - Wages, Salaries, Benefits
- 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 | | |
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| | | | Total from attached pag | es \$ | \$0.00 |