

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4(3/97)

PDC OFFICE USE 110016412

04-12-2021

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

| (Committee to Elect Pe | ter Abbarno) | | | | | | | |
|---|--|---|-------------|----------|--------------------------------|------------------------------|-------------|----------------------------|
| Mailing Address PO Box 94 | | | | | | City Centralia, WA | | |
| Zip + 4 | Office Sought (Cand | lidates) | Elect | ion Date | е | *For PACs, Parties & C | aucus | Committees: During |
| 98531 | STATE REPRES | | | | this report period, did the co | | | |
| Report Period From (last C-4 | 4) To (er | nd of period) | Final | Report | | expenditure (i.e., an expens | se not c | considered a contribution) |
| Covered 02/01/2: | 1 03 | /31/21 | Yes | No : | x | supporting or opposing a sta | ite or lo | cal candidate? |
| RECEIPTS | | | | | | *See next page | Yes | No No |
| Previous total cash and in kir (if beginning a new campaign | nd contributions (From n or calendar year, see | line 8, last C-4) e instruction boo | klet) | | | | · <u>\$</u> | \$2,019.14 |
| 2. Cash received (From line 2, 9 | Schedule A) | | | | | ···_\$ \$0.00 | _ | |
| 3. In kind contributions received | d (From line 1, Schedu | ile B) | | | | \$0.00 | _ | |
| 4. Total cash and in kind contrib | outions received this p | eriod (Line 2 plu | s 3) | | | | | \$0.00 |
| 5. Loan principal repayments m | | | | | | | _ | |
| 6. Corrections (From line 1 or 3 | | | | | | | _ | |
| 7. Net adjustments this period (Combine line 5 & 6) | | | | | | \$0.00 | | |
| 8. Total cash and in kind contributions during campaign (Combine lines 1, 4 & 7) | | | | | | \$2,019.14 | | |
| 9. Total pledge payments due (| From line 2, Schedule | B) | | \$0.0 | 00 | | | |
| Previous total cash and in kir (If beginning a new campaigr | nd expenditures (From n or calendar year, see | line 17, last C-4 instruction boo | l) klet) | | | | | \$48.70 |
| 11. Total cash expenditures (Fro | m line 4, Schedule A) | | | | | \$134.0 | <u>0</u> | |
| 12. In kind expenditures (goods & services) (From line 1, Schedule B) | | | | | Ω | | | |
| 13. Total cash and in kind expenditures made this period (Line 11 plus line 12) | | | | | | \$134.00 | | |
| 14. Loan principal repayments made (From line 2, Schedule L) | | | | | <u>0</u> | | | |
| 15. Corrections (From line 2 or 3, Schedule C) | | | | | <u>0</u> | | | |
| 16. Net adjustments this period (Combine lines 14 & 15) | | | | | | | \$0.00 | |
| 17. Total cash and in kind expen- | ditures during campaig | gn (Combine line | es 10, 13 | and 16) | | | | \$182.70 |
| CANDIDATES ONLY | Name not | CASH SUMMA | RY | | | | | |
| Won Lost l | Unopposed on ballot | | | | | | | \$1,836.44 |
| Primary election | | [Line 18 should equal your bank account balance(s) plus your petty cash balance.] | | | | | | |
| General election | | | | | | | \$0.00 | |
| Treasurer's Daytime Telephone No.: | | | | | | 70.00 | | |
| (360)706-7137 | 20. Balance (Surplus or deficit) (Line 18 minus line 19) | | | | | | \$1,836.44 | |
| 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 Treasurer's Signature | | | | nature | | · <u> </u> | Date | |
| PETER ABBARNO | BARNO 04/12/21 Fred Rider | | | 2 | | | 04/12/21 | |

CASH RECEIPTS AND EXPENDITURE

SCHEDULE to C4

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| () | |

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

Report Date

| | | | , | | | |
|----------------------|---------------------|--------------------------|----------------------|--------------------------|------------------------|--------------------|
| (Committee to Ele | ect Peter 2 | Abbarno) | | | 02/01/21 | 03/31/21 |
| 1. CASH RECEIPTS (Co | ontributions) which | h have been reported o | n C3. List each dep | oosit made since last C4 | report was submitted. | |
| Date of deposit | Amount | Date of deposit | Amount | Date of deposit | Amount | Total deposits |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 2. TOTAL CASH RECEIP | PTS | | | Enter als | so on line 2 of C4 | \$0.00 |
| CODES FOR CLASSIF | FYING EXPEND | ITURES: If one of the fo | llowing codes is use | ed to describe an expend | liture no other descri | otion is generally |

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 | |
| 02/10/21 | PETER ABBARNO PO Box 94 Centralia, WA 98531 | | Reimburse PO Box rental | \$134.00 |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | Total from attached page | \$ \$0.00 |

Total from attached pages

\$0.00

Enter also on line 11 of C4

\$134.00