

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4(3/97)

PDC OFFICE USE 100961004 AMENDS 100956432 03-10-2020

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

ATHY LAMBERT (Citize:	ns to Elect ((Surplus) 1	Kathy Lambert)	
Mailing Address O Box 1138				City Woodinville, WA	
Zip + 4 8072-1138	Office Sought (Cand	SENTATIVE	Election Date 2022	*For PACs, Parties & Cau	mittee make an independent
Report Period From (last C-4 Covered 01 (01 (20	,	nd of period)	Final Report?	<u>expenditure</u> (i.e., an expense <u>supporting or opposing a state</u>	e not considered a contribution) e or local candidate?
01/01/20 RECEIPTS	, 01	/31/20	Yes No X	* -	
RECEIFIS				*See next page	Yes No
Previous total cash and in kin (if beginning a new campaign	d contributions (From or calendar year, see	i line 8, last C-4) e instruction book	klet)		\$ \$45,003.76
2. Cash received (From line 2, S					
3. In kind contributions received	(From line 1, Schedu	ıle B)		\$0.00	
4. Total cash and in kind contrib	utions received this p	eriod (Line 2 plus	s 3)		\$6.01
5. Loan principal repayments ma	ade (From line 2, Sch	edule L)		\$0.00	
6. Corrections (From line 1 or 3,	Schedule C)		Show + or (-	\$0.00	
7. Net adjustments this period (0	Combine line 5 & 6)			Show + or (-)	\$0.00
8. Total cash and in kind contrib	utions during campai	gn (Combine line	es 1, 4 & 7)	<u>-</u>	\$45,009.77
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 or calendar year, see	n line 17, last C-4 e instruction book	k) klet)	<u></u>	\$11,153.29
11. Total cash expenditures (Fror	n line 4, Schedule A)			\$0.00	
12. In kind expenditures (goods 8					
13. Total cash and in kind expend	\$0.00				
14. Loan principal repayments ma	ade (From line 2, Sch	edule L)		\$0.00	
15. Corrections (From line 2 or 3,	Schedule C)		Show + or (-	\$0.00	
16. Net adjustments this period (0	\$0.00				
17. Total cash and in kind expend	ditures during campai	gn (Combine line	es 10, 13 and 16)		\$11,153.29
CANDIDATES ONLY	Name not	CASH SUMMA		_	
	Jnopposed on ballot		,	7)	\$33,856.48
Primary election	H H	19. Liabilities: ((Sum of loans and deb	ts owed)	č 0.00
Treasurer's Daytime Telephone N	o.:			,	\$0.00
	20. Balance (Surplus or deficit) (Line 18 minus line 19)				
CERTIFICATION: I certify that the inf	ormation herein and on	accompanying sch	edules and attachments is	s true and correct to the best of my	knowledge.
Candidate's Signature	Date		Treasurer's Signature		Date
CATHY LAMBERT	03.	/10/20	Ashley Watkin	ıs	03/10/20

CASH RECEIPTS AND EXPENDITURE

4. TOTAL CASH EXPENDITURES

SCHEDULE to C4

A

Enter also on line 11 of C4 \$

\$0.00

2

Candidate or Committee Name (Do not abbreviate. Use full name.)					Re	Report Date		
KATHY LAMBE	RT (Citizens to	Elect (Surplu	s) Kathy L	ambert)	01/01/20	01/31/20		
 CASH RECE 	IPTS (Contributions) which	ch have been reported o	on C3. List each	deposit made since last (C4 report was submitted.			
Date of deposit	Amount	Date of deposit	Amou	nt Date of deposit	Amount	Total deposits		
01/31/202	0 \$6.01							
2. TOTAL CAS	H RECEIPTS			Ente	r also on line 2 of C4	\$6.01		
needed. The 1) If expendit commi 2) When repo 3) If expendit petition amour	DEFINITIONS L NN NEXT PAGE B N O	rked contributions to a case or committee in the Des for travel expenses, idindirectly to compensate the following informati	andidate or composcription block; entify the travele a person or ention on an attache lative total paid a ary, in-kind & transres Printing I (Radio, TV) dical Advertising of signs, buttons,	r and travel purpose in the ty for soliciting signatures and sheet: name and addrall persons to date to gath (sfers) P- S- F- M- etc.)	e Description block; and son a statewide initiative ess of each person/entity	candidate or e or referendum y compensated, s nses s, Meals g Services iits		
amour b) Itemize c) For ea	RES ditures of \$50 or less, inclut column on the first line be each expenditure of more ch payment to a candidate of receipts/invoices support	uding those from petty collelow e than \$50 by date paid. e, campaign worker, PR orting the payment. or Recipient and Address)	ash, need not be	itemized. Add up these	expenditures and show tription, and amount. mpany, attach a list of de	the total in the		

Date Paid	Vendor or Recipient (Name and Address)	Code	Purpose of Expense and/or Description	Д	mount
N/A	Expenses of \$50 or less	N/A	N/A		
			Total from attached pag	es \$	\$0.00