

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4(3/97)

PDC OFFICE USE 100869477 AMENDS 100866698 10-28-2018

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

NORMA SMITH (Friends	of Norma Smith)						
Mailing Address PO Box 270						City Clinton, WA		
Zip + 4 98236	Office Sought (Candida STATE REPRESEN	•	Electi 2018	ion Dai	te	*For PACs, Parties & Ca		
Report Period From (last C-	4) To (end o	of period)	Final	Repor	t?	expenditure (i.e., an expens	e not consid	dered a contribution)
Covered 09/01/1	8 10/1	5/18	Yes	No	x	supporting or opposing a stat	e or local ca	andidate?
RECEIPTS						*See next page	Yes	No
Previous total cash and in ki (if beginning a new campaign	nd contributions (From lin n or calendar year, see in:	e 8, last C-4) struction bool	klet)				\$	\$63,539.59
2. Cash received (From line 2,	Schedule A)					···· <u>\$</u> \$\$64,964.45	-	
3. In kind contributions received	d (From line 1, Schedule I	3)				\$435.11	-	
4. Total cash and in kind contri	butions received this perio	od (Line 2 plu	s 3)					\$65,399.56
5. Loan principal repayments m							-	
6. Corrections (From line 1 or 3	3, Schedule C)			. Show	+ or (\$0.00	<u>-</u>	
7. Net adjustments this period								\$0.00
8. Total cash and in kind contri	butions during campaign	(Combine line	es 1, 4 & 7	')				\$128,939.15
9. Total pledge payments due ((From line 2, Schedule B)			\$0.	00			
EXPENDITURES								
Previous total cash and in ki (If beginning a new campaig	nd expenditures (From lin n or calendar year, see in	e 17, last C-4 struction bool	l) klet)					\$39,984.40
11. Total cash expenditures (Fro	om line 4, Schedule A)					\$42,365.52	<u> </u>	
12. In kind expenditures (goods	& services) (From line 1,	Schedule B) .				\$435.11	-	
13. Total cash and in kind exper								\$42,800.63
14. Loan principal repayments m	nade (From line 2, Schedu	ıle L)				\$0.00	<u>!</u>	
15. Corrections (From line 2 or 3	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 exper	nditures during campaign	(Combine line	es 10, 13 a	and 16)			\$82,785.03
CANDIDATES ONLY		ASH SUMMA						
Won Lost	Unopposed on ballot 18					nce(s) plus your petty cash balance.]		\$46,154.12
Primary election		9. Liabilities:	(Sum of lo	ans ar	nd deb	ts owed)		\$0.00
Treasurer's Daytime Telephone I								•
(253)988-2455	20). Balance (Si	urplus or o	deficit)	(Line	18 minus line 19)		\$46,154.12
CERTIFICATION: I certify that the in		ompanying sch					knowledge.	
Candidate's Signature	Date		Treasure	er's Sig	nature	Э		Date
NORMA SMITH	10/2	8/18	Tom Pe	erry			1	10/28/18

CASH RECEIPTS AND EXPENDITURE

SCHEDULE to C4

A

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

Report Date

NORMA SMITH (Friends of Norma Smith)

09/01/18 10/15/18

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
09/06/2018	\$6,050.00	09/20/2018	\$16,330.00	09/26/2018	\$8,459.45	
09/13/2018	\$5,477.00	09/25/2018	\$2,590.00	10/03/2018	\$4,346.00	
09/17/2018	\$4,502.00	09/28/2018	\$10,310.00	See attached		

2. TOTAL CASH RECEIPTS Enter also on line 2 of C4 \$ \$64,964.4

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.

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	\$652.93
09/26/18	ANEDOT PO Box 84314 Baton Rouge, LA 70884		Credit card fees	\$336.22
09/15/18	USPS 4801 Deer Lake Rd Clinton, WA 98236		PO Box rental	\$214.00
09/17/18	CHEVRON 6335 S Storkson Dr Clinton, WA 98236		Gas	\$56.95
10/01/18	SHELL 5618 Fish Rd Freeland, WA 98249		Gas	\$56.26
10/06/18	COSTCO 1725 S Burlington Blvd Burlington, WA 98233		Gas	\$51.58
09/30/18	ADP 20700 44th Ave W Lynnwood, WA 98036		Payroll taxes	\$513.84

Total from attached pages \$

\$40,483.74

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$

\$42,365.52

EXPENDITURES CONTINUATION SHEET (Attachment to Schedule A)

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

Report Date

NORMA SMITH (Friends of Norma Smith) 09/01/18 10/15/18

Date Paid	Vendor or Recipient (Name and Address)	Code	Purpose of Expense and/or Description	Amount
09/30/18	KRISTEN SCHUSTER 1150 Cedar Cir Langley, WA 98260		Payroll	\$888.92
09/30/18	ABBEY SHERMAN 154 S Ebey Rd Coupeville, WA 98239		Payroll	\$1,154.37
10/10/18	CARTER AGENCY, INC. 3400 188TH ST SW STE 401 LYNNWOOD, WA 98037		Cable TV advertising: 10/17 - 11/5	\$20,000.00
10/10/18	CARTER AGENCY, INC. 3400 188TH ST SW STE 401 LYNNWOOD, WA 98037		Radio advertising: 10/13 - 11/5	\$1,700.00
10/10/18	CARTER AGENCY, INC. 3400 188TH ST SW STE 401 LYNNWOOD, WA 98037		Online advertising	\$11,000.00
10/10/18	CARTER AGENCY, INC. 3400 188TH ST SW STE 401 LYNNWOOD, WA 98037		Website design & development	\$1,250.00
10/10/18	CARTER AGENCY, INC. 3400 188TH ST SW STE 401 LYNNWOOD, WA 98037		Mail piece (15000)	\$2,420.64
10/10/18	CARTER AGENCY, INC. 3400 188TH ST SW STE 401 LYNNWOOD, WA 98037		Graphic design	\$506.25
10/06/18	WASHINGTON STATE FERRIES 801 Alaskan Way Seattle, WA 98104		Ferry	\$147.40
10/08/18	PRINT NW 9914 32nd Ave S Lakewood, WA 98499		Postage for mail piece	\$91.23
09/19/18	BEN SCHUSTER 1150 Ceder Cir Langley, WA 98260		Sign installation	\$375.00
10/11/18	SAFEWAY 4102 Rucker Ave Everett, WA 98203		Gas	\$53.35

Page Total \$ \$39,587.16

EXPENDITURES CONTINUATION SHEET (Attachment to Schedule A)

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

Report Date

NORMA SMITH (Friends of Norma Smith) 09/01/18 10/15/18

Date Paid	Vendor or Recipient (Name and Address)	Code	Purpose of Expense and/or Description	Amount
09/11/18	MOBIL 14481 State Route 525 Langley, WA 98260		Gas	\$54.51
09/14/18	PRINT NW 9914 32nd Ave S Lakewood, WA 98499		H stakes	\$82.43
09/14/18	PRINT NW 9914 32nd Ave S Lakewood, WA 98499		Yard signs	\$407.63
09/27/18	OFFICE MAX 775 NE Koetje St Oak Harbor, WA 98277		Office supplies	\$93.37
09/21/18	MOBIL 1 S Main St Coupeville, WA 98239		Gas	\$58.64
09/20/18	CYNTHIA WOERNER PHOTOGRAPHY 588 Wanamaker Rd Coupeville, WA 98239		Photography services	\$200.00

Attachment to Schedule A Additional Deposits

for the period: 09/01/18 10/15/18

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Name

NORMA SMITH (Frie	ends of Norma	Smith)			
Date of Deposit	Amount \$2,125.00	Date of Deposit	Amount	Date of Deposit	Amount
10/12/18	\$4,775.00				
				i	

IN KIND CONTRIBUTIONS, PLEDGES, ORDERS, DEBTS, OBLIGATIONS

SCHEDULE TO C4 **B** (11/93)

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Candidate or Committee Name (Do not abbreviate. Use full name.)
NORMA SMITH (Friends of Norma Smith)

Report Date **09/01/18 1**

10/15/18

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
09/13/18	SCHENK PACKING COMPANY, INC. 1321 S 6th St Mount Vernon, WA 98273	Event food	\$87.50	\$87.50		х	о о о о о г
09/13/18	COYNE JESERNIG LLC 625 Delphi Rd NW Olympia, WA 98502	Rexville Grocery: Event beverages	\$149.94	\$149.94		х	
10/15/18	WASHINGTON STATE REPUBLICAN 11811 NE 1st St Ste 306 Bellevue, WA 98005	Mail piece & postage	\$197.67	\$197.67		х	
-							
		TOTAL THIS PAGE	\$435.11				