711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 TOLL FREE 1-877-601-2828			RECEIPTS AND EXPENDITURES			ÖN	(3/97)	•	100824707	
Candidate or Con	nmittee Name (Do not abbre		le full name)					- 04	4-10-2018	
NORMA SMITH	(Friends of Nor	rma Smitl	h)							
Mailing Address PO Box 270						City Clinton,	WA			
Zip + 4	Office S	Sought (Candie	dates)	Election	n Date	*For PACs. P	arties & Cau	icus Comi	mittees: During	
98236		E REPRESI	ENTATIVE	2018		this report period	d, did the com	mittee make	an independent	
Report Period	From (last C-4)	To (end	d of period)	Final R	eport?	expenditure (i.e supporting or op			ered a contribution)	
Covered	02/01/18	03/	31/18	Yes	No X	supporting of op	posing a state		<u>ididate</u> :	
RECEIPTS						*See next page		Yes	No	
 Previous to (if beginnin) 	otal cash and in kind contrib Ig a new campaign or calend	utions (From I dar year, see	line 8, last C-4) instruction bool	klet)				\$	\$8,056.47	
2. Cash recei	ved (From line 2, Schedule	A)				\$	\$0.01			
3. In kind con	tributions received (From lir	ne 1, Schedule	е В)				\$0.00			
4. Total cash	and in kind contributions re-	ceived this pe	eriod (Line 2 plu	ıs 3)					\$0.01	
5. Loan princi	ipal repayments made (Fror	m line 2, Sche	dule L)				\$0.00			
6. Corrections	s (From line 1 or 3, Schedul	e C)		S	Show + or ((-)	\$0.00			
7. Net adjustr	ments this period (Combine	line 5 & 6)				S	how + or (-)		\$0.00	
8. Total cash	and in kind contributions du	uring campaig	n (Combine line	es 1, 4 & 7)	1				\$8,056.48	
9. Total pledg	e payments due (From line	2, Schedule I	B)		\$0.00					
EXPENDITURES	5									
10. Previous to (If beginnin	otal cash and in kind expend ng a new campaign or calen	ditures (From dar year, see	line 17, last C-4 instruction bool	4) klet)			······		\$2,797.09	
	expenditures (From line 4, 5									
12. In kind exp	enditures (goods & services	s) (From line 1	I, Schedule B).				\$0.00			
13. Total cash	and in kind expenditures ma	ade this perio	d (Line 11 plus	line 12)					\$240.00	
14. Loan princi	ipal repayments made (Fror	m line 2, Sche	dule L)				\$0.00			
15. Corrections (From line 2 or 3, Schedule C)				S	Show + or ((-)	\$0.00			
16. Net adjustr	ments this period (Combine	lines 14 & 15)			S	how + or (-)		\$0.00	
17. Total cash	and in kind expenditures du	uring campaig	n (Combine line	es 10, 13 an	d 16)				\$3,037.09	
CANDIDATES O	NLY Won Lost Unopposed			and (Line 8 r		17)			\$5,019.39	
Primary election	Primary election									
General election			19. Liabilities:	(Sum of loa	ns and del	ots owed)			\$0.00	
Treasurer's Day	time Telephone No.:		00 D-1. (2		6 -10 /1 1	10	-			
(253)988-2	2455		20. Balance (Si	urplus or de	ncit) (Line	18 minus line 19)			\$5,019.39	
CERTIFICATION	: I certify that the information h	nerein and on a	ccompanying sch	edules and at	tachments	s true and correct to	the best of my l	knowledge.		
Candidate's Signa	ature	Date		Treasurer	s Signatur	e			Date	
NORMA SMITH	I	04/	10/18	Tom Per	rry			04	4/10/18	

SUMMARY, FULL REPORT

PUBLIC

DISCLOSURE COMMISSION

711 CAPITOL WAY RM 206

PDC OFFICE USE

C 1

CASH RECEIPTS AND EXPENDITURE



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

	`		,				
NORMA SMITH (Frie	ends of Nor	rma Smith)			02/01/18	03/31/18	
1. CASH RECEIPTS (Co	ontributions) whicl	h have been reported or	n C3. List each dep	oosit made since last C4	report was submitte	d.	
Date of deposit	Amount	Date of deposit	Amount	Date of deposit	Amount	Total deposits	
03/30/2018	\$0.01						
2. TOTAL CASH RECEIP	PTS			Enter al	so on line 2 of C4	\$ \$0.	01

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 <u>in-kind or earmarked contributions</u> to a candidate or committee or <u>independent expenditures</u> 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.

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.)
- Other Adventising (yard signs, buttons,
- V Voter Signature Gathering

2 Report Date

- 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 <u>\$50 or less</u>, 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		
02/13/18	ABBEY SHERMAN 154 S Ebey Rd Coupeville, WA 98239		Campaign manager		\$120.00
03/13/18	ABBEY SHERMAN 154 S Ebey Rd Coupeville, WA 98239		Campaign manager		\$120.00
			Total from attached pag	es \$	\$0.00

4. TOTAL CASH EXPENDITURES