

**CASH RECEIPTS
 MONETARY
 CONTRIBUTIONS**

C3
 (1/02)

THIS SPACE FOR OFFICE USE

101000160

09-21-2020

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
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1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received	Description	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	G E N	Amount	Aggregate* Total
09/14/20	DALE WIDTH 1007 Christopher Ln Pasco, WA 99301	Not Employed Pasco, WA Occupation RETIRED		X	\$500.00	\$500.00
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
	<input type="checkbox"/> Check here if additional pages are attached	Sub-total			\$500.00	*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.

\$500.00

4. Date of Deposit 09/16/20	I certify that this report is true and complete to the best of my knowledge	
Treasurer's Daytime Telephone No.: (206)682-7328	Treasurer's Signature Josie Olsen	Date 09-21-2020