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 110069966

01-10-2022

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

(Joy for Washington)									
Mailing Address City po box 354 carson, WA									
Zip + 4 98610	Office Sought (Candidate STATE REPRESENT		Electi 2022	on Da	te				nmittees: During e an independent
Report Period From (last C-	4) To (end of p	period)	Final	Repor	t?	expenditu	I re (i.e., an expen	se not consid	ered a contribution)
Covered 11/22/2	1 11/30	/21	Yes	No	x	supporting	or opposing a st	ate or local ca	<u>ındidate</u> ?
RECEIPTS			·			*See next	page	Yes	No
Previous total cash and in kil (if beginning a new campaign	nd contributions (From line and or calendar year, see insti	8, last C-4) ruction book	det)					··_\$	\$0.00
2. Cash received (From line 2,	Schedule A)					··· _ \$	\$1,000.00	<u> </u>	
3. In kind contributions received	d (From line 1, Schedule B)						\$0.00	<u> </u>	
4. Total cash and in kind contril									\$1,000.00
5. Loan principal repayments m								<u> </u>	
6. Corrections (From line 1 or 3									
7. Net adjustments this period (\$0.00
8. Total cash and in kind contril	butions during campaign (C	ombine line	s 1, 4 & 7)					\$1,000.00
9. Total pledge payments due (From line 2, Schedule B)			\$0.	.00				
EXPENDITURES									
 Previous total cash and in king (If beginning a new campaign 	nd expenditures (From line n or calendar year, see insti	17, last C-4 ruction bool) <let)< td=""><td></td><td></td><td></td><td></td><td></td><td>\$0.00</td></let)<>						\$0.00
11. Total cash expenditures (Fro	om line 4, Schedule A)						\$10.0	<u>0</u>	
12. In kind expenditures (goods	& services) (From line 1, So	chedule B) .					\$0.0	10	
13. Total cash and in kind expen	ditures made this period (Li	ine 11 plus	line 12)						\$10.00
14. Loan principal repayments m	nade (From line 2, Schedule	: L)					\$0.0	<u> 0</u>	
15. Corrections (From line 2 or 3	s, Schedule C)			. Show	/ + or ([-)	\$0.0	0	
16. Net adjustments this period ((Combine lines 14 & 15)						Show + or (-)		\$0.00
17. Total cash and in kind expen				and 16	5)				\$10.00
CANDIDATES ONLY Won Lost		SH SUMMA Cash on ha		minu:	s line	17)			\$990.00
[Line 18 should equal your bank account balance					-	•			
General election	Primary election					·	\$0.00		
Treasurer's Daytime Telephone N		Balance (Su	urplus or o	deficit)	(Line	18 minus lin	e 19)		\$990.00
	formation boroin and an asser	nanvina ach	adulac and	attach	monto:	s true and as-	root to the best of a	ny knowladas	
CERTIFICATION: I certify that the information herein and on accompanying schedules and attachments is tr Candidate's Signature Date Treasurer's Signature					TECT TO THE DEST OF L	ny knowieage.	Date		
HANNAH JOY	01/10/22			Crystal Patton				0	1/10/22

CASH RECEIPTS AND EXPENDITURE

SCHEDULE

1	
93)	

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

Report Date

	(,			•
(Joy for Washi	.ngton)				11/22/21	11/30/21
1. CASH RECEIPTS	(Contributions) which	h have been reported or	n C3. List each dep	oosit made since last C4	report was submitted	I.
Date of deposit	Amount	Date of deposit	Amount	Date of deposit	Amount	Total deposits
11/29/2021	\$1,000.00					
2. TOTAL CASH RE	CEIPTS			Enter a	lso on line 2 of C4	\$ \$1,000.00

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:

- 1) If expenditures are in-kind or earmarked contributions to a candidate or committee or independent expenditures that benefit a candidate or 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.

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

Enter also on line 11 of C4

\$10.00

- F Fundraising Event Expenses
- T Travel, Accommodations, Meals
- M Management/Consulting Services W - Wages, Salaries, Benefits
- G General Operation and Overhead

3. EXPENDITURES

4. TOTAL CASH 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		\$10.00
			Total from attached pag	es \$	\$0.00