

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4(3/97)

PDC OFFICE USE 110062729

11-30-2021

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

People for Amber Wald	ref)									
Mailing Address City O Box Spokane, WA										
Zip + 4 Office Sought (0) 9202 COUNTY CO						*For PACs, Parties & Caucus this report period, did the committee				
Report Period From (last C-4	4) To (er	nd of period)	Final	Report?	exp	enditure (i	.e., an expens	e not conside	red a contribution)	
Covered 11/17/23	1 11	/30/21	Yes	No X	sup	porting or c	pposing a stat	<u>e or local can</u>	ididate?	
RECEIPTS					*Se	e next pag	е	Yes	No	
Previous total cash and in kir (if beginning a new campaign	nd contributions (From n or calendar year, se	n line 8, last C-4) e instruction boo	klet)					\$	\$0.00	
2. Cash received (From line 2, §	Schedule A)				5	\$	\$100.00	-		
3. In kind contributions received	l (From line 1, Schedu	ule B)					\$0.00	-		
4. Total cash and in kind contrib	outions received this p	period (Line 2 plu	ıs 3)						\$100.00	
5. Loan principal repayments m								-		
6. Corrections (From line 1 or 3,	, Schedule C)			Show + or	r (-)		\$0.00	-		
7. Net adjustments this period (\$0.00	
8. Total cash and in kind contrib	outions during campai	gn (Combine line	es 1, 4 & 7)	 1				\$100.00	
9. Total pledge payments due (I	From line 2, Schedule	e B)		\$0.00						
EXPENDITURES										
Previous total cash and in kin (If beginning a new campaigr	id expenditures (From i or calendar year, se	n line 17, last C-4 e instruction boo	1) klet)						\$0.00	
11. Total cash expenditures (From	m line 4, Schedule A)						\$0.00	<u>)</u>		
12. In kind expenditures (goods & services) (From line 1, Schedule B)							\$0.00	1		
13. Total cash and in kind expend	ditures made this peri	od (Line 11 plus	line 12)						\$0.00	
14. Loan principal repayments m	ade (From line 2, Sch	nedule L)					\$0.00	<u>)</u>		
15. Corrections (From line 2 or 3,	, Schedule C)			Show + or	r (-)		\$0.00	<u>)</u>		
16. Net adjustments this period (Combine lines 14 & 1	5)					Show + or (-)		\$0.00	
17. Total cash and in kind expend	ditures during campai	<u>- </u>		and 16)					\$0.00	
CANDIDATES ONLY Won Lost U	Name not Jnopposed on ballot	18. Cash on ha		minus line	a 17\				\$100.00	
		[Line 18 should							420000	
Primary election		19. Liabilities:	(Sum of lo	ans and de	ebts ow	/ed)			\$0.00	
Treasurer's Daytime Telephone No.: 20. Balance (Surplus or deficit) (Line 18 minus line 19)										
(509)995-7702		20. Dalaile (S	aipius oi 0	ionoit) (Line	C 10 IIII	inas inie 18	·, ······		\$100.00	
CERTIFICATION: I certify that the inf	formation herein and on	accompanying sch	edules and	attachments	s is true	and correct	to the best of my	/ knowledge.		
Candidate's Signature	Date			er's Signatu					Date	
WALDREF AMBER C	11	/30/21	Kandad	ce Watk	cins			11	L/30/21	

CASH RECEIPTS AND EXPENDITURE

4. TOTAL CASH EXPENDITURES

SCHEDULE to C4

A		
11/93)		

Enter also on line 11 of C4 \$

\$0.00

2

Condidate or Committee No	ma /Da nat ah	brovioto I loo full name	\		(11/93)	Por	oort Date
Candidate or Committee Na	`	breviate. Use full name.,)			·	
(People for Amber						17/21	11/30/21
CASH RECEIPTS (Cor	ntributions) whic	h have been reported on	C3. List each der	oosit made since las	t C4 report was	submitted.	
Date of deposit	Amount	Date of deposit	Amount	Date of deposit	Α	mount	Total deposits
11/19/2021	\$100.00						
, -, -							
2. TOTAL CASH RECEIPT	TS			Ent	er also on line 2	2 of C4 \$ _	\$100.00
When reporting paymIf expenditures are m petition, use code	ents to vendors ade directly or i "V" and provide	or committee in the Des for travel expenses, idendirectly to compensate e the following informatio orting period, and cumula	ntify the traveler ar a person or entity f n on an attached s	or soliciting signatur heet: name and ad	es on a statewion dress of each pe	de initiative o erson/entity o	
CODE DEFINITION ON NEXT P	NS I-PAGE B	 Contributions (monetar Independent Expenditur Literature, Brochures, F Broadcast Advertising (Newspaper and Period Other Advertising (yard Voter Signature Gather 	es Printing (Radio, TV) ical Advertising I signs, buttons, etc	S F T N c.)	- Postage, Mail - Surveys and I - Fundraising E - Travel, Accon I - Management / - Wages, Sala - General Opel	Polls Event Expens Inmodations, Consulting Fries, Benefits	Meals Services s
amount column o b) Itemize each expe c) For each paymen	n the first line b enditure of <u>more</u> It to a candidate	uding those from petty ca elow ethan \$50 by date paid, r, campaign worker, PR forting the payment.	name and address	of vendor, code/des	cription, and an	nount.	

	Vendor or Recipient		Purpose of Expense	
Date Paid	(Name and Address)	Code	Purpose of Expense and/or Description	Amount
N/A	Expenses of \$50 or less	N/A	N/A	
	1	1	Total from attached pages	\$ \$0.00