

01/10/22

Treasurer's Daytime Telephone No.:

## **CASH RECEIPTS MONETARY** CONTRIBUTIONS

THIS SPACE FOR OFFICE USE

110070617

01-17-2022

| CONTIN  |   |                            | KIBOTIONS   |             | (1/02)                            | 01            | 01-17-2022          |  |
|---|---|----------------------------|---|-------------|-----------------------------------|---------------|---------------------|--|
| Candidate   | or Committee Name (Do not abbreviate. Use full nam                                | ne.)                       |   |             |                                   |               |                     |  |
| (Shook4   | 4Sheriff Campaign)  |                            |   |             |                                   |               |                     |  |
| Mailing Add   | dress   |                            |   |             |                                   |               |                     |  |
| 19215 8   | SE 34th St #190   |                            |   |             |                                   |               |                     |  |
| City  | Zip + 4   | Office Sought (candidates) |   |             |                                   | Election Date |                     |  |
| Camas,  |   | COUNTY SHERIFF             |   |             |                                   | 2022          |                     |  |
| 1. MONETA   | ARY CONTRIBUTIONS DEPOSITED IN ACCOUNT  |                            |   |             |                                   |               |                     |  |
| Date<br>Received  |   |                            |   |             |                                   | Amount        | Total               |  |
|   | a. Anonymous  |                            |   |             |                                   |               |                     |  |
|   |   |                            |   |             |                                   |               |                     |  |
|   |   |                            |   |             |                                   |               |                     |  |
|   | d. Miscellaneous receipts (interest, refunds, aucti                               | ,                          | ·   |             |                                   |               |                     |  |
| 2 CONTRI  | e. Small contributions \$25.00 or less not itemized BUTIONS OVER \$25.00          | and number                 | r of persons giving (p                                  | erson       | s)                                |               |                     |  |
| Date<br>Received  | Contributor's Name, Address, City, State, Zip                                     |                            | tions of more than \$100:*<br>er's Name, City and State | P<br>R<br>I | G<br>E<br>N                       | Amount        | Aggregate*<br>Total |  |
| ./10/22   | BONNIE BURNS  |                            | -   | х           |                                   |               |                     |  |
|   | 2911 NE 68th Cir  |                            |   |             | \$50.00                           | \$50.00       |                     |  |
|   | Ridgefield, WA 98642  |                            |   |             |                                   | 430.00        | 430.00              |  |
|   |   | Occupation                 | 1   |             |                                   |               |                     |  |
|   |   |                            |   |             |                                   |               |                     |  |
|   |   |                            |   |             |                                   |               |                     |  |
|   |   |                            |   |             |                                   |               |                     |  |
|   |   | Occupation                 | 1   |             |                                   |               |                     |  |
|   |   |                            |   |             |                                   |               |                     |  |
|   |   |                            |   |             |                                   |               |                     |  |
|   |   |                            |   |             |                                   |               |                     |  |
|   |   | Occupation                 | 1   | 1           |                                   |               |                     |  |
|   |   |                            |   |             |                                   |               |                     |  |
|   |   |                            |   |             |                                   |               |                     |  |
|   |   |                            |   |             |                                   |               |                     |  |
|   |   | Occupation                 | 1   | 1           |                                   |               |                     |  |
|   |   |                            |   |             |                                   |               |                     |  |
|   |   |                            |   |             |                                   |               |                     |  |
|   |   |                            |   |             |                                   |               |                     |  |
|   |   | Occupation                 | 1   |             |                                   |               |                     |  |
|   | Sub-total  Check here if additional pages are attached Amount from attached pages |                            |   |             | \$50.00                           |               |                     |  |
|   |   |                            |   |             |                                   | \$0.00        | *See reverse        |  |
| 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. |   |                            |   |             | \$50.00                           | for details.  |                     |  |
| 4. Date of Deposit I certify that this report is true and comp  |   |                            |   |             | elete to the best of my knowledge |               |                     |  |
| Treasurer's Signature   |   |                            |   |             | Date                              |               |                     |  |

David Shook