

SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

C4(3/97)

PDC OFFICE USE 100987376

07-28-2020

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

KIM LEHRMAN (Kim for	Franklin County	7)							
Mailing Address PO Box 5781						City Pasco,	WA		
Zip + 4 99302	Office Sought (Candidat		Electi 2020	ion Da	te		s, Parties & Ca		mittees: During an independent
Report Period From (last C-	4) To (end o	f period)	Final	Repor	t?	expenditu	<u>re</u> (i.e., an expens	se not conside	ered a contribution)
Covered 07/14/2	0 07/2	7/20	Yes	No	x	supporting	or opposing a sta	te or local ca	<u>ndidate</u> ?
RECEIPTS			•			*See next	page	Yes	No
Previous total cash and in kir (if beginning a new campaign	nd contributions (From line n or calendar year, see ins	e 8, last C-4) struction bool	klet)					·_\$	\$6,399.15
2. Cash received (From line 2,	Schedule A)					···· <u></u> \$	\$3,171.70	_	
3. In kind contributions received	d (From line 1, Schedule E	3)					\$0.00	_	
4. Total cash and in kind contrib	outions received this perio	d (Line 2 plu	s 3)						\$3,171.70
5. Loan principal repayments m								_	
6. Corrections (From line 1 or 3	, Schedule C)			. Show	/ + or ((-)	(\$46.70)	_	
7. Net adjustments this period ((\$46.70)
8. Total cash and in kind contrib	outions during campaign (Combine line	es 1, 4 & 7	')					\$9,524.15
9. Total pledge payments due (From line 2, Schedule B).			\$0.	00				
EXPENDITURES									
 Previous total cash and in kir (If beginning a new campaign 	nd expenditures (From line n or calendar year, see ins	e 17, last C-4 struction boo	l) klet)						\$3,633.84
11. Total cash expenditures (Fro	m line 4, Schedule A)						\$1,021.88	<u>3</u>	
12. In kind expenditures (goods	& services) (From line 1, S	Schedule B) .					\$0.00	Ω	
13. Total cash and in kind expen									\$1,021.88
14. Loan principal repayments m	ade (From line 2, Schedu	le L)					\$0.00	<u>0</u>	
15. Corrections (From line 2 or 3	, Schedule C)			. Show	/ + or ((-)	(\$46.70)	<u>)</u>	
16. Net adjustments this period (Combine lines 14 & 15)						Show + or (-)		(\$46.70)
17. Total cash and in kind expen				and 16	5)				\$4,609.02
CANDIDATES ONLY Won Lost I		ASH SUMMA . Cash on ha		3 minu	s line	17)			\$4,915.13
Primary election		[Line 18 should e	equal your ba	ink acco	unt bala	nce(s) plus your	petty cash balance.]		
General election		. Liabilities:	(Sum of lo	ans a	nd deb	ots owed)			\$1,251.04
Treasurer's Daytime Telephone N		. Balance (S	urplus or o	deficit)	(Line	18 minus lin	e 19)		\$3,664.09
CERTIFICATION: I certify that the in	formation herein and on acco	mpanying sch	edules and	attachi	ments i	s true and cor	rect to the hest of m	v knowledae	
Candidate's Signature	Date	mpanying son	Treasure				TOOL TO THE DESCOLUTION	y movieuge.	Date
KIM LEHRMAN	07/28	3/20	Josie	Ols	en			0	7/28/20

CASH RECEIPTS AND EXPENDITURE

SCHEDULE to C4

A	
(11/93)	

07/14/20

07/27/20

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

Report Date

KIM LEHRMAN	(Kim	for	Franklin	County	.)
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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
07/16/2020	\$100.00	07/24/2020	\$2,100.00			
07/19/2020	\$25.00	07/27/2020	\$46.70			
07/17/2020	\$500.00	07/27/2020	\$400.00			

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

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 in-kind or earmarked contributions to a candidate or committee or independent expenditures that benefit a candidate or 1) 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..
- 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	\$106.96
07/14/20	BLUE WAVE POLITICAL PARTNERS 401 2nd Ave S Seattle, WA 98104		Compliance Consulting	\$250.00
07/16/20	SIGNS.COM 1550 S Gladiola St Salt Lake City, UT 84104		Campaign Banners(9)	\$488.08
07/16/20	SIGNS.COM 1550 S Gladiola St Salt Lake City, UT 84104		Postcards(500)	\$77.04
07/22/20	LOWE'S 4520 N Rd 68 Pasco, WA 99301		Sign Hardware	\$99.80
			Total from attached non	-

Total from attached pages

\$0.00 \$

\$

Enter also on line 11 of C4

\$1,021.88

IN KIND CONTRIBUTIONS, PLEDGES, ORDERS, DEBTS, OBLIGATIONS

SCHEDULE TO C4 B

3

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

KIM LEHRMAN (Kim for Franklin County)

Report Date 07/14/20 07/27/20

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	Amount Owed Cod	le OR Description of Obligation
5/11/2020	KIM LEHRMAN PO Box 5781 Pasco WA, 99302	943.25	Filing Fee
	TOTAL THIS P		

CORRECTIONS

SCHEDULE C

Total refunds Enter as (-) on line 6 and line 15 of C4.

\$46.70

4

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

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Candidate of C	ommittee name (Do not appreviate. Use it	iii name.)	Date	
IM LEHRMAN	(Kim for Franklin County)	(07/14/20	07/27/20
3. REFUNDS F		ints have been received as refunds on expenditures previous		
Date of Report	roponed on Go ropon, Emo 1d.	Source/Person Making Refund		Amount of Refund
07/27/20	SIGNS.COM 1550 S Gladiola St			
	Salt Lake City, UT 84104			\$46.70

LOANS

SCHEDULE TO C4

(12/99)

5

Candidate or Committee Name

Report Date

KIM LEHRMAN (Kim for Franklin County)

07/14/20 07/27/20

4. LOANS STILL OWED. List each loan that has previously been reported and still has a balance due.

Date	Lender's Name and Address	Original Amount	Principal Repaid or Forgiven	Amount Owed
05/06/20	KIM LEHRMAN PO Box 5781 Pasco, WA 99302	\$26.83	\$0.00	\$26.83
05/07/20	KIM LEHRMAN PO Box 5781 Pasco, WA 99302	\$174.96	\$0.00	\$174.96
05/04/20	KIM LEHRMAN PO Box 5781 Pasco, WA 99302	\$106.00	\$0.00	\$106.00
	'		Subtotal This Page	\$307.79