

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4(3/97)

PDC OFFICE USE 110073722

02-10-2022

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

(Joy for Washington)									
Mailing Address po box 354						City carson,	. WA		
Zip + 4 98610	Office Sought (Candida STATE REPRESE)		Electi 2022	ion Da 2	ite		s, Parties & Ca		nittees: During an independent
Report Period From (last C-	4) To (end	of period)	Final	Repor	rt?	expenditure	<u>e</u> (i.e., an expens	e not conside	red a contribution)
Covered 01/01/2	2 01/3	31/22	Yes	No	x	supporting of	or opposing a stat	e or local car	didate?
RECEIPTS			•			*See next p	age	Yes	No
Previous total cash and in kil (if beginning a new campaign	nd contributions (From lir n or calendar year, see in	ne 8, last C-4) estruction bool	klet)					\$	\$1,691.88
2. Cash received (From line 2,	Schedule A)					··· _ \$	\$4,440.00	-	
3. In kind contributions received	d (From line 1, Schedule	B)					\$81.64	-	
4. Total cash and in kind contril	outions received this peri	od (Line 2 plu	s 3)						\$4,521.64
5. Loan principal repayments m								-	
6. Corrections (From line 1 or 3	, Schedule C)			. Show	/ + or ([-)	(\$100.00)	-	
7. Net adjustments this period (Combine line 5 & 6)						Show + or (-)		(\$100.00)
8. Total cash and in kind contril	outions during campaign	(Combine line	es 1, 4 & 7	")	·······				\$6,113.52
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 Iir n or calendar year, see ir	ne 17, last C-4 estruction bool	·) klet)						\$290.13
11. Total cash expenditures (Fro	m line 4, Schedule A)						\$1,966.32	<u>!</u>	
12. In kind expenditures (goods	& services) (From line 1,	Schedule B) .					\$81.64	Ł	
13. Total cash and in kind expen	ditures made this period	(Line 11 plus	line 12)						\$2,047.96
14. Loan principal repayments m	nade (From line 2, Sched	ule L)					\$0.00	<u>)</u>	
15. Corrections (From line 2 or 3	, Schedule C)			. Show	/ + or ((-)	(\$100.00)	_	
16. Net adjustments this period (Combine lines 14 & 15).						Show + or (-)		(\$100.00)
17. Total cash and in kind expen				and 16	6)				\$2,238.09
CANDIDATES ONLY Won Lost		ASH SUMMA		R minu	e lina '	17)			\$3,875.43
							etty cash balance.]		70/0/01
Primary election		9. Liabilities:	(Sum of Ic	ans a	nd dek	ots owed)			\$0. 00
Treasurer's Daytime Telephone N		0. Balance (Si	urplus or o	deficit)	(Line	18 minus line	19)		\$3,875.43
CERTIFICATION: I certify that the in	formation herein and on acc	ompanying sch	edules and	attachi	ments i	s true and corre	ect to the best of my	knowledae.	
Candidate's Signature	Date	,,9 3311	Treasure						Date
HANNAH JOY	02/1	0/22	Krvst	al P	atto	on		02	2/10/22

CASH RECEIPTS AND EXPENDITURE

SCHEDULE to C4

A

01/01/22

2

01/31/22

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

Report Date

(Joy for Washington)

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	\$500.00	01/12/2022	\$1,000.00	01/17/2022	\$20.00	
01/11/2022	\$1,000.00	01/13/2022	\$50.00	01/21/2022	\$50.00	
01/10/2022	\$1,000.00	01/14/2022	\$200.00	See attached		

TOTAL CASH RECEIPTS Enter also on line 2 of C4 \$ \$4,440.00

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 <u>in-kind or earmarked contributions</u> to a candidate or committee or <u>independent expenditures</u> that benefit a candidate or committee, identify the candidate or committee in the Description block;
- 2) When reporting payments to vendors for travel expenses, identify the traveler and travel purpose in the Description block; and
- 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	\$117.46
01/14/22	SIGN THUG 150 Meadow Park Ct. Woodland, WA 98674	L	Campaign Signs	\$324.90
01/07/22	PRINT NW, LLC 9914 32nd Ave S. Lakewood, WA 98499	os	Hannah Joy 6.5 Remit Envelopes	\$348.16
01/18/22	SKAMANIA COUNTY EVENTS & 710 SW Rock Creek Dr Stevenson, WA 98648	G	Campaign Kick-Off Event location Rental	\$113.09
01/21/22	MPG MARKETING & MAILING SVCS PO Box 28306 Portland , OR 97228-8306	0	Business Cards	\$101.70
01/25/22	THE SKAMANIA PIONEER 74 SW Russell Ave Stevenson, WA 98648	N	Kick-Off Advertising	\$89.40
01/25/22	SIGN THUG 150 Meadow Park Ct. Woodland, WA 98674	L	Campaign Signs	\$509.01
	•	•	Total from attached pages \$	\$362.60

Total from attached pages \$ \$362.60

4. TOTAL CASH EXPENDITURES

Enter also on line 11 of C4 \$ \$1,966.32

EXPENDITURES CONTINUATION SHEET (Attachment to Schedule A)

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

Report Date

(Joy for Washington)

01/01/22

01/31/22

Date Paid	Vendor or Recipient (Name and Address)	Code	Purpose of Expense and/or Description	Amount
01/31/22	ROANOKE CONFERENCE 1752 NW Market St. #4537 Seattle , WA 98107		Roanoke Conference	\$177.60
01/31/22	SHELL OIL 700 Point Brown Ave NE Ocean Shores, WA 98569	т	Fuel	\$85.00
01/30/22	ADAM SCHAEFFER & MARIA WOODALL 619 Shahala E St. North Bonneville , WA 98639		Refund Anedot donation	\$100.00

Attachment to Schedule A Additional Deposits

for the period: 01/01/22

01/31/22

4

Name

(Joy for Washing	ton)				
(Joy for Washing Date of Deposit 01/27/22 01/27/22 01/30/22 01/30/22 01/31/22	Amount \$100.00 \$100.00 \$20.00 \$300.00	Date of Deposit	Amount	Date of Deposit	Amount

IN KIND CONTRIBUTIONS, PLEDGES, ORDERS, DEBTS, OBLIGATIONS

SCHEDULE TO C4 **B** (11/93)

5

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

Report Date

01/01/22

01/31/22

 IN KIND CONTRIBUTIONS RECEIVED (goods, services, discounts)

Date Received	Contributor's Name and Address	Description of Contribution	Fair Market Value	Aggregate Total	P R I	G E N	If total over \$100, Employer Name, City, State & Occup
01/10/22	JOY FAMILY HARDWARE LLC PO Box 1250 Carson, WA 98610	Cell Phone Monthly plan	\$81.64	\$81.64		х	
		TOTAL THIS PAGE	\$81.64		<u> </u>		

CORRECTIONS

SCHEDULE C

6

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

Date

(Joy for Washington) 01/01/22 01/31/22

ections.)
ections

Date of Report	Contributor's Name or Description of Correction	Amount Reported	Corrected Amount	Difference (+ or -)
01/30/22	ADAM SCHAEFFER & MARIA WOODALL 619 Shahala E St.			
	North Bonneville , WA 98639	\$100.00	\$0.00	(\$100.00)
				_
		Total corre	ections to contributions	(\$100.00)
		Enter on line	6 of C4. Show + or (-).	(+=00.00)

CORRECTIONS

SCHEDULE C

7

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

Date

(Joy for Washington) 01/01/22 01/31/22

2.	EXPENDITURES	(Include mathematical corrections.)	
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Date of Report	Vendor's Name or Description of Correction	Amount Reported	Corrected Amount	Difference (+ or -)
01/30/22	ADAM SCHAEFFER & MARIA WOODALL 619 Shahala E St.			
	North Bonneville , WA 98639	\$100.00	\$0.00	(\$100.00)
		Total corre	ections to expenditures 5 of C4. Show + or (-).	(\$100.00)
		⊏nter on line 1	0 01 C4. SHOW + OF (-).	(4=0000)