PUBLIC DISCLOSURE COMMISSION
711 CAPITOL WAY RM 206
PO BOX 40908
OLYMPIA WA 98504-0908
(360) 753-1111
TOLL FREE 1-877-601-2828

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3
(1/02)

THIS SPACE FOR OFFICE USE
100861925

10-01-2018

Candidate or Committee Name (Do not abbreviate. Use full name.)
DEBRA E LEKANOFF (Vote Debra Lekanoff)

Mailing Address
10789 N Beach Rd

City	Zip + 4	Office Sought (candidates)	Election Date
Bow, WA	**98232**	**STATE REPRESENTATIVE**	**2018**

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received		Amount	Total
	a. Anonymous		**$305.00**
	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	PRI	GEN	Amount	Aggregate* Total
09/24/18	**JANET H SIMPSON** **409 Cowgill Ave** **Bellingham, WA 98225**	Occupation		X	**$50.00**	**$50.00**
09/24/18	**IAFF LOCAL 106** **PO Box 1024** **Bellingham, WA 98227**	Occupation		X	**$950.00**	**$950.00**
09/24/18	**CONFEDERATED TRIBES OF THE** **PO Box 150** **Nespelem, WA 99155**	Occupation		X	**$1,000.00**	**$1,000.00**
		Occupation				
		Occupation				
	☐ Check here if additional pages are attached	Sub-total Amount from attached pages			**$2,000.00** **$0.00**	***See reverse for details.**

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. **$2,000.00**

4. Date of Deposit
09/24/18

Treasurer's Daytime Telephone No.: **(253)653-1427**

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

Treasurer's Signature: **Melissa Pfeifer**

Date: **10-01-2018**