

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3

(1/02)

THIS SPACE FOR OFFICE USE

100986396

07-27-2020

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

KIM LEHRMAN (Kim for Franklin County)

Mailing Address

PO Box 5781

City

Pasco, WA

Zip + 4

99302

Office Sought (candidates)

COUNTY COMMISSIONER

Election Date

2020

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received		Amount	Total
	a. Anonymous		
	b. Candidate's personal funds deposited in the bank (include candidate loans in 1c)		
	c. Loans, notes, security agreements. Attach Schedule L		
	d. Miscellaneous receipts (interest, refunds, auctions, other). Attach explanation		
	e. Small contributions \$25.00 or less not itemized and number of persons giving _____ (persons)		

2. CONTRIBUTIONS OVER \$25.00

Date Received	Contributor's Name, Address, City, State, Zip	Contributions of more than \$100:* Employer's Name, City and State	P R I N T	G E N E R A L	Amount	Aggregate* Total
07/27/20	MATTHEW WATKINS 8616 Massey Dr Pasco, WA 99301		<input checked="" type="checkbox"/>	<input type="checkbox"/>	\$100.00	\$100.00
	Occupation					
07/27/20	FRANKLIN CO DEMOCRATIC CENTRAL 4209 Mojave Dr Pasco, WA 99301		<input checked="" type="checkbox"/>	<input type="checkbox"/>	\$300.00	\$300.00
	Occupation					
			<input type="checkbox"/>	<input type="checkbox"/>		
	Occupation					
			<input type="checkbox"/>	<input type="checkbox"/>		
	Occupation					
			<input type="checkbox"/>	<input type="checkbox"/>		
	Occupation					
	<input type="checkbox"/> Check here if additional pages are attached	Sub-total			\$400.00	*See reverse for details.
		Amount from attached pages			\$0.00	

3. TOTAL FUNDS RECEIVED AND DEPOSITED OR CREDITED TO ACCOUNT

Sum of parts 1 and 2 above. Enter this amount in line 1, Schedule A to C4.

\$400.00

4. Date of Deposit

07/27/20

I certify that this report is true and complete to the best of my knowledge

Treasurer's Signature

Date

Josie Olsen

07-27-2020

Treasurer's Daytime Telephone No.: (206) 682-7328