

**SUMMARY, FULL REPORT
 RECEIPTS AND
 EXPENDITURES**

| | |
|---------------------|----------------|
| C4 (3/97) | PDC OFFICE USE |
| | 100997581 |
| | 09-10-2020 |

Candidate or Committee Name (Do not abbreviate. Include full name)
(Committee to Elect Carly Coburn)

Mailing Address
P.O. Box 5744

City
Pasco, WA

| | | |
|---|---|----------------------------------|
| Zip + 4 99302 | Office Sought (Candidates) STATE REPRESENTATIVE | Election Date 2020 |
| Report Period Covered From (last C-4) 07/28/20 | To (end of period) 08/31/20 | Final Report? Yes No X |

***For PACs, Parties & Caucus Committees:** During this report period, did the committee make an **independent expenditure** (i.e., an expense not considered a contribution supporting or opposing a state or local candidate?)

| RECEIPTS | *See next page | Yes | No |
|--|----------------|-----|--------------------|
| 1. Previous total cash and in kind contributions (From line 8, last C-4) (if beginning a new campaign or calendar year, see instruction booklet) | \$ | | \$9,111.28 |
| 2. Cash received (From line 2, Schedule A) | \$ | | \$2,085.13 |
| 3. In kind contributions received (From line 1, Schedule B)..... | | | \$36.64 |
| 4. Total cash and in kind contributions received this period (Line 2 plus 3)..... | | | \$2,121.77 |
| 5. Loan principal repayments made (From line 2, Schedule L)..... | | | \$0.00 |
| 6. Corrections (From line 1 or 3, Schedule C)..... Show + or (-) | | | (\$9.06) |
| 7. Net adjustments this period (Combine line 5 & 6)..... Show + or (-) | | | (\$9.06) |
| 8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7) | | | \$11,223.99 |
| 9. Total pledge payments due (From line 2, Schedule B)..... | \$0.00 | | |

| EXPENDITURES | |
|---|-------------------|
| 10. Previous total cash and in kind expenditures (From line 17, last C-4) (If beginning a new campaign or calendar year, see instruction booklet) | \$7,463.92 |
| 11. Total cash expenditures (From line 4, Schedule A) | \$1,091.85 |
| 12. In kind expenditures (goods & services) (From line 1, Schedule B) | \$36.64 |
| 13. Total cash and in kind expenditures made this period (Line 11 plus line 12)..... | \$1,128.49 |
| 14. Loan principal repayments made (From line 2, Schedule L)..... | \$0.00 |
| 15. Corrections (From line 2 or 3, Schedule C)..... Show + or (-) | (\$9.06) |
| 16. Net adjustments this period (Combine lines 14 & 15)..... Show + or (-) | (\$9.06) |
| 17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)..... | \$8,583.35 |

CANDIDATES ONLY

| | Won | Lost | Unopposed | Name not on ballot |
|------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| Primary election | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| General election | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

Treasurer's Daytime Telephone No.:
(206) 745-2010

CASH SUMMARY

| | |
|--|-------------------|
| 18. Cash on hand (Line 8 minus line 17) | \$2,640.64 |
| <small>[Line 18 should equal your bank account balance(s) plus your petty cash balance.]</small> | |
| 19. Liabilities: (Sum of loans and debts owed) | \$1,300.00 |
| 20. Balance (Surplus or deficit) (Line 18 minus line 19) | \$1,340.64 |

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 CARLY COBURN | Date 09/10/20 | Treasurer's Signature Jason Bennett | Date 09/10/20 |
|--|-------------------------|---|-------------------------|

CASH RECEIPTS AND EXPENDITURE

SCHEDULE
to C4 **A**
(11/93)

2

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

Report Date

(Committee to Elect Carly Coburn)

07/28/20

08/31/20

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 |
|-----------------|----------|-----------------|----------|-----------------|----------|----------------|
| 07/30/2020 | \$110.00 | 08/05/2020 | \$260.00 | 08/13/2020 | \$50.00 | |
| 08/03/2020 | \$25.00 | 08/06/2020 | \$15.00 | 08/21/2020 | \$170.07 | |
| 07/30/2020 | \$300.00 | 08/10/2020 | \$20.00 | See attached | | |

2. TOTAL CASH RECEIPTS

Enter also on line 2 of C4 \$ \$2,085.13

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:

- 1) If expenditures are in-kind or earmarked contributions to a candidate or committee or independent expenditures that benefit a candidate or committee, identify the candidate or committee in the Description block;
- 2) When reporting payments to vendors for travel expenses, identify the traveler and travel purpose in the Description block; and
- 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
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 | \$55.00 |
| 07/30/20 | SUREPAYROLL 2350 Ravine Way, Suite 100 Glenview, IL 60025 | | payroll/taxes: Amber Rodriguez | \$604.01 |
| 08/04/20 | SUREPAYROLL 2350 Ravine Way, Suite 100 Glenview, IL 60025 | | payroll processing fee | \$74.95 |
| 08/13/20 | SUREPAYROLL 2350 Ravine Way, Suite 100 Glenview, IL 60025 | | payroll+taxes: Elizabeth Follett-Figueroa | \$273.81 |
| 08/28/20 | SUREPAYROLL 2350 Ravine Way, Suite 100 Glenview, IL 60025 | | payroll+taxes: Elizabeth Follett | \$84.08 |
| | | | | |
| | | | | |

Total from attached pages \$ \$0.00

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ \$1,091.85

Attachment to Schedule A
Additional Deposits

for the period: 07/28/20 08/31/20

3

Name

(Committee to Elect Carly Coburn)

| Date of Deposit | Amount | Date of Deposit | Amount | Date of Deposit | Amount |
|-----------------|------------|-----------------|--------|-----------------|--------|
| 08/21/20 | \$9.06 | | | | |
| 08/28/20 | \$1,000.00 | | | | |
| 08/26/20 | \$16.00 | | | | |
| 08/27/20 | \$110.00 | | | | |

IN KIND CONTRIBUTIONS, PLEDGES, ORDERS, DEBTS, OBLIGATIONS

SCHEDULE
TO C4

B

(11/93)

4

Candidate or Committee Name (Do not abbreviate. Use full name.)
(Committee to Elect Carly Coburn)

Report Date
07/28/20 08/31/20

1. IN KIND CONTRIBUTIONS RECEIVED (goods, services, discounts, etc.)

| Date Received | Contributor's Name and Address | Description of Contribution | Fair Market Value | Aggregate Total | P | R | I | G | E | N | If total over \$100, Employer Name, City, State & Occup |
|-----------------|--|-----------------------------|-------------------|-----------------|---|---|---|---|---|---|---|
| 08/11/20 | CARLY COBURN P.O. Box 5744 Pasco, WA 99302 | website cost (Wix) | \$36.64 | \$36.64 | | | | X | | | |
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| TOTAL THIS PAGE | | | \$36.64 | | | | | | | | |

CORRECTIONS

SCHEDULE TO C4 C

6

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

Date

(Committee to Elect Carly Coburn)

07/28/20

08/31/20

3. REFUNDS FROM VENDORS The below listed amounts have been received as refunds on expenditures previously reported. The refund has been deposited and reported on C3 report, Line 1d.

| Date of Report | Source/Person Making Refund | Amount of Refund |
|----------------|---|------------------|
| 08/21/20 | SUREPAYROLL 2350 Ravine Way, Suite 100 Glenview, IL 60025 | \$7.60 |
| 08/21/20 | SUREPAYROLL 2350 Ravine Way, Suite 100 Glenview, IL 60025 | \$1.46 |
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| | Total refunds Enter as (-) on line 6 and line 15 of C4. | \$9.06 |