

## SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

**C4**(3/97)

PDC OFFICE USE 110072999

02-09-2022

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

(April for Washington)					
Mailing Address 3911 W. 27th Ave., Ste	101 PMB 101			City <b>Kennewick, WA</b>	
Zip + 4 99337	Office Sought (Candidates) STATE REPRESENTAT		on Date	*For PACs, Parties & Caucu	
Report Period From (last C-4)	To (end of peri	od) Final	Report?	expenditure (i.e., an expense no	t considered a contribution)
Covered 01/01/22	01/31/2	2 Yes	No X	supporting or opposing a state or	local candidate?
RECEIPTS		<u> </u>		*See next page Y	es No
Previous total cash and in kind (if beginning a new campaign	d contributions (From line 8, la or calendar year, see instruct	ast C-4) ion booklet)		<u>\$</u>	\$7,174.03
2. Cash received (From line 2, S	chedule A)			··· \$ \$13,500.00	
3. In kind contributions received	(From line 1, Schedule B)			\$0.00	
4. Total cash and in kind contribu	utions received this period (Lin	ne 2 plus 3)			\$13,500.00
5. Loan principal repayments ma					
6. Corrections (From line 1 or 3,	Schedule C)		Show + or (	\$0.00	
7. Net adjustments this period (C					\$0.00
8. Total cash and in kind contribu	utions during campaign (Coml	bine lines 1, 4 & 7	)		\$20,674.03
9. Total pledge payments due (F	rom line 2, Schedule B)		\$0.00		
EXPENDITURES					
<ol><li>Previous total cash and in kind (If beginning a new campaign</li></ol>	d expenditures (From line 17, or calendar year, see instruct	last C-4) ion booklet)			\$174.03
11. Total cash expenditures (From	n line 4, Schedule A)			<u>\$550.75</u>	
12. In kind expenditures (goods &	services) (From line 1, Sched	dule B)		\$0.00	
13. Total cash and in kind expend	itures made this period (Line	11 plus line 12)		<u> </u>	\$550.75
14. Loan principal repayments ma	de (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 (C	Combine lines 14 & 15)			Show + or (-)	\$0.00
17. Total cash and in kind expend			ınd 16)		\$724.78
CANDIDATES ONLY  Won Lost U		SUMMARY sh on hand (Line 8	minus line	17)	\$19,949.25
Primary election	[Line 1	8 should equal your ba	nk account bala	nce(s) plus your petty cash balance.]	
General election		oilities: (Sum of lo	ans and det	ots owed)	\$1,137.10
Treasurer's Daytime Telephone No.:  20. Balance (Surplus or deficit) (Line 18 minus (253) 220 – 5590			18 minus line 19)	\$18,812.15	
CERTIFICATION: I certify that the info	ormation herein and an accompan	wing schodules and	attachmente :	e true and correct to the heat of my less	-
Candidate's Signature	Date		er's Signatur		Date
APRIL R CONNORS 02/09/22 Jason Michaud			1	02/09/22	

### CASH RECEIPTS AND EXPENDITURE

SCHEDULE

01/31/22

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

Report Date

(April for Washington)

01/01/22 1. CASH RECEIPTS (Contributions) which have been reported on C3. List each deposit made since last C4 report was submitted.

Date of deposit	Amount	Date of deposit	Amount	Date of deposit	Amount	Total deposits
01/03/2022	\$3,600.00	01/05/2022	\$1,000.00	01/07/2022	\$1,000.00	
01/04/2022	\$500.00	01/06/2022	\$1,500.00	01/10/2022	\$200.00	
01/04/2022	\$1,750.00	01/07/2022	\$1,200.00	See attached		

\$ Enter also on line 2 of C4 TOTAL CASH RECEIPTS \$13,500.00

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
- 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		\$238.00
01/03/22	EFUNDRAISING CONNECTIONS 2831 G Street, Ste 200 Sacramento, CA 95816	G	Payment Processing		\$164.50
01/04/22	EFUNDRAISING CONNECTIONS 2831 G Street, Ste 200 Sacramento, CA 95816	G	Payment Processing		\$79.75
01/06/22	EFUNDRAISING CONNECTIONS 2831 G Street, Ste 200 Sacramento, CA 95816	G	Payment Processing		\$68.50
		I	Total from attached pag	es \$	\$0.00

Enter also on line 11 of C4

\$550.75

## Attachment to Schedule A Additional Deposits

Name

(April for Washi	ington)				
Date of Deposit  01/11/22  01/12/22  01/21/22  01/25/22  01/26/22	Amount \$500.00 \$500.00 \$250.00 \$1,000.00 \$500.00	Date of Deposit	Amount	Date of Deposit	Amount

for the period: 01/01/22

01/31/22

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# IN KIND CONTRIBUTIONS, PLEDGES, ORDERS, DEBTS, OBLIGATIONS

SCHEDULE TO C4 B

4

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

(April for Washington)

Report Date

01/01/22 01/31/22

3. ORDERS PLACED, DEBTS, OBLIGATIONS. (Give estimate if actual amount not known. Exclude loans. Report loans on Schedule L.)

Expenditure Date	Vendor's/Recipient's Name and Address	ess	Amount Owed	Code	OR Description of Obligation
12/30/2021	AB HAYS, LLC PO Box 2101 Tacoma WA, 98401		313.91		Print NW (Lakewod, WA): 1,500 Envelopes
12/30/2021	AB HAYS, LLC PO Box 2101 Tacoma WA, 98401		150.95		Print NW (Lakewood, WA): 1,000 Business Cards
12/30/2021	AB HAYS, LLC PO Box 2101 Tacoma WA, 98401		467.19		Print NW (Lakewood, WA): 1,500 Remits
12/30/2021	AB HAYS, LLC PO Box 2101 Tacoma WA, 98401		205.05		Administration and Transaction Fee
	ТС	OTAL THIS PAGE	1137.10		1