

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4(3/97)

PDC OFFICE USE 101002843

10-04-2020

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

| SHARON BROWN (SHARON BROWN SURPLUS ACCOUNT) | | | | | | |
|---|---|-----------------------------|-----------------------|-------------|-------------------------------------|--|
| Mailing Address 6855 West Clearwater A | venue Suite A-101- | - | | | City KENNEWICK, WA | |
| Zip + 4 99338 | Office Sought (Candidates) STATE SENATOR | | Election Date | | *For PACs, Parties & Cau | ucus Committees: During mittee make an independent |
| Report Period From (last C- | | od) F | Final Report? | | | not considered a contribution) |
| Covered 09/01/2 | 0 09/30/2 | 0 \ | Yes No X | z 3 | supporting or opposing a state | e or local candidate? |
| RECEIPTS | | | 100 110 | | *0 | V N- |
| KESEN 16 | | | | | *See next page | Yes No |
| Previous total cash and in kir (if beginning a new campaigr | nd contributions (From line 8, la n or calendar year, see instruct | ast C-4) ion booklet) . | | | | \$ \$119,878.92 |
| 2. Cash received (From line 2, 9 | Schedule A) | | | | \$ \$0.00 | |
| 3. In kind contributions received | d (From line 1, Schedule B) | | | | \$0.00 | |
| 4. Total cash and in kind contrib | | | | | ·- | \$0.00 |
| 5. Loan principal repayments m | ade (From line 2, Schedule L). | | | | \$0.00 | |
| 6. Corrections (From line 1 or 3 | , Schedule C) | | Show + | or (-) | \$0.00 | |
| 7. Net adjustments this period (| Combine line 5 & 6) | | | | Show + or (-) | \$0.00 |
| 8. Total cash and in kind contrib | outions during campaign (Com | bine lines 1, | 4 & 7) | | | \$119,878.92 |
| 9. Total pledge payments due (| From line 2, Schedule B) | | \$0.0 | 0 | | |
| EXPENDITURES | | | | | | |
| Previous total cash and in kir (If beginning a new campaigr | nd expenditures (From line 17, n or calendar year, see instruct | last C-4) ion booklet) . | | | | \$85,261.12 |
| 11. Total cash expenditures (Fro | m line 4, Schedule A) | | | | \$6,000.00 | |
| 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) | | | | | \$6,000.00 | |
| 14. Loan principal repayments m | ade (From line 2, Schedule 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) | | | | Show + or (-) | \$0.00 |
| 17. Total cash and in kind expen | <u> </u> | | , 13 and 16). | | | \$91,261.12 |
| CANDIDATES ONLY Name not Won Lost Unopposed on ballot 18. Cash on hand (Line 8 minus line 1) | | | lina 17 | 7\ | \$28,617.80 | |
| Woll Lost | | | | | e(s) plus your petty cash balance.] | \$20,017.00 |
| Primary election | | | s owed) | \$0.00 | | |
| Treasurer's Daytime Telephone No.: | | | | - - | | |
| (509) 947-5383 20. Balance (Surplus or deficit) (Line 1 | | | 8 minus line 19) - | \$28,617.80 | | |
| 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 | Trea | asurer's Sign | ature | | Date |
| SHARON BROWN | 10/04/20 | E13 | la Child | ers | | 10/04/20 |

CASH RECEIPTS AND EXPENDITURE

SCHEDULE to C4

| Candidate or Committee Nam | ne (Do not abi | oreviate. Use full name.) | | | r.e | epon Date |
|----------------------------|-----------------|--------------------------------|-----------------|---------------------------|-------------------------|--------------------|
| SHARON BROWN (SHARO | ON BROWN | SURPLUS ACCOUNT) | | | 09/01/20 | 09/30/20 |
| 1. CASH RECEIPTS (Contr | ributions) whic | h have been reported on C3 | . List each dep | osit made since last C4 r | eport was submitted. | |
| Date of deposit | Amount | Date of deposit | Amount | Date of deposit | Amount | Total deposits |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 2. TOTAL CASH RECEIPTS | 3 | | | Enter als | so on line 2 of C4 | \$0.00 |
| CODES FOR CLASSIFY | ING EXPEND | TURES: If one of the following | ng codes is use | ed to describe an expend | iture, no other descrip | otion 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, 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.
- 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.

| | Vendor or Recipient | | Purpose of Expense | | |
|-----------|---|------|-------------------------|--------|------------|
| Date Paid | (Name and Address) | Code | and/or Description | P | mount |
| N/A | Expenses of \$50 or less | N/A | N/A | | |
| 09/03/20 | SENATE REPUBLICAN CAMPAIGN PO Box 11025 Olympia, WA 98508 | | Surplus to SRCC | Ś | \$6,000.00 |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | Total from attached pag | jes \$ | \$0.00 |

Enter also on line 11 of C4

\$6,000.00