PO BOX 40908 OLYMPIA WA 98504-0908			SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES			C4 (3/97)		DC OFFICE USE
Candidate or Committe			clude full name)				10	-08-2021
(KELLY M. CHAME	BERS SUR	PLUS ACCOUN	Т)					
Mailing Address 1002 N. MERIDIA	N, STE	100 PMB 207			City PUYALLUP, W	A		
Zip + 4		Office Sought (Ca	,	Election Date	*For PACs, Part	ies & Cau	ucus Comr	nittees: During
98371-4409	rom (loot C (STATE REPRI	ESENTATIVE (end of period)	2023 Final Report?	this report period, d expenditure (i.e., a			
Covered	rom (last C-4		9/30/21		supporting or oppos			
RECEIPTS	09/01/21		19/30/21	Yes No X				
1. Previous total ca	sh and in kin ew campaign	d contributions (Fro or calendar year, s	om line 8, last C-4 see instruction boo) oklet)	*See next page		Yes \$	No \$4,000.00
2. Cash received (F	From line 2, S	Schedule A)			····· \$	\$0.00		
						40.00		
In kind contributi	ons received	(From line 1, Sche	dule B)		·····	\$0.00		
4. Total cash and ir	n kind contrib	utions received this	s period (Line 2 pl	us 3)				\$0.00
5. Loan principal repayments made (From line 2, Schedule L)					\$0.00		i	
6. Corrections (Fro	6. Corrections (From line 1 or 3, Schedule C) Show + or ((-)	\$0.00		
7. Net adjustments this period (Combine line 5 & 6)								\$0.00
8. Total cash and ir	n kind contrib	utions during camp	aign (Combine lin	ies 1, 4 & 7)				\$4,000.00
9. Total pledge pay	ments due (F	From line 2, Schedu	ıle B)	\$0.00				
EXPENDITURES				•				
10. Previous total ca (If beginning a ne	sh and in kin ew campaign	d expenditures (Fro or calendar year, s	om line 17, last C- see instruction boo	4) oklet)				\$2,800.00
11. Total cash exper	11. Total cash expenditures (From line 4, Schedule A)					\$0.00		
12. In kind expenditures (goods & services) (From line 1, Schedule B)					\$0.00			
13. Total cash and ir	n kind expend	ditures made this pe	eriod (Line 11 plus	s line 12)				\$0.00
14. Loan principal repayments made (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)								\$0.00
17. Total cash and ir	n kind expend	ditures during camp	aign (Combine lir	nes 10, 13 and 16)				\$2,800.00
CANDIDATES ONLY		Name not						
Won	Won Lost Unopposed on ballot 18. Cash on hand (Line 8 minus line 17)						\$1,200.00	
Primary election			19. Liabilities:	(Sum of loans and de	bts owed)			\$0.00
Treasurer's Daytime Telephone No.: 20. Balance (Surplus or deficit) (L (253)220-5590 20. Balance (Surplus or deficit) (L				Surplus or deficit) (Line	18 minus line 19)			\$1,200.00
		ormation hars's as 1		hoduloo and atter-transfer	in true and correct to the	bost of	knowlads-	42,200.00
CERTIFICATION: I certify that the information herein and on accompanying schedules and attac Candidate's Signature Date Treasurer's				Treasurer's Signatu		best of my	n iowieage.	Date
KELLY CHAMBERS		1	0/08/21	JASON MICHAU	D		10)/08/21

CASH RECEIPTS AND EXPENDITURE



Candidate or Committee Name	e (Do not abl	breviate. Use full name.)			F	Report Date
(KELLY M. CHAMBERS	SURPLUS	ACCOUNT)			09/01/21	09/30/21
1. CASH RECEIPTS (Contri	butions) whic	h have been reported on C3.	List each dep	osit made since last C4	report was submitted	1.
Date of deposit	Amount	Date of deposit	Amount	Date of deposit	Amount	Total deposits
2. TOTAL CASH RECEIPTS Enter also on line 2 of C4					so on line 2 of C4	\$ \$0.00

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 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.

C - Contributions (monetary, in-kind & transfers)

CODF 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.)
- V Voter Signature Gathering

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- 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	A	mount
N/A	Expenses of \$50 or less	N/A	N/A		
			Total from attached pag	es \$	\$0.00

4. TOTAL CASH EXPENDITURES