

## 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 Ca	rly Coburn)				
Mailing Address .O. Box 5744				City Pasco, WA	
Zip + 4Office Sought (Candidates)9302STATE REPRESENTAT			Election Date 2020	*For PACs, Parties & Cauthis report period, did the com	ucus Committees: During imittee make an independent
Report Period From (last C-4	I) To (er	nd of period)	Final Report?	expenditure (i.e., an expense supporting or opposing a state	e not considered a contribution)
Covered 07/28/20	08	/31/20	Yes No X	supporting or opposing a state	e or local carididate!
RECEIPTS				*See next page	Yes No
Previous total cash and in kir (if beginning a new campaign	nd contributions (From or calendar year, see	line 8, last C-4) e instruction bool	klet)		\$ \$9,111.28
2. Cash received (From line 2, §	Schedule A)			···· \$ \$2,085.13	
3. In kind contributions received	(From line 1, Schedu	ıle B)		···· \$36.64	
4. Total cash and in kind contrib	utions received this p	eriod (Line 2 plu	s 3)		\$2,121.77
5. Loan principal repayments m	ade (From line 2, Sch	edule 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 contrib	utions during campai	gn (Combine line	es 1, 4 & 7)		\$11,223.99
9. Total pledge payments due (l	From line 2, Schedule	В)	\$0.00		
EXPENDITURES					
<ol><li>Previous total cash and in kin (If beginning a new campaigr</li></ol>	d expenditures (From or calendar year, see	line 17, last C-4 e instruction bool	l) klet)		\$7,463.92
11. Total cash expenditures (From	m 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 expend				•	\$1,128.49
14. Loan principal repayments m	ade (From line 2, Sch	edule L)		\$0.00	
15. Corrections (From line 2 or 3,	Schedule C)		Show + or	(\$9.06)	
16. Net adjustments this period (	Combine lines 14 & 19	5)		Show + or (-)	(\$9.06)
17. Total cash and in kind expend	ditures during campai	gn (Combine line	es 10, 13 and 16)		\$8,583.35
CANDIDATES ONLY	Name not	CASH SUMMA			40 640 64
Won Lost U	Jnopposed on ballot			ance(s) plus your petty cash balance.]	\$2,640.64
Primary election		40 1 1-1-1111	(0	h (	
General election					\$1,300.00
Treasurer's Daytime Telephone No.:  20. Balance (Surplus or deficit) (Line 18 minus line 19)					\$1,340.64
CERTIFICATION: I certify that the inf	ormation herein and on a	accompanying sch	edules and attachments	is true and correct to the best of mv	knowledge.
Candidate's Signature	Date	. , , , ,	Treasurer's Signatur		Date
CARLY COBURN	09,	/10/20	Jason Bennet	t	09/10/20

### CASH RECEIPTS AND EXPENDITURE

**SCHEDULE** 

07/28/20

08/31/20

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

Report Date

(Committee to Elect Carly Coburn)

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 \$15.00 08/21/2020 \$170.07 08/03/2020 \$25.00 08/06/2020

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;
- 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
- 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..
- Itemize each expenditure of more than \$50 by date paid, name and address of vendor, code/description, and amount.
- 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 name	¢ 40.00

Total from attached pages

\$0.00 \$

\$

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

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Name

(Committee to Elect Carly Coburn)								
(Committee to E  Date of Deposit  08/21/20  08/28/20  08/26/20  08/27/20	Amount \$9.06 \$1,000.00 \$16.00 \$110.00	rn)  Date of Deposit	Amount	Date of Deposit	Amount			

# 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 0

08/31/20

1.	IN KIND	CONTRIBUTIONS RECEIVED	(goods	services,	discounts,	etc.	)
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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
8/11/20	CARLY COBURN P.O. Box 5744 Pasco, WA 99302	website cost (Wix)	\$36.64	\$36.64		х	
		TOTAL THIS PAGE	\$36.64		I		

# IN KIND CONTRIBUTIONS, PLEDGES, ORDERS, DEBTS, OBLIGATIONS

SCHEDULE TO C4 B

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

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

3. ORDERS PLACED, DEBTS, OBLIGATIONS. (Give estimate if actual amount not known. Exclude loans. Report loans on Schedule L.)

Expenditure Date	Vendor's/Recipient's Name and	Address	Amount Owed	Code	OR Description of Obligation
5/31/2020	ARGO STRATEGIES PO Box 9100 Seattle WA, 98109		400.00		set up fee (\$150), may treasury (\$250)
6/30/2020	ARGO STRATEGIES PO Box 9100 Seattle WA, 98109		300.00		june treasury fee
7/31/2020	ARGO STRATEGIES PO Box 9100 Seattle WA, 98109		300.00		july treasury
8/31/2020	ARGO STRATEGIES PO Box 9100 Seattle WA, 98109		300.00		aug treasury
		TOTAL THIS PAGE	1300.00		

## **CORRECTIONS**

SCHEDULE TO C4

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\$9.06

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

Date

(Committee	to Elect Carly Coburn) 07/28	/20 08/31/20
3. REFUNDS F	<b>ROM VENDORS</b> The below listed amounts have been received as refunds on expenditures previously reported on C3 report, Line 1d.	ed. The refund has been
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
	Total Enter as (-) on line 6 and line 1	refunds 5 of C4. \$9.06