

## **CASH RECEIPTS MONETARY**

THIS SPACE FOR OFFICE USE

110049869

|                          | CONTRIBUTIONS   |                      |  | (1/02)      |             | 09            | 09-27-2021          |  |
|--------------------------|---|----------------------|--|-------------|-------------|---------------|---------------------|--|
| Candidate                | or Committee Name (Do not abbreviate. Use full i                                    | name.)               |  |             |             |               |                     |  |
| (John                    | Horch for Sheriff)  |                      |  |             |             |               |                     |  |
| Mailing Ad               | ldress  |                      |  |             |             |               |                     |  |
| 7720 N                   | E HIGHWAY 99 SUITE D #163   |                      |  |             |             |               |                     |  |
| City Zip + 4             |   |                      | Office Sought (cand                            |             |             | Election Date |                     |  |
| Vancouver, WA 98665      |   | 5                    | COUNTY SHERIFF                                 |             |             | 2022          |                     |  |
| 1. MONET                 | ARY CONTRIBUTIONS DEPOSITED IN ACCOUNT  | NT                   |  |             |             | •             |                     |  |
| Date<br>Received         |   |                      |  |             |             | Amount        | Total               |  |
|                          | a. Anonymous  |                      |  |             |             |               | \$10.00             |  |
|                          | 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 itemi                                    | ized and number of   | persons giving (p                              | ersor       | ns)         |               |                     |  |
| 2. CONTR  Date  Received | Contributor's Name, Address, City, State, Zi  |                      | s of more than \$100:*<br>Name, City and State | P<br>R<br>I | G<br>E<br>N | Amount        | Aggregate*<br>Total |  |
| 9/20/21                  | PAUL HENDERSON  | Henderson            | Taylor, PLLC                                   | X           |             |               |                     |  |
|                          | 7718 NE Livingston Rd<br>Camas, WA 98607  | Vancouver            | Vancouver, WA                                  |             |             | \$1,000.00    | \$1,000.00          |  |
|                          |   | Occupation <b>MA</b> | NAGING PARTNER                                 |             |             |               |                     |  |
|                          |   |                      |  |             |             |               |                     |  |
|                          |   |                      |  |             |             |               |                     |  |
|                          |   |                      |  |             |             |               |                     |  |
|                          |   | Occupation           |  |             |             |               |                     |  |
|                          |   |                      |  |             |             |               |                     |  |
|                          |   |                      |  |             |             |               |                     |  |
|                          |   |                      |  |             |             |               |                     |  |
|                          |   | Occupation           |  | 1           |             |               |                     |  |
|                          |   |                      |  |             |             |               |                     |  |
|                          |   |                      |  |             |             |               |                     |  |
|                          |   |                      |  |             |             |               |                     |  |
|                          |   | Occupation           |  | 1           | ,           |               |                     |  |
|                          |   |                      |  |             |             |               |                     |  |
|                          |   |                      |  |             |             |               |                     |  |

Occupation

4. Date of Deposit

09/20/21

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

**Sub-total** 

Amount from

attached pages

\$1,000.00

\$1,000.00

\$0.00

Treasurer's Signature

\*See reverse

for details.

Michael Martinson

09-27-2021

Treasurer's Daytime Telephone No.: (360)818-4716

Check here if additional

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.

pages are attached