## PUBLIC DISCLOSURE COMMISSION 711 CAPITOL WAY RM 206 PO BOX 40908 OLYMPIA WA 98504-0908 (360) 753-1111 TOLL FREE 1-877-601-2828

## SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

**C4**(3/97)

PDC OFFICE USE 110031739

07-12-2021

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

(Hilary Franz Surplus	Funds)						
Mailing Address City 401 2nd Ave S Ste 303 Seattle, WA							
Zip + 4 98104	Office Sought (Candidates)	Elect <b>202</b> 0	ion Date		, Parties & Cau		
Report Period From (last C-4	To (end of pe	riod) Final	Report?	expenditure	(i.e., an expense	not consider	ed a contribution)
Covered 06/01/23	L 06/30/2	21 Yes	No X	supporting o	r opposing a state	e or local can	<u>didate</u> ?
RECEIPTS				*See next pa	age	Yes	No
Previous total cash and in kin (if beginning a new campaign	nd contributions (From line 8, or calendar year, see instruc	last C-4) ction booklet)			 	\$	\$50,000.00
2. Cash received (From line 2, §	Schedule A)			····· <u>\$</u>	\$0.00		
3. In kind contributions received	(From line 1, Schedule B)				\$0.00		
4. Total cash and in kind contrib	outions received this period (L	ine 2 plus 3)			<u>-</u>		\$0.00
5. Loan principal repayments ma	ade (From line 2, Schedule L	)			\$0.00		
6. Corrections (From line 1 or 3,	, Schedule C)		. Show + or	r (-)	\$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 (Con	mbine lines 1, 4 & 7	7)	 1	<u>-</u>		\$50,000.00
9. Total pledge payments due (F	From line 2, Schedule B)		\$0.00				
EXPENDITURES							
<ol><li>Previous total cash and in kin (If beginning a new campaign</li></ol>	nd expenditures (From line 17 n or calendar year, see instruc	7, last C-4) ction booklet)			<u>-</u>		\$17,931.56
11. Total cash expenditures (From	m line 4, Schedule A)				\$0.00		
12. In kind expenditures (goods &	& services) (From line 1, Sche	edule B)			\$0.00		
13. Total cash and in kind expend	ditures made this period (Line	e 11 plus line 12)			 		\$0.00
14. Loan principal repayments ma	ade (From line 2, Schedule L	)			\$0.00		
15. Corrections (From line 2 or 3,	, Schedule C)		. Show + or	r (-)	\$0.00		
16. Net adjustments this period (	Combine lines 14 & 15)				Show + or (-)		\$0.00
17. Total cash and in kind expenditures during campaign (Combine lines 10, 13 and 16)							\$17,931.56
CANDIDATES ONLY  Name not  Won  Lost Unopposed on ballot  18. Cash on hand			8 minus line	. 17\			\$32,068.44
[Line 18 should equal your bank account balance						402/00011	
Primary election		abilities: (Sum of lo	oans and de	ebts owed)			<b>\$0.00</b>
Treasurer's Daytime Telephone N (206)682-7328	20. Balance (Surplus or deficit) (Line 18			e 18 minus line	19)		\$32,068.44
	in marking based and a						702,000.11
CERTIFICATION: I certify that the information Candidate's Signature	formation herein and on accompa Date		attachments er's Signatu		ct to the best of my	knowledge.	Date
HILARY FRANZ	07/12/2	21 Josie	Olsen			07	/12/21

## **CASH RECEIPTS AND EXPENDITURE**

SCHEDULE to C4

Candidate or Co	Candidate or Committee Name (Do not abbreviate. Use full name.)					Report Date		
(Hilary Fra	nz Surplus Fund	s)			06/01/21	06/30/21		
1. CASH RECE	IPTS (Contributions) which	ch have been reported or	n C3. List each	deposit made since las	t C4 report was submitte	ed.		
Date of deposit	Amount	Date of deposit	Amou	nt Date of deposit	Amount	Total deposits		
2. TOTAL CAS	H RECEIPTS	<u> </u>		Ent	er also on line 2 of C4	\$ \$0.00		
<ol> <li>If expendit commit commit</li> <li>When reportant for the commit commit with the commit co</li></ol>	exceptions are: cures are in-kind or earmar ittee, identify the candidate orting payments to vendors cures are made directly or n, use code "V" and provid t paid each during the rep	or committee in the Des for travel expenses, ide indirectly to compensate the following information	scription block; ntify the travele a person or ent on on an attache	r and travel purpose in tity for soliciting signatured sheet: name and add	the Description block; ar es on a statewide initiati dress of each person/en	nd ve or referendum		
C	DEFINITIONS L DN NEXT PAGE B N O	- Contributions (monetar Independent Expenditur - Literature, Brochures, F - Broadcast Advertising - Newspaper and Period - Other Advertising (yard - Voter Signature Gather	es Printing (Radio, TV) lical Advertising d signs, buttons	S F T N W , etc.)	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			
amour b) Itemize c) For ea	RES ditures of \$50 or less, include the column on the first line be each expenditure of more chipayment to a candidate of receipts/invoices support	elow <u>e than \$50</u> by date paid, e, campaign worker, PR f	name and addr	ess of vendor, code/des	cription, and amount.			
Date Paid		r Recipient nd Address)	Code		of Expense escription	Amount		
NI/A	Eyponeon of	¢EO or loop	NI/A	N1/A				

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	
			Total from attached pag	es \$ \$0.0

Total from attached pages \$ \$0.00

\$0.00

Enter also on line 11 of C4 \$