| Ð | PO BOX 40 OLYMPIA U (360) 753-1 TOLL FREE | OL WAY RM 206 SOIVIN 908 RECEI VA 98504-0908 | ARY, FULL REF | PORT | C4 (3/97) | | PDC OFFICE USE 100991415 08-10-2020 |
|---------------|---|---|----------------------------|----------------------|------------------|------------|---|
| | x Ybarra Surplus | | ame) | | | | |
| - | ng Address | 1000une) | | City | | | |
| P.O. | Box 175 | | | Quincy, WA | | | |
| Zip + 9884 | | Office Sought (Candidates) STATE REPRESENTAT | Election Date 2026 | | | | mmittees: During lke an independent |
| | rt Period From (last C | -4) To (end of per | iod) Final Report? | expenditure (i.e., a | an expense r | not consi | idered a contribution) |
| Cove | red 07/01/2 | 20 07/31/2 | O Yes No X | supporting or oppo | sing a state | or local o | <u>:andidate</u> ? |
| RECE | EIPTS | | | *See next page | | Yes | No |
| 1. | Previous total cash and in k (if beginning a new campaig | ind contributions (From line 8, la gn or calendar year, see instruct | ast C-4) tion booklet) | | <u></u> | \$ | \$65,000.00 |
| | | Schedule A) | | | \$0.00 | | |
| 3. | In kind contributions receive | ed (From line 1, Schedule B) | | | \$0.00 | | |
| | | ibutions received this period (Li | | | | | \$0.00 |
| | | made (From line 2, Schedule L) | | | \$0.00 | | |
| | | 3, Schedule C) | | | \$0.00 | | |
| 7. | Net adjustments this period | (Combine line 5 & 6) | | Sho | w + or (-) | | \$0.00 |
| 8. | Total cash and in kind contr | ibutions during campaign (Com | bine lines 1, 4 & 7) | | ······· | | \$65,000.00 |
| 9. | Total pledge payments due | (From line 2, Schedule B) | \$0.00 | | | | |
| | INDITURES | | | | | | |
| 10. | Previous total cash and in k (If beginning a new campai | ind expenditures (From line 17, gn or calendar year, see instruct | last C-4) tion booklet) | | | | \$42,937.34 |
| 11. | Total cash expenditures (Fr | om line 4, Schedule A) | | ····· \$1, | 017.43 | | |
| | | | | | | | |

| | | | | <u> </u> | | | |
|---|-------------------------|-------------------------|--------------------------------------|---------------------------------------|--------------|--|--|
| 12. In kind expenditures (goods & services) (From line 1, Schedule B) | | | | \$0.00 | | | |
| 13. Total cash and in ki | | \$1,017.43 | | | | | |
| 14. Loan principal repay | ments made (From line | \$0.00 | | | | | |
| 15. Corrections (From li | ne 2 or 3, Schedule C). | | Show + or (-) | \$0.00 | | | |
| 16. Net adjustments this period (Combine lines 14 & 15) | | | | | \$0.00 | | |
| 17. Total cash and in ki | | \$43,954.77 | | | | | |
| CANDIDATES ONLY | Nar | me not CASH SUMMA | ARY | | | | |
| Won | Lost Unopposed or | n ballot 18. Cash on ha | and (Line 8 minus line 17) | | \$21,045.23 | | |
| Primary election | | | equal your bank account balance(s) p | | | | |
| General election | | 19. Liabilities: | (Sum of loans and debts ow | ed) | \$0.00 | | |
| Treasurer's Daytime Telephone No.: | | | | · · · · · · · · · · · · · · · · · · · | <u>30.00</u> | | |
| Treasurer's Daytime rele | | 20 Balance (S | urplus or deficit) (Line 18 mi | aus line 19) | | | |
| (253)220-5590 | | 20. Dalance (S | | <u> </u> | \$21,045.23 | | |
| 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 | | |
| ALEX YBARRA | | 08/10/20 | Jason Michaud | | 08/10/20 | | |

CASH RECEIPTS AND EXPENDITURE



| Candidate or Committee Name (Do not abbreviate. Use full name.) | | | | | Report Date | | |
|---|--------|-----------------|--------|-----------------|-------------|----------------|--|
| (Alex Ybarra Surplus Account) | | | | | 07/01/20 | 07/31/20 | |
| 1. CASH RECEIPTS (Contributions) which have been reported on C3. List each deposit made since last C4 report was submitted. | | | | | | | |
| Date of deposit | Amount | Date of deposit | Amount | Date of deposit | Amount | Total deposits | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| 2. TOTAL CASH RECEIPTS Enter also 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 are:

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

C - Contributions (monetary, in-kind & transfers)

CODE DEFINITIONS ON NEXT PAGE

- 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

2

- 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 | \$40.49 |
| 07/09/20 | ALEX YBARRA P.O. Box 175 Quincy, WA 98848 | | DoubleTree: Lodging | \$114.09 |
| 07/09/20 | ALEX YBARRA P.O. Box 175 Quincy, WA 98848 | | DoubleTree: Lodging | \$107.22 |
| 07/09/20 | ALEX YBARRA P.O. Box 175 Quincy, WA 98848 | | Mileage Reimbursement | \$755.63 |
| | | | | |
| | | | | |
| | | | | |
| | | | Total from attached pages | \$ \$0.00 |

4. TOTAL CASH EXPENDITURES

\$ Enter also on line 11 of C4 \$1,017.43

| d | each | during | 1 |
|---|------|--------|---|
| | | | |
| | | | |