

BEFORE THE AUDITOR
IN AND FOR CLARK COUNTY WASHINGTON

IN RE THE VOTER REGISTRATION
CHALLENGE AGAINST JOHN LEY
FILED BY GEOFFREY MUNSON.

DECLARATION OF JOHN LEY

1 I, JOHN LEY, declare under the penalties of perjury pursuant to the laws of the State of
2 Washington, that the statements herein are true and correct to the best of my knowledge. I am over
3 the age of 18 and competent to testify to the matters set forth in this declaration.

4 1. I am a resident of Vancouver, Washington.

5 2. I reside at 8500 NE Hazel Dell Ave. Apt. H4, Vancouver, WA 98665. This is my permanent
6 residence, and I intend to remain here indefinitely, regardless of the outcome of the current
7 campaign for the 18th Legislative District.

8 3. Upon moving to my current residence, I completed all necessary legal steps to change my
9 domicile officially.

10 4. I signed a lease agreement for my residence at 8500 NE Hazel Dell Ave. Apt. H4,
11 Vancouver, WA 98665.

12 5. I consistently pay monthly rent for my residence located at 8500 NE Hazel Dell Ave. Apt.
13 H4, Vancouver, WA 98665.

14 6. My credit card is registered at the address 8500 NE Hazel Dell Ave. Apt. H4, Vancouver,
15 WA 98665.

- 1 7. My driver's license is registered with the Department of Licensing at the address 8500 NE
2 Hazel Dell Ave. Apt. H4, Vancouver, WA 98665.
- 3 8. My car is registered at the address 8500 NE Hazel Dell Ave. Apt. H4, Vancouver, WA
4 98665.
- 5 9. My car insurance is registered at the address 8500 NE Hazel Dell Ave. Apt. H4, Vancouver,
6 WA 98665.
- 7 10. I registered a business at my residential address, 8500 NE Hazel Dell Ave. Apt. H4,
8 Vancouver, WA 98665, specifically Oriskany Financial, LLC in May.
- 9 11. I regularly receive mail at my residence: 8500 NE Hazel Dell Ave. Apt. H4, Vancouver,
10 WA 98665.
- 11 12. I have consistently paid monthly rent for my residence at 8500 NE Hazel Dell Ave. Apt.
12 H4, Vancouver, WA 98665.
- 13 13. I registered a business at my residential address, 8500 NE Hazel Dell Ave. Apt. H4,
14 Vancouver, WA 98665.
- 15 14. I receive my credit card statements at my residential address, 8500 NE Hazel Dell Ave.
16 Apt. H4, Vancouver, WA 98665.
- 17 15. The allegations against me are baseless, as Munson appears to have only visited my 8500
18 NE Hazel Dell Ave residence during periods when I was actively campaigning. My
19 campaign is demanding and requires that I spend most days traveling throughout the district
20 to place, replace, and repair campaign signs, as well as to engage with potential voters.
- 21 16. I regularly eat and sleep at my Hazel Dell residence, which is furnished.
- 22 17. Assertions by Munson that my Hazel Dell residence is unfurnished are false.

1 18. Munson could not possibly know whether my residence is furnished, as it is located on the
2 second floor and I always keep my blinds closed.

3 19. I prefer to maintain a clean and clear balcony to enhance its visual appeal. There is a closet
4 on the balcony where I can store items that I want to keep outside but protected from the
5 weather.

6 20. Munson's claims about mail and flyers accumulating at my door are false. The apartment
7 next to mine has been vacant for months and occasionally has mail and flyers pile up, but
8 not at my door.

9 21. It's important to note that our building has centralized mailboxes, and certified mail is
10 usually delivered to the main mail boxes, not individual doors. When Munson sent a letter
11 to my Hazel Dell address, I promptly picked it up from the post office a few days later as
12 part of my regular activities. I felt no urgency to collect a letter from a Democratic Party
13 precinct committee officer. My timely collection of mail is consistent with my regular
14 presence and activities at my residence.

15 22. The two donations referenced by Munson were made using my credit card, which is
16 registered at my Hazel Dell address. Any claims that these donations originated from the
17 444 Fremont address or payment cards are incorrect. I am providing the credit card
18 statements as evidence that these transactions were made from my Hazel Dell address.

19 23. I decided to relocate to my current residence for several reasons. While I currently own
20 property in Camas and in North Carolina, selling either property in the current market,
21 severely impacted by rising home loan interest rates under the Biden-Harris administration,
22 would be financially imprudent. The real estate market has effectively frozen, making it

1 unwise to sell until market conditions improve. Currently, both properties are occupied by
2 renters.

3 24. In addition to owning multiple properties, I operate several small businesses. One of these
4 businesses is registered at my Hazel Dell residence. I am currently in the process of
5 updating the registration for my other two businesses to reflect my Hazel Dell address, but
6 I haven't prioritized this because these businesses receive minimal mail and operate mostly
7 electronically.

8 25. Attached as **Exhibit A** is a true and correct underlined copy of my rental agreement.

9 26. Attached as **Exhibit B** is a true and correct underlined copy of my renter's insurance.

10 27. Attached as **Exhibit C** is a true and correct underlined copy of a recent utilities bill.

11 28. Attached as **Exhibit D** is a true and correct copy of some additional items of mail I have
12 received at my residence.

13 29. Attached as **Exhibit E** is a true and correct copy of photos of the outside and inside of my
14 apartment and the complex mail boxes.

15 30. Attached as **Exhibit F** is a true and correct copy of a photo of the door to the apartment
16 next to my residence.

17 31. Attached as **Exhibit G** is a true and correct underlined copy of the update form I submitted
18 to the State of Wyoming in May 2024 for Oriskany Financial, LLC.

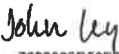
19 32. Attached as **Exhibit H** is a true and correct underlined and redacted copy of my license
20 and vehicle information with the Department of Licensing.

21 33. Attached as **Exhibit I** is a true and correct underlined and redacted copy of a screen
22 captured of my electronic Auto Insurance Confirmation.

1 34. Attached as **Exhibit J** is a true and correct underlined and redacted copy of a my USAA
2 credit card statement for July 15, 2024 showing my address of 8500 NE Hazel Dell Ave.
3 Apt H4, and a \$250 contribution to the Clark County Republic Party on June 27.

4 35. Attached as **Exhibit K** is a true and correct underlined and redacted copy of a my USAA
5 credit card statement for August 15, 2024 showing my address of 8500 NE Hazel Dell Ave.
6 Apt H4, and a \$50 contribution to the Clark County Republic Party on July 15.

7 DATED this Tuesday, October 1, 2024, at Vancouver, Washington.

8 Signed by:

9 _____
JOHN LEY

Ex. A

Declaration of John Ley in Support of
Response to Voter Challenge

EX

9105A NE HWY 99, STE 200
Vancouver, WA 98665
(P) 360-635-6464 (F) 888-509-8268





MULTIFAMILY NW
The Association Promoting Quality Rental Housing

WASHINGTON
RENTAL AGREEMENT



Key Property
Services, Inc.
"Your Service is Our Business"



<input checked="" type="checkbox"/> MOVE-IN	<input type="checkbox"/> RENEWAL	<input type="checkbox"/> TRANSFER OLD UNIT #	<input type="checkbox"/> FILE CHANGES	ORIGINAL MOVE-IN DATE 01/02/2024	<input type="checkbox"/> Section 8 Housing Choice Voucher	<input type="checkbox"/> Check if there are one or more co-signer agreements related to this Rental Agreement. Failure to check the box does not invalidate any co-signer agreements.	
PARTIES	DATE 12/28/2023		PROPERTY NAME / NUMBER Willow Creek Apartments			WCA	
	RESIDENTS: (NAME ALL ADULTS) John Ley						
	(COLLECTIVELY "RESIDENT")						
	PREMISES ADDRESS 8500 NE Hazel Dell Avenue		UNIT # H-04	CITY Vancouver	STATE WA	ZIP 98665	
	OWNER /AGENT Willow Creek Apartments ADDRESS 8500 NE Hazel Dell Avenue			OWNER/AGENT EMAIL willowcreek@kpsinc.net			
			CITY Vancouver	STATE WA	ZIP 98665		
OWNER/AGENT'S DESIGNATED LOCATION FOR PAYMENT (FOR ELECTRONIC PAYMENT OPTIONS PLEASE CONTACT OWNER/AGENT) 8500 NE Hazel Dell Ave. Vancouver, WA 98665							
MONTHLY CHARGES	MONTHLY STATED RENT	\$	1,200.00	TENANCY <input checked="" type="checkbox"/> LEASE TERM BEGINNING: 01/02/2024 AND ENDING: 12/31/2024 <input type="checkbox"/> IF CHECKED, AFTER THE END OF THE SPECIFIED PERIOD OF THE TERM LEASE THE RENTAL AGREEMENT DOES NOT CONTINUE FOR AN INDEFINITE PERIOD ON A MONTH-TO-MONTH OR PERIODIC BASIS. <input checked="" type="checkbox"/> CHECK IF EARLY TERMINATION PROVISION APPLIES AMOUNT: \$ _____ <small>(1 1/2 TIMES MONTHLY STATED RENT IF BLANK)</small> <input type="checkbox"/> MONTH-TO-MONTH BEGINNING: RENT IS DUE ON THE <u>1st</u> DAY OF EACH MONTH (1 st DAY OF EACH MONTH IF LEFT BLANK)			
	OTHER	\$	0.00				
	OTHER	\$	0.00				
	OTHER	\$	0.00				
	OTHER	\$	0.00				
	TOTAL MONTHLY CHARGES	\$	1,200.00				
DEPOSITS	TOTAL DEPOSITS CHARGED	\$	1,200.00	FEE SCHEDULE DISHONORED CHECK FEE \$ _____ UNAUTHORIZED PET FEE \$ 500.00 SMOKE ALARM/CARBON MONOXIDE ALARM TAMPERING FEE \$ 250.00 NON-COMPLIANCE FEE (SEE TERMS AND CONDITIONS) \$ 50.00 OTHER <u>Water Sensor Tampering Fee</u> \$ 100.00 LATE RENT PAYMENT FEE: <input checked="" type="checkbox"/> FLAT AMOUNT OF \$ 75.00 IMPOSED AFTER THE <u>5</u> DAY OF THE MONTH. (IF LEFT BLANK, CHARGE <input type="checkbox"/> PER DAY @ \$ _____ <input type="checkbox"/> 5% OF STATED RENT EVERY 5 DAYS			
	DEPOSITS PAID	\$					
	BALANCE OF DEPOSITS DUE	\$	1,200.00				
	SEE INSTALLMENT PAYMENT AGREEMENT OR SPECIAL PROVISIONS IF BALANCE DUE						
M/I FEES	SECURITY DEPOSIT HELD AT:			PRO-RATE METHOD: <input type="checkbox"/> A <input type="checkbox"/> B <input checked="" type="checkbox"/> C (SEE #1 ON PAGE 2) <input checked="" type="checkbox"/> IF CHECKED, SEE MOVE-IN ACCOUNTING (FORM # M004 WA) <input type="checkbox"/> IF CHECKED, SEE SECOND MONTH'S ACCOUNTING FOR ADDITIONAL CHARGES/ADJUSTMENTS (FORM # M035)			
	BANK NAME	Umpqua Bank					
	BANK ADDRESS	Vancouver, WA					
PROVISIONS / DISCLOSURES	TOTAL NON-REFUNDABLE FEES	\$	0.00	SPECIAL PROVISIONS AND/OR DISCLOSURES: 			
	(DESCRIBE ON MOVE-IN ACCOUNTING OR IN SPECIAL PROVISIONS BELOW)						
	NON-REFUNDABLE FEES PAID	\$					
	BALANCE OF NON-REFUNDABLE FEES DUE	\$	0.00				
	SEE INSTALLMENT PAYMENT AGREEMENT OR SPECIAL PROVISIONS IF BALANCE DUE						
OTHER OCCUPANTS	NAME	DATE OF BIRTH	MAKE	MODEL	COLOR	STATE	LICENSE PLATE #
	None		Buick	La Crosse	Burgundy	WA	BYK-5414

ON SITE RESIDENT MAIN OFFICE (IF REQUIRED)

ALARMS

SMOKE ALARMS & CARBON MONOXIDE ALARMS: Resident acknowledges and Owner/Agent certifies that the unit is equipped with a smoke alarm and, if required, a carbon monoxide alarm and that the smoke alarm and the carbon monoxide alarm have been tested and are operable at this time. It is Resident's responsibility to test the smoke alarm and carbon monoxide alarm at least every six (6) months, replace dead batteries as required, and notify Owner/Agent in writing of any operating deficiencies. Resident shall not remove or tamper with a functioning smoke alarm or carbon monoxide alarm, including removing working batteries, and Owner/Agent may charge a fee of up to \$200.00 for any such conduct.

TYPE OF SMOKE ALARM: BATTERY ELECTRIC ELECTRIC WITH BATTERY BACKUP

TYPE OF CARBON MONOXIDE ALARM: BATTERY ELECTRIC ELECTRIC WITH BATTERY BACKUP

I have received instructions on the proper use of the smoke alarm and carbon monoxide alarm, if applicable.

UTILITIES

PAID FOR / PROVIDED BY:	ELECTRICITY	WATER	SEWER	GARBAGE SERVICE	GARBAGE CONTAINER	BASIC CABLE	GAS	OTHER	<input checked="" type="checkbox"/> IF CHECKED, SEE UTILITY BILL-BACK ADDENDUM (FORM # M047)
OWNER	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
RESIDENT	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

THE FOLLOWING UTILITIES OR SERVICES PAID FOR BY RESIDENT WILL BENEFIT OTHER RESIDENTS OR OWNER/AGENT: _____

ANY YARD INCLUDED IN THE LEASED PREMISES WILL BE MAINTAINED BY: RESIDENT OWNER/AGENT

OTHER

IF CHECKED, PETS ARE NOT ALLOWED AT THIS PROPERTY

IF CHECKED, THE FOLLOWING PETS ARE APPROVED BY OWNER/AGENT—NUMBER & TYPE: _____

IF CHECKED, RENTER'S INSURANCE IS REQUIRED MINIMUM INSURANCE AMOUNT \$ 100,000.00 (\$100,000 IF LEFT BLANK)

INSURANCE COMPANY NAME _____ POLICY # _____

SMOKING POLICY: SMOKING ALLOWED—ENTIRE PREMISES SMOKING PROHIBITED—ENTIRE PREMISES
 SMOKING ALLOWED IN LIMITED AREAS (SEE SMOKING POLICY ADDENDUM)

MAILBOX: H-04

I / WE HAVE READ AND AGREE TO THE TERMS AND CONDITIONS LISTED ON ALL PAGES OF THIS AGREEMENT.

RESIDENT X <u>John Ley</u> <small>RG59Y1 E-signed by: John Ley 2023-12-28 16:57:05 UTC - 37.19.205.152</small>	DATE <u>12/28/2023</u>	RESIDENT X	DATE
RESIDENT X	DATE	RESIDENT X	DATE
RESIDENT X	DATE	RESIDENT X	DATE

PERSON TO CONTACT IN THE EVENT OF AN EMERGENCY _____ PHONE _____

ADDRESS, CITY, STATE, ZIP _____

PERSON TO CONTACT IN THE EVENT OF MY DEATH (IF RESIDENT IS THE SOLE RESIDENT OF THE UNIT, ATTACH FORM M034 WA, DESIGNATION OF PERSON TO ACT ON DEATH) _____ PHONE _____

ADDRESS, CITY, STATE, ZIP _____

OWNER/AGENT X <u>Heidi Price</u> <small>HN25YY E-signed by: Heidi Price 2023-12-28 19:21:10 UTC - 96.95.143.158</small>	DATE <u>12/28/2023</u>	IF APPLICABLE, REAL ESTATE BROKER APPROVAL
REAL ESTATE LICENSEE NAME & ADDRESS:		INITIAL _____ DATE _____

TERMS AND CONDITIONS

1. RENTS: Unless another date is set forth above, all monthly charges are due and payable on the first of the month and must be paid on time. Partial payments will not be accepted without prior Owner/Agent approval. To protect Owner and its Agents, Owner/Agent may refuse to accept cash payments, rent payments from anyone other than Resident or multiple checks for rent. If any check from Resident has been dishonored for any reason, Owner/Agent may require Resident to make all future rent payments by certified check or money order. Unless a shorter period is permitted by law, month-to-month rents may be increased with a 60-day written notice. The daily prorates of rents and other monthly charges will be based on one of the following methods chosen by Owner/Agent, which method will be consistently applied throughout the rental

term: a) a 360-day year composed of twelve months of 30 days each; b) a 365-day year; or c) the actual number of days in the current month. The daily amount will be multiplied by the actual number of days of occupancy in the current month. NOTE: Unless otherwise specified, the pro-rate shall be based on a 365-day year. "Rent" shall mean the monthly stated rent and all other periodic payments due from Resident related to the tenancy, including but not limited to pet rent, garage/carport/storage unit rent and washer/dryer rent.

2. NONPAYMENT OF RENT OR OTHER AMOUNTS DUE: If rent is not paid when due, Owner/Agent may issue on the next day or any day thereafter a notice to pay or vacate. Failure of Resident to timely pay any other amounts due Owner/Agent is a material noncompliance with this Rental Agreement.

3. APPLICATION OF PAYMENTS: All payments made by Resident to Owner/Agent after the tenancy commences, no matter how designated by Resident, may be applied by Owner/Agent as follows: first to any outstanding amounts due Owner/Agent for rent, and then to late payments, damages, legal costs, or other fees.

4. EARLY TERMINATION OF LEASE: If this Rental Agreement is for a set term, failure by Resident to complete the term because of a voluntary termination by Resident or termination by Owner/Agent for a Resident breach will expose Resident to the payment of damages. If the early termination box is checked on page 1 of this Rental Agreement to allow Resident to terminate early without uncertainty as to the amount that will be owed as a result, it is agreed that upon any failure of Resident to occupy the unit for the full term, for any reason, Resident will pay to

Owner/Agent, in lieu of all other damages or amounts that could be recovered, all of the following: a) the value of all concessions given to Resident by Owner/Agent; b) all rent through the date the unit is vacated; c) to the extent not included in a) and b) an amount equal to rent for 30 days after Resident's written notice to vacate, or if no notice, for 30 days after the vacation date; d) an early termination fee in the amount set forth on page 1 of this Rental Agreement, or if none stated, equal to one and one-half month's stated rent; e) all unpaid fees and other non-rent charges accrued prior to the vacation date; f) all damages relating to the condition of the unit; and g) interest on the above amounts at the statutory rate from the date each was due. Items a), c) and d) are due on the earlier of the date Resident gives notice to vacate or the date the unit is vacated. All other amounts are due at the times specified in this Rental Agreement. If the early termination box is not checked, Resident will be liable to Owner/Agent for all damages resulting from the early termination including but not limited to repayment of concessions, all rent through the earlier of the date the unit is re-rented and the lease termination date, concessions given to re-rent the unit, and all turnover costs.

- 5. **TERMINATION BY RESIDENT:** A written notice to terminate a month-to-month tenancy, a periodic tenancy, or a set term tenancy must be given by Resident to Owner/Agent at least 20 days prior to the end of the month of any tenancy. Any termination notice from Resident may not be revoked without Owner/Agent's written consent. If Resident fails to vacate at the end of any termination notice, Residence will be liable for Owner/Agent's actual damages. Notice to terminate from one resident shall be considered notice for all tenants and shall be binding upon the entire household.
- 6. **PETS, WATERBEDS AND MUSICAL INSTRUMENTS:** No cats, dogs or other pets are allowed on the Premises (either visiting or living there) without a signed pet agreement, payment of any pet fee and/or additional deposit, and providing insurance, as required by Owner/Agent. Resident will be responsible for and indemnify Owner/Agent against any and all damage or injuries caused by his/her or visiting pet(s). Waterbeds and/or aquariums are permissible only with proper insurance and written approval by Owner/Agent. Musical instruments are not allowed without the prior written consent of Owner/Agent.
- 7. **OCCUPANTS:** The unit will be used only for housing persons listed on this Rental Agreement. Additional Residents must be approved by Owner/Agent and are subject to full screening procedures. Persons other than those specifically listed on this Rental Agreement shall be strictly prohibited from staying in the rental unit for more than 10 consecutive days, or a total of 20 days in any 12-month period. For purposes of this section, "staying in the rental unit" means presence on the Premises for a substantial amount of time, whether during the day or overnight, and shall include, but not be limited

to, long-term or regular house guests, live-in baby-sitters, visiting relatives, etc. Resident shall notify Owner/Agent in writing at the earlier of: any time Resident expects any guest to be staying in excess of the time limits contained in this paragraph; or when such person in fact stays in excess of such time limits. Subsidized Residents shall be required to submit a report to Owner/Agent identifying any person not identified on this Rental Agreement and staying in the rental unit for more than 10 consecutive days, or 20 nonconsecutive days in any 12-month period, and shall state whether such person is contributing to the income of Resident and to what extent. Owner/Agent may require any person listed on page 1 as an "Other Occupant," upon reaching the age of 18, to submit an application and screening charge to Owner/Agent, be screened and if the person meets all current screening criteria, be added to this Rental Agreement as a Resident. Failure to submit an application and screening charge within 10 days of Owner/Agent's request, failure to meet the screening criteria, or failure to execute documents to be added as a Resident within 10 days of a successful screening, will be a material violation of this Rental Agreement.

- 8. **SUBLETTING:** Transfer of any interest in this Rental Agreement or subletting the Premises, or any part, is not permitted. Subletting means allowing anyone to stay in your unit for consideration, including but not limited to nightly or short-term rentals.
- 9. **CARE OF PREMISES:** Resident agrees to keep all areas of the Premises clean, sanitary and free from any accumulations of debris, filth, rubbish and garbage and to dispose of same in a proper manner. Resident shall take particular caution regarding the use of cigarettes, if allowed, and other fire hazards. Resident shall not store flammable or hazardous materials. Resident will not store personal property in a manner or in amounts which: increase the risk of fire; impedes proper air circulation; promotes mold growth; impedes safe ingress and egress; overloads floors; encourages pest infestations; or otherwise creates the potential for damage to the unit or danger for Resident or neighbors living on the Premises. Resident is responsible for all damages to furnishings or Premises caused by his/her negligence or beyond normal wear and tear. Damage from any type of smoke will never be considered normal wear and tear. Resident shall report leaky or defective faucets at once. Resident must pay for any and all damage to the building or furnishings, other than ordinary wear and tear, including but not limited to damage caused by stoppage of waste pipes or overflows of bathtubs, toilets or wash basins. Resident is responsible for replacing lightbulbs and batteries which need replacement during the tenancy.
- 10. **BARBECUES/FIRE PITS:** Resident must fully comply with all applicable codes and regulations related to the use of barbecues. In many areas, fire codes prohibit the use of either charcoal or propane barbecues on apartment balconies or porches unless the

area is protected by a fire sprinkler system or all adjacent building surfaces are totally non-combustible. The only exception is the use of electric-style barbecues or the small hibachi-style barbecues that utilize one-pound propane cylinders. These may be allowed when kept well away from combustible building surfaces and unplugged or with cylinder removed (as applicable) when not in use. Fire pits, pellet cookers/stoves and smokers of any kind are prohibited.

- 11. **USE OF AND CHANGES TO PREMISES:** Resident will: (a) use all electrical, plumbing, sanitary, heating, ventilating, air conditioning and other facilities and appliances on the Premises in a reasonable manner; (b) immediately obtain, pay for and not allow to be disconnected or discontinued the utilities for which Resident is responsible; (c) make no changes or additions to the Premises of any nature; (d) not install or attach anything on the walls, ceilings or in the windows that will cause damage to the unit without the prior written consent of Owner/Agent; (e) not hang anything on or tamper with any fire safety system; (f) not engage in any conduct that violates any applicable laws. Satellite dishes and/or antennas will be allowed only in strict compliance with Owner/Agent's satellite dish policy and applicable law.
- 12. **DAMAGE:** Resident agrees to not to destroy, damage, deface or remove any part of the Premises or permit any person to do so and assume all liability for damages other than ordinary wear and tear. Wear resulting from ordinary use of the premises means deterioration that results from the intended use of a dwelling unit, including breakage or malfunction due to age or deteriorated condition. Such wear does not include deterioration that results from negligence, carelessness, accident, or abuse of the premises, fixtures, equipment, appliances, or furnishings by the renter, immediate family member, occupant, or guest.
- 13. **SECURITY DEPOSITS:** All refundable deposits, however designated, may be used by Owner/Agent to offset any damage, unusual wear and tear or unpaid accounts (including rent) either during the tenancy or at the time of move-out. If any portion of the deposit is used during the tenancy, Resident will replenish it upon demand. If applied at move-out, any excess will be refunded within the time and in the manner required by law. Any deficiency will be due from Resident at the time the accounting is sent to Resident. Any amounts not paid by Resident within 31 days of the due date will incur interest at 1% per month. Sending the accounting and/or refunding any deposit does not waive Owner/Agent's right to payment for charges discovered or finalized after the accounting was sent. Any security deposit received from multiple Residents shall be refunded: (a) only when the last Resident vacates the unit and terminates his/her tenancy; (b) made payable to all Residents, unless agreed otherwise by all Residents and Owner/Agent in writing; and (c) mailed to any single forwarding address supplied by Resident (if no forwarding address is supplied, it will be mailed to the Premises). Other than a security deposit final

accounting which must be delivered as required by law, Resident authorizes Owner/Agent to send communications about past due amounts to any email, mobile phone or other electronic method listed on the front of this Rental Agreement. Security deposits may be deposited into an interest-bearing account. All interest shall accrue to the benefit of Owner/Agent pursuant to any agreement between Owner and Agent. No interest will be paid to Resident on security deposits.

- 14. JOINT RESPONSIBILITY:** Each Resident is jointly and severally responsible for rent, all other performance and financial obligations hereunder and any damage caused to the dwelling unit or common area by Resident, any Resident or Occupant of the same unit or his/her guests. Costs of repairs for damage must be paid within 7 days after Owner/Agent sends a bill (or such other time as provided in such bill), unless other arrangements have been made, in writing, with Owner/Agent. Any valid termination notice received from any one Resident may be considered by Owner/Agent a termination notice from all Residents. Any Resident not giving the notice who desires to remain in the Premises may be required to submit updated financial information and requalify under Owner/Agent's then-current criteria.
- 15. NON-COMPLIANCE FEES:** Owner/Agent may charge a non-compliance fee in the amount set forth on page one each time Owner/Agent issues a notice for non-compliance with written rules or policies or any notice related to a breach of this Rental Agreement.
- 16. ACCESS:** Resident agrees not to unreasonably withhold consent to Owner/Agent to enter the unit in order to inspect the Premises (including taking pictures to document the condition of the Premises), make necessary or agreed repairs, decorations, alterations, or improvements or to show the unit to prospective buyers or residents. Owner/Agent may enter the unit without consent in an emergency; may enter the unit at any reasonable time with at least 1 days' notice to show the unit to prospective buyers or residents; or may enter the unit at any reasonable time with at least 2 days' notice for all other circumstances.
- 17. DUTY TO COOPERATE WITH REPAIRS/ RENOVATIONS:** Resident(s) shall cooperate with all maintenance, repairs, and renovations (collectively, the "Work") performed by Owner/Agent, its vendors or contractors, including but not limited to, allowing Owner/Agent, vendors, or contractors access to the Premises (after notice as required by law) and following reasonable instructions such as moving furniture and personal items and temporarily ceasing the use of portions of the Premises which are impacted by the Work. In the event that the Premises is uninhabitable or will be rendered uninhabitable during the Work, and upon delivery of written notice from Owner/Agent to Resident(s), Resident(s) agree to vacate the Premises (including removal of personal items) and temporarily relocate until the Work is complete. Upon Owner/Agent giving written notice to temporarily relocate as required herein, Resident(s) shall vacate the Premises as soon as practicable but in no event later than the date set forth in the notice, and if none; 72-hours

after service of the notice. If the Work is required due to the deliberate or negligent acts or omissions of Resident(s) or someone on the Premises with Resident's permission or consent, Resident(s) will be responsible for obtaining and paying for temporary accommodations during the Work and for all relocation expenses. In all other cases, Owner/Agent may select and provide accommodations for temporary relocation by providing Resident(s) with the reasonable costs of relocating and returning to the Premises and: (a) another unit selected by Owner/Agent on the same property; (b) another unit at a nearby location selected by Owner/Agent; or (c) a per diem living expense that Resident(s) may use at their discretion. If Resident(s) temporarily move to another unit provided by Owner/Agent all the terms and conditions of this Rental Agreement will apply to the temporary unit, including the duty to pay rent. If Resident(s) are given a per diem, to the extent required by law the rent shall abate until Resident(s) are permitted to return to the Premises. Unless otherwise agreed, Resident(s) shall return to the Premises, and vacate any unit provided by Owner/Agent, within 7 days of Owner/Agent giving actual notice that the Premises are ready for habitation.

- 18. ABSENCE:** Resident agrees to notify Owner/Agent of any absence in excess of seven (7) days no later than the first day of absence.
- 19. LEGAL ACTION:** In the event Owner/Agent has to bring an action to enforce any provisions of this Rental Agreement or the Washington Residential Landlord-Tenant Act, the prevailing party shall be entitled to, in addition to costs, reasonable attorney's fees at trial and upon any appeal.
- 20. LOCKS:** Doors of Resident's unit should be kept locked. Resident shall notify Owner/Agent in writing if locks fail to operate. Owner/Agent will not be liable or responsible in any way for loss or damage to articles or property belonging to Resident. Resident shall not change the locks without Owner/Agent's prior consent. Resident shall immediately provide Owner/Agent with a key to any new locks installed. Owner/Agent is not required to provide lockout services.
- 21. RENTER'S INSURANCE:** If renter's insurance is required by this Rental Agreement, the Resident, or all Residents as a group if there are multiple Residents, will obtain and maintain insurance with minimum liability coverage in the amount set forth above. If there are multiple Residents, all must be named insureds on the policy, or at the Residents' option, they may each obtain a policy with limits in the minimum amount listed. Resident will supply Owner/Agent with evidence of such insurance prior to occupying the unit and thereafter upon request. Resident must name Owner/Agent as an additional insured on Resident's renter's insurance policy and authorize the insurer to notify Owner/Agent of: (A) cancellation or nonrenewal of the policy; (B) reduction of policy coverage; or (C) removal of Owner/Agent as an additional insured. Failure to maintain such insurance in full force, or failure to name and maintain Owner/Agent as an additional insured, will be considered a material non-compliance with this Rental

Agreement. If insurance is not required by this Rental Agreement, Resident should maintain renter's insurance to cover Resident's liability to Owner/Agent, as well as damage or destruction of Resident's property. Whether or not renter's insurance is required, Resident is not a co-insured under, and has no rights to, Owner/Agent's insurance policies. Except to the extent required by law, Owner/Agent is not responsible for, and its insurance does not cover damage or destruction to, Resident's property. Except to the extent prohibited by law, Resident, on behalf of himself/herself and Resident's insurers, hereby waives any right to subrogation against Owner/Agent or its agents, employees or insurers with respect to any loss or damage relating to Resident's property to the extent such loss or damage is covered by Resident's renter's insurance. Owner/Agent does not waive any subrogation rights its insurers may have.

- 22. CONDUCT:** The dwelling unit is to be used only as a dwelling. The dwelling unit may not be used for the conduct of any commercial activity that involves customers or clients coming to the unit (including but not limited to day care) or the delivery or storage of inventory or equipment. Each Resident is responsible for his/her own conduct, as well as that of the other Residents in the unit and their guests. Residents shall not engage in noisy or other conduct that disturbs the quiet enjoyment of any other resident, drunk or disorderly conduct, verbal harassment (e.g. screaming, yelling, swearing, or using profane or offensive words), written harassment (e.g. cyberbullying, sending mail or emails with profane or offensive words or posting untrue statements on-site or on-line), or physical harassment (e.g. assaulting, battering, intimidating, threatening physical harm). Between 10:00 p.m. and 7:00 a.m. the level and/or type of noise emitted from the unit may not exceed what is normal and customary for similar housing. Residents will not be permitted to play in halls, stairways or entrances of buildings, gardens or landscape areas except where specifically permitted by Owner/Agent. The use, possession, manufacture, or distribution of illegal substances, as defined in either federal or state law, either on or in the vicinity of the Premises is strictly prohibited. Resident may not allow any person to: a) be on the Premises who has been excluded from the common areas by Owner/Agent; or b) stay in his/her unit, as defined in section 7 above, who has had his/her Rental Agreement terminated by Owner/Agent. No one may engage in any unlawful conduct on or near the Premises or in conduct that endangers themselves or others. No one may enter or use any areas of the property that are not intended for use by residents such as roofs, attics, crawl spaces, maintenance shops, etc.
- 23. INTERFERENCE WITH MANAGEMENT:** Resident and Resident's guests, invitees, occupants, or persons under Resident's control shall not interfere with management of the Premises. For purposes of this section, interference with management includes but is not limited to verbal harassment (e.g. screaming, yelling, swearing, or using profane or offensive words), written harassment (e.g. cyberbullying, sending mail or emails with profane or offensive words or posting untrue statements on-site or on-line), and physical

harassment (e.g. assaulting, battering, intimidating, threatening physical harm, or preventing work to be performed) of the Owner/Agent, including any employees or agents thereof, or of prospective residents.

24. MALFUNCTIONS: Resident will immediately report in writing all malfunctions of equipment, failures of essential services, or needs for repair. Resident shall not tamper with the heating system, plumbing system, appliances, locks, doors, light fixtures, smoke alarms or carbon monoxide alarms or make any alterations of any nature on or to the Premises without the specific written consent of Owner/Agent.

25. RESIDENT LOSSES: Owner/Agent shall not be liable for damages of any kind caused by the lack of heat, refrigeration or other services to the Premises arising out of any accident, act of God, or occurrence beyond the control of Owner/Agent. Resident shall be limited to the rights and remedies specified in the Washington Residential Landlord-Tenant Act.

26. CO-SIGNER: If the obligations under this Rental Agreement are guaranteed by a co-signer, Resident agrees that Owner/Agent would not have rented without the guaranty. In the event the guaranty is terminated or becomes unenforceable for any reason, this will be considered a material non-compliance with this Rental Agreement.

27. COMMUNITY RULES: Unless Owner/Agent has custom rules and regulations for the property, the rules and regulations contained in Multifamily NW form M132 (Community Rules & Regulations) apply and are incorporated by reference herein.

28. PARKING: Off-street parking is for the primary use of Resident's vehicle parking. Second cars, trailers, recreational vehicles, boats and guest vehicles are allowed, if at all, only in designated spaces. All vehicles parked in the off-street parking must be in running condition capable of operating legally on the street, properly licensed and insured. Any vehicle not complying with these standards will be towed at Resident's expense.

29. USE AND CONTROL OF COMMON AREAS: The common areas are for the use of Residents and their lawful guests. Owner/Agent retains all other control over the common areas. If Owner/Agent excludes a non-resident from the common areas, Resident loses all rights to invite or license the excluded person to enter or remain on the common areas.

30. REQUESTS FOR REASONABLE ACCOMMODATION/MODIFICATION: As required under federal, state, and local fair housing laws, Residents with disabilities may request reasonable accommodations/modifications related to their housing. All requests must be made to Owner/Agent specifying the nature of the requested accommodation/modification. It is recommended, but not required, that such request be made in writing.

31. TERMINATION FOR FALSE INFORMATION OR CRIMINAL CONVICTION: If any information supplied in conjunction with application for this rental unit is later found to be false, or if any occupant is convicted of a crime during

the tenancy that would constitute grounds for denial of tenancy under Owner/Agent's current rental criteria, this is grounds for termination of tenancy.

32. RESCREENING. Each Resident authorizes Owner/Agent to obtain a new or updated consumer credit report and/or an investigative consumer report: if any Resident requests to transfer to another unit; upon any change in either the Owner or Agent; annually; any Resident leaves or a new Resident is approved by Owner/Agent; or for any other valid business purpose. A consumer credit report or an investigative consumer report may include the checking of the Resident's credit, income, employment, rental history, and criminal court records and may include information as to his/her character, general reputation, personal characteristics, and mode of living. Each Resident has the right to request additional disclosures provided under Section 606 (b) of the Fair credit Reporting act, and a written summary of your rights pursuant to Section 609(c). Each Resident has the right to dispute the accuracy of the information provided to the Owner/Agent by the screening company or the credit reporting agency as well as complete and accurate disclosure of the nature and scope of the investigation. Residents agree to reimburse Owner/Agent for the costs of such report(s).

33. SIGHT UNSEEN: If Resident has executed this Agreement without first visiting the unit, Resident's dissatisfaction with the unit at the time possession is delivered is not grounds to terminate this Agreement.

34. COMPLETE AGREEMENT/NON-WAIVER: This Rental Agreement, any rules and regulations for the Premises, and, except as provided below, any other written addenda executed by the parties on or after the date of this Rental Agreement contain the entire understanding of the parties. There are no prior oral or written agreements unless they are referenced herein. If this is a renewal of an existing Rental Agreement or transfer to a new unit, all written addenda executed on or after the date of the original Rental Agreement, to the extent consistent herewith, remain in effect and are incorporated herein. Owner/Agent's failure on any occasion to require strict compliance with any provision of this Rental Agreement or to exercise any rights arising hereunder shall not be deemed a waiver of Owner/Agent's right to subsequently enforce any such provision or to insist upon any such right. Resident further agrees that acceptance of rent by Owner/Agent from Resident or any person or entity on Resident's behalf shall not be construed in any way as a waiver of Owner/Agent's right to enforce a previously issued notice under RCW 59.12 or use actions of Resident or Resident's guests or invitees which occurred prior to the acceptance of the rent as a basis for issuing and enforcing a notice authorized by RCW 59.12. All parts, portions and provisions of this Agreement shall be deemed separate and severable. In the event of the invalidity of any part, portion or provision, the rest of this Agreement with such part, portion or provision deleted, shall be given full force and effect.

35. CLASS ACTION WAIVER: Either party may bring claims against the other only in his/ her or its individual capacity and not as a plaintiff or class member in any purported class action or representative proceeding.

36. JURY TRIAL WAIVER: Any Unlawful Detainer actions proceeding to trial shall be tried without a jury.

37. COMPLIANCE WITH LOCAL ORDINANCES: This Agreement is intended to be in full compliance with all applicable laws. Any provision of this Agreement that is inconsistent with any applicable local law will be automatically amended to comply with such laws.

Ex. B

Declaration of John Ley in Support of
Response to Voter Challenge

EX

9105A NE HWY 99, STE 200
Vancouver, WA 98665
(P) 360-635-6464 (F) 888-509-8268





United Services Automobile Association
9800 Fredericksburg road
San Antonio, TX 78288

CERTIFICATE OF RENTERS INSURANCE

JOHN P LEY
8500 NE HAZEL DELL AVE APT H4
VANCOUVER, WA 98665

Review Certificate of Insurance for Renters Policy

September 2, 2024

This is to certify that the following insurance is in force.

This certificate of insurance neither affirmatively nor negatively amends, extends, or alters the coverage provided by the referenced insurance policy, nor does it confer any new or additional contractual rights to the certificate holder other than those conveyed by the policy. The terms of the policy control.

JOHN P LEY
8500 NE HAZEL DELL AVE APT H4
VANCOUVER, WA 98665


is insured as follows:

Renters protection policy USAA 001694083 REN 004

Personal liability: \$100,000
Policy effective date: July 1, 2024
Policy expiration date: July 1, 2025

How to Contact Us

If you have questions, please contact us at one of the following numbers:

 **Phone:** 210-531-USAA (8722), our mobile shortcut #8722 or 800-531-8722

Thank you,
United Services Automobile Association

Ex. C

Declaration of John Ley in Support of
Response to Voter Challenge

EX

9105A NE HWY 99, STE 200
Vancouver, WA 98665
(P) 360-635-6464 (F) 888-509-8268





JOHN P LEY
8500 NE HAZEL DELL AVE APT H4
VANCOUVER, WA 98665
ACCOUNT NUMBER 7184-541-6

Your Electricity Use

Residential electric service meter 543014
In 33 days you used 92 kwh
Present reading - 09/03/24 13434
Previous reading - 08/01/24 - 13342
Total electric usage 92
Your charge for 92 kwh is:
Basic service \$19.00
92 kwh @ 8.79 cents each 8.09
Total electric service \$27.09
Your average daily cost was \$0.82

Total Cost This Billing

Total electric service \$27.09
Total charges this billing \$27.09

If you're struggling to pay your utility bill, please let us know. Bill assistance is available to eligible customers.

Account Summary

Previous balance \$26.74
Payments - thank you
August 15, 2024 26.74CR
Balance forward 0.00
Current charges 27.09
Current balance \$27.09

Compare Your Use

ELECTRIC METER 543014

SERVICE TO	DAYS	KWH USED	KWH/DAY
09/03/24	33	92	3
08/01/24	31	88	3
07/01/24	28	77	3
06/03/24	33	89	3
05/01/24	30	78	3
04/01/24	31	78	3
03/01/24	29	72	2
02/01/24	24	47	2

F-105 Rev. 1/23

P. O. Box 8989
Vancouver, Washington 98668
360-992-3000
www.clarkpublicutilities.com

7184541-090324

Clark Public Utilities

Convenient and Secure Payment Options

- Register for MyAccount to pay online, sign up for EqualPay, or set up AutoPay and go paperless at ClarkPublicUtilities.com
- Pay using our automated phone payment system, QuickPay, by calling 360-992-3400
- Mail a check using this payment stub and return envelope
- Call live customer service 24 hours a day, seven days a week at 360-992-3000

Account number
7184-541-6

Due date for payment
Sep 18, 2024

Amount Due
\$27.09

*PAID EFT
W.F.
9/10/24*

Please indicate amount enclosed

\$, ,

JOHN P LEY
8500 NE HAZEL DELL AVE APT H4
VANCOUVER, WA 98665-8075

F07488-00457



7222718454100000027090000000007
John Ley Decl. Ex. C1

Ex. D

Declaration of John Ley in Support of
Response to Voter Challenge

EX

9105A NE HWY 99, STE 200
Vancouver, WA 98665
(P) 360-635-6464 (F) 888-509-8268



**WASHINGTON STATE
REPUBLICAN PARTY**

11811 NE 1st Street | Suite A306 | Bellevue, WA 98005

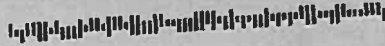


Personal Correspondence

John Ley
Apt H4
8500 NE Hazel Dell Ave
Vancouver, WA 98665-8075

001-002-000891

AUTO



Brian Heywood
Let's Go Washington
16625 Redmond Way, Suite M-PMB 18
Redmond, WA 98052



John Ley
8500 NE Hazel Dell Ave Apt H4
Vancouver, WA 98665-8075



13/4090/1



Amica

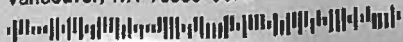
AMERICA'S
BEST INSURANCE
COMPANIES

Forbes
2024

PSRT STD
U.S. POSTAGE
PAID
AMICA

John P. Ley
Apt. H4
8500 N.E. Hazel Dell Ave.
Vancouver, WA 98665-8075

000389



Ex. E

Declaration of John Ley in Support of
Response to Voter Challenge

EX

9105A NE HWY 99, STE 200
Vancouver, WA 98665
(P) 360-635-6464 (F) 888-509-8268







Ex. I

Declaration of John Ley in Support of
Response to Voter Challenge



EX

9105A NE HWY 99, STE 200
Vancouver, WA 98665
(P) 360-635-6464 (F) 888-509-8268




Endorsements:

- Motorcycle
(Two-Wheel
Motorcycle
Only)

 2006 

VIN: 

Plate #: 

Tags Expire: 03-Jun-2025

JOHN P LEY

8500 NE HAZEL DELL AVE

APT H4 VANCOUVER WA

98665-8075

There are no alerts at
this time

[Renew tabs](#)

[Change address](#)

[Replace tabs](#)

[Email renewal reminders](#)

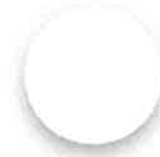
[Report of sale](#)

[Remove from list](#)




[Return to dol.wa.gov](#)
[Manage other DOL Services](#)

License eXpress for Individuals



Driver Information

JOHN PATRICK LEY
WDL3855BC03B

 There are no alerts at this time

Residential Address:

8500 NE HAZEL DELL AVE
APT H4 VANCOUVER WA
98665-8075

Mailing Address:

8500 NE HAZEL DELL AVE
APT H4 VANCOUVER WA
98665-8075

[Change your address](#)

[Update email preferences](#)

[Purchase driving record](#)

[Add a vehicle](#)

[Add a boat](#)

[Request a DUI Hearing](#)

[Request a Non-DUI Hearing](#)

[View Report of Sale History](#)

[View messages](#)

[View submissions](#)

[Manage document uploads](#)

[Schedule an appointment](#)

[Take an exam](#)


Driver License



License Status:
Licensed

Issued: 02-Dec-2020

Expires: 19-Jun-2026

 There are no alerts at this time

[Renew license](#)

[Replace license](#)

[Apply for a restricted license](#)

[Pre-apply for a new license](#)



Ex. H

Declaration of John Ley in Support of
Response to Voter Challenge

EX

9105A NE HWY 99, STE 200
Vancouver, WA 98665
(P) 360-635-6464 (F) 888-509-8268





Wyoming Secretary of State
Herschler Building East, Suite 101
122 W 25th Street
Cheyenne, WY 82002-0020
Ph. 307.777.7311
Email: Business@wyo.gov

WY Secretary of State
FILED: 05/15/2024 11:07 AM
Original ID: 2017-000740673
Amendment ID: 2024-004777145

Update Form

Name of Entity:

ID#:

Example: 2000-000123456

The above entity is requesting an update be made to reflect their most current information:

Principal Address:

Mailing Address:

Phone:

Fax:

Email:

(An email address is required. Email(s) provided will receive important reminders, notices and filing evidence.)

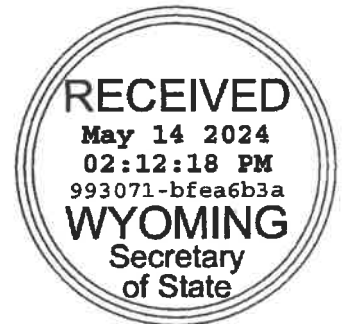
Signature: _____

Date: 5/13/2024

Printed Name: John Ley

Title: Operating Manager

Form may be submitted by:
Email: SOSRequest@wyo.gov
Mail-in: Refer to address at top of this form.



Ex. G

Declaration of John Ley in Support of
Response to Voter Challenge

EX

9105A NE HWY 99, STE 200
Vancouver, WA 98665
(P) 360-635-6464 (F) 888-509-8268



Ex. F

Declaration of John Ley in Support of
Response to Voter Challenge

EX

9105A NE HWY 99, STE 200
Vancouver, WA 98665
(P) 360-635-6464 (F) 888-509-8268



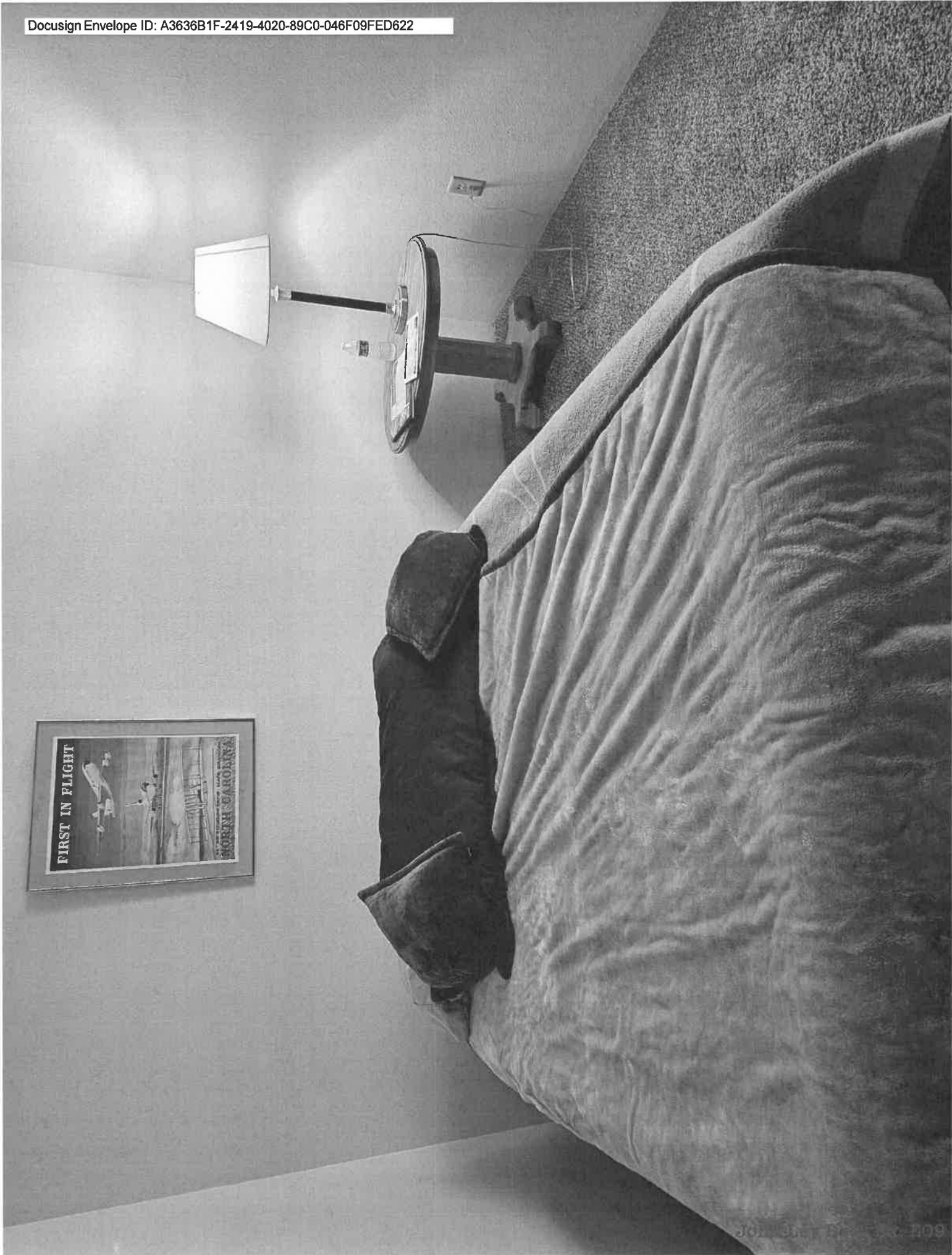














H-6

H-7

H-8

H-9

F-2
1P

H-1

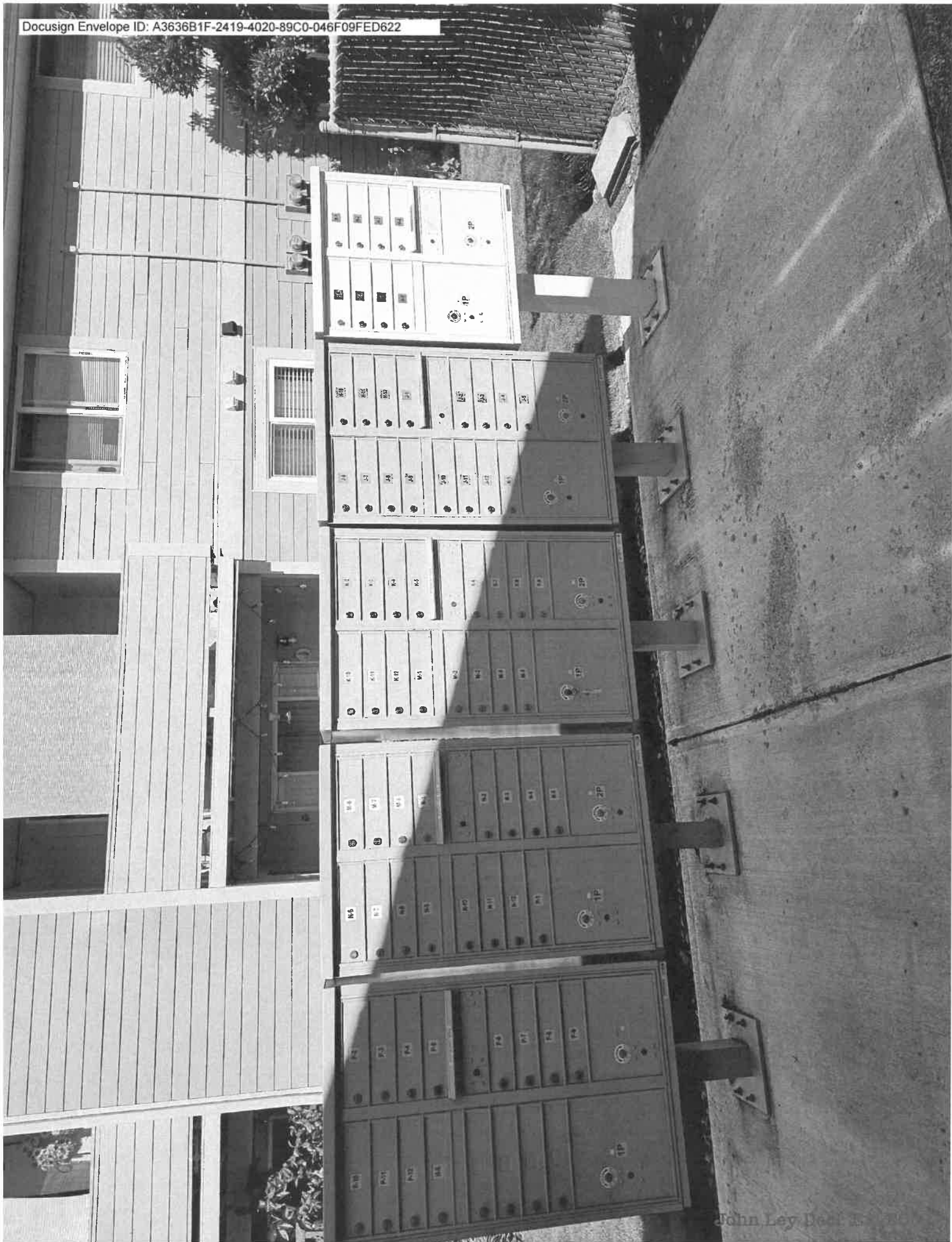
H-2

H-3

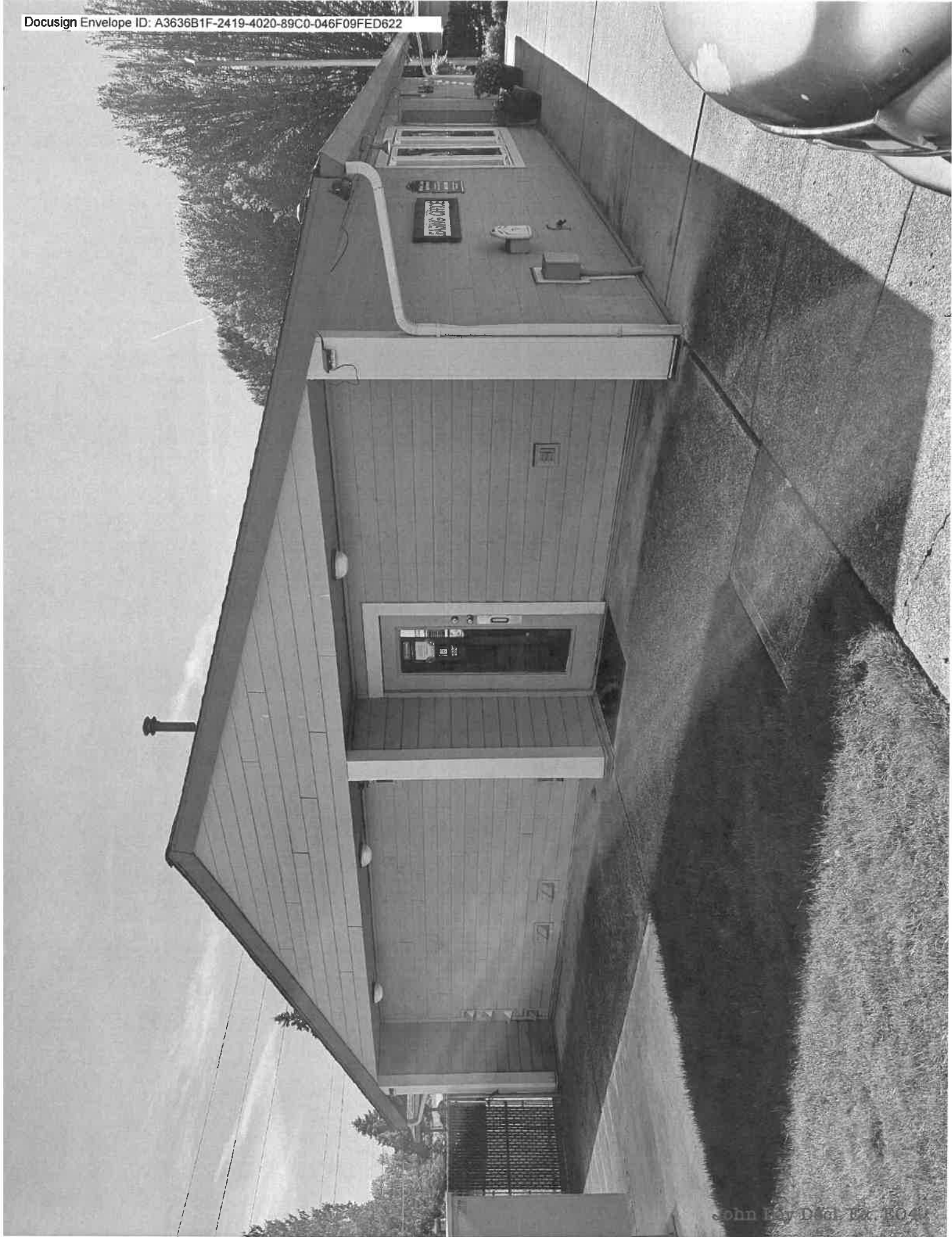
H-4

OUTGOING MAIL

F-1
2P











Auto Insurance Confirmation

Please use this as confirmation of auto insurance; however, this doesn't take the place of identification card.

Registered owner: JOHN P LEY

Address: 8500 NE HAZEL DELL AVE APT H4
VANCOUVER WA 98665

Policy number: USAA 001694083 7108

Policy effective date: June 9, 2024

Policy expiration date: December 9, 2024

Vehicle: 2006 [REDACTED]

VIN: [REDACTED]

Bodily injury liability limit: \$300,000

Ex. J

Declaration of John Ley in Support of
Response to Voter Challenge

EX

9105A NE HWY 99, STE 200
Vancouver, WA 98665
(P) 360-635-6464 (F) 888-509-8268





Account Number

Need to change your mailing address?

Call a Member Service Representative or please visit us at www.usaa.com.

Simply log on, then:

1. Click on your profile, in the upper right-hand corner containing your initials or photo.
2. Select "Contact Information".
3. Complete changes to your address, email or phone.

New Balance	Minimum Payment Due	Payment Due Date	Amount Enclosed
\$1,257.69	\$0.00	08/09/24	\$

To ensure proper credit, please return this portion with your Check or Money Order payment made payable to USAA Federal Savings Bank. DO NOT SEND CASH.

JOHN P LEY
 8500 NE HAZEL DELL AVE APT
 H4
 VANCOUVER WA 98665-8075



USAA Credit Card Payments
 PO BOX 8337
 Carol Stream, IL 60197-8337

Please detach and mail the coupon above with your payment.



Statement Closing Date

07/15/24

Account Number [REDACTED]
 Credit limit \$25,000.00
 Available credit \$18,150.00
 Questions? Visit us at www.usaa.com
 Questions? Call Customer Service (800) 531-9762
 Lost or Stolen Card (800) 531-9762
 Or write us at:
 PO BOX 65020, SAN ANTONIO, TX 78265-5020
 Remit payment to: USAA Credit Card Payments
 PO BOX 8337
 Carol Stream, IL 60197-8337

USAA Documents Online
 Get statements faster, save paper, and reduce your risk of identity theft with USAA Documents Online. It's free, convenient, and helps us save you money. Log on to usaa.com and sign up today.

Previous Balance		\$3,637.66
Payments	-	\$4,000.00
Other Credits	-	\$470.73
New Purchases	+	\$2,090.76
New Cash Advances	+	\$0.00
New Balance Transfers	+	\$0.00
Fees Charged	+	\$0.00
Interest Charged	+	\$0.00
New Balance		\$1,257.69
Credit Limit		\$25,000.00
Available Credit		\$18,150.00
Days in Billing Cycle		31

New Balance	\$1,257.69	
Minimum Payment Due	\$0.00	
Payment Due Date	08/09/24	
Late Payment Warning: If we do not receive your minimum payment by the date listed above, you may have to pay a late fee up to \$35.00.		
Minimum Payment Warning: If you make only the regular minimum payment* each period, you will pay more in interest and it will take you longer to pay off your balance. For example:		
If you make no additional charges using this card and each month you pay ...	You will pay off the balance shown on this statement in about ...	And you will end up paying an estimated total of ...
Only the minimum payment	10 years	\$2,005.00
\$41.00	3 years	\$1,488.00 (Savings = \$517.00)
If you would like information about credit counseling services, call 1-800-531-1291.		
*See Important Account Information at end of statement. You may repay the total balance at any time.		

Payment Conditions. Payments must be made in U.S. dollars and drawn on funds on deposit at an insured U.S. financial institution. **Please do not mail cash.**

- Payments made by check, money order, or through a third-party bill paying service, received by us by 5 PM Central Time will be credited as of the same date if the payment is accompanied with this payment coupon or your full 16-digit card number, and mailed to our payment address on the front of this statement.
- Payments made online (usaa.com) or over the phone (800-531-9762) by 11:59 PM Central Time on any day, except your Statement Closing Date, will be credited to your Account as of the same date. On your Statement Closing Date, online and phone payments must be made before 5 PM Central Time to be credited as of the same date, unless otherwise noted.
- In person payments received by the close of business at any location where such payments are accepted will be credited as of the date of receipt.
- Payments received after the times indicated will be credited the next business day.
- Payments that we accept that do not meet the above requirements will be credited within 5 days. We reserve the right to withhold credit availability until we confirm receipt of good funds.

Transactions (continued)				
Trans Date	Post Date	Reference Number	Description	Amount
06/28	06/28	[REDACTED]	PAYMENT - THANK YOU	\$4,000.00-
Total Payments And Credits For This Period				\$4,470.73-
Transactions				
JOHN P LEY - [REDACTED]				
Trans Date	Post Date	Reference Number	Description	Amount
06/15	06/15	[REDACTED]	[REDACTED]	[REDACTED]
06/18	06/18	[REDACTED]	[REDACTED]	[REDACTED]
06/18	06/18	[REDACTED]	[REDACTED]	[REDACTED]
06/18	06/18	[REDACTED]	[REDACTED]	[REDACTED]
06/19	06/19	[REDACTED]	[REDACTED]	[REDACTED]
06/19	06/19	[REDACTED]	[REDACTED]	[REDACTED]
06/19	06/19	[REDACTED]	[REDACTED]	[REDACTED]
06/21	06/21	[REDACTED]	[REDACTED]	[REDACTED]
06/22	06/22	[REDACTED]	[REDACTED]	[REDACTED]
06/23	06/23	[REDACTED]	[REDACTED]	[REDACTED]
06/23	06/23	[REDACTED]	[REDACTED]	[REDACTED]
06/23	06/23	[REDACTED]	[REDACTED]	[REDACTED]
06/24	06/24	[REDACTED]	[REDACTED]	[REDACTED]
06/24	06/24	[REDACTED]	[REDACTED]	[REDACTED]
06/24	06/24	[REDACTED]	[REDACTED]	[REDACTED]
06/25	06/25	[REDACTED]	[REDACTED]	[REDACTED]
06/25	06/25	[REDACTED]	[REDACTED]	[REDACTED]
06/25	06/25	[REDACTED]	[REDACTED]	[REDACTED]
06/26	06/26	[REDACTED]	[REDACTED]	[REDACTED]
06/27	06/27	[REDACTED]	CLARK COUNTY REP PARTY CLARKREPUBLIC WA	\$250.00
06/29	06/29	[REDACTED]	[REDACTED]	[REDACTED]
07/02	07/02	[REDACTED]	[REDACTED]	[REDACTED]
07/02	07/02	[REDACTED]	[REDACTED]	[REDACTED]
07/05	07/05	[REDACTED]	[REDACTED]	[REDACTED]
07/09	07/09	[REDACTED]	[REDACTED]	[REDACTED]
07/11	07/11	[REDACTED]	[REDACTED]	[REDACTED]
07/15	07/15	[REDACTED]	[REDACTED]	[REDACTED]
Total Transactions For JOHN P LEY				[REDACTED]
Fees				
Trans Date	Post Date	Card Reference Number	Description	Amount
Total Fees For This Period				\$0.00
Interest Charged				
Trans Date	Post Date	Reference Number	Description	Amount
07/15	07/15	[REDACTED]	Interest Charge on Purchases	\$0.00
07/15	07/15	[REDACTED]	Interest Charge on Cash Advances	\$0.00
07/15	07/15	[REDACTED]	Interest Charge on Balance Transfers	\$0.00
Total Interest For This Period				\$0.00

2024 Totals Year-to-Date	
Total fees charged in 2024	\$0.00
Total interest charged in 2024	\$0.00

Interest Charge Calculation

Your Annual Percentage Rate (APR) is the annual interest rate on your account.



Account Summary	
Statement Closing Date	07/15/24
Account Number	[REDACTED]
Payment Due Date	08/09/24

Additional Disclosures (continued)

If your name appears on this statement, our records show that this is your account and that you are liable for paying the New Balance.

Information reported to credit bureaus. We may report information about your account to credit bureaus. Late payments, missed payments, or other defaults on your account may be reflected in your credit report.

Consumer Report Dispute

If you believe we have reported inaccurate information about your account please submit a consumer report dispute to the address listed below:

USAA/Consumer Report Dispute
Attn: Form Code # CLCBD
P.O. Box 33009
San Antonio, TX 78265-3009

In your letter, please provide us with your name, address, account number, the information you believe to be incorrect, and if possible, the name of the Consumer Reporting Agency involved with a copy of the credit report and any other documentation which supports your claim.

You can also visit usaa.com and use keyword "Consumer Report Dispute Form" in the search field or if you are an existing USAA member, log into your USAA account and use the chat option keyword "Credit Bureau Dispute".

NOTE: When you pay by check, you authorize us to use information from your check to make a one-time electronic funds transfer from your checking account. Funds may be withdrawn from your account as early as the day we receive your payment and you will not receive your check back from your bank.

What to Do if You Think You Find A Mistake on Your Statement

If you think there is an error on your bill, write to us at:

**USAA Credit Card Services,
P.O. Box 65020,
San Antonio, TX 78265-5020.**

In your letter, give us the following information:

- Account information: Your name and account number.
- Dollar amount: The dollar amount of the suspected error.
- Description of Problem: If you think there is an error on your bill, describe what you believe is wrong and why you believe it is a mistake.

You must contact us within 60 days after the error appeared on your statement. You must notify us of any potential errors *in writing*. You may call us at 1-800-531-9762 or notify us electronically at usaa.com, but if you do we are not required to investigate any potential errors and you may have to pay the amount in question.

While we investigate whether or not there has been an error, the following are true:

- We cannot try to collect the amount in question, or report you as delinquent on that amount.
- The charge in question may remain on your statement, and we may continue to charge you interest on that amount. But, if we determine that we made a mistake, you will not have to pay the amount in question or any interest or other fees related to that amount.
- While you do not have to pay the amount in question, you are responsible for the remainder of your balance.
- We can apply any unpaid amount against your credit limit.

Your Rights If You Are Dissatisfied With Your Credit Card Purchases

If you are dissatisfied with the goods or services that you have purchased with your credit card, and you have tried in good faith to correct the problem with the merchant, you may have the right not to pay the remaining amount due on the purchase.

To use this right, all of the following must be true:

1. The purchase must have been made in your home state or within 100 miles of your current mailing address, and the purchase price must have been more than \$50. (Note: Neither of these are necessary if your purchase was based on an advertisement we mailed to you, or if we own the company that sold you the goods or services.)
2. You must have used your credit card for the purchase. Purchases made with cash advances from an ATM or with a check that accesses your credit card account do not qualify.
3. You must not yet have fully paid for the purchase.

If all of the criteria above are met and you are still dissatisfied with the purchase, contact us *in writing* at: **USAA Credit Card Services, P.O. Box 65020, San Antonio, TX 78265-5020.** While we investigate, the same rules apply to the disputed amount as discussed above. After we finish our investigation, we will tell you our decision. At that point, if we think you owe an amount and you do not pay we may report you as delinquent.

Liability for Unauthorized Use

If you notice the loss or theft of your credit card or a possible unauthorized use of your card, call us immediately at 1-800-531-9762 (overseas, call collect, (210)491-9097). You may also contact us on the Web at www.usaa.com or write to us at: **USAA Credit Card Services, P.O. Box 65020, San Antonio, TX 78265-5020.**

With our Zero Liability Policy, you are not liable for Unauthorized Use of your Card.

Important Account Information (continued)

Your Regular Minimum Payment this month is \$15.00. If the amount of the minimum payment due displayed on the first page of this statement is less than \$15.00, you may skip the difference between the two amounts and you need only pay the lower amount under our Pay-Ahead Program. This means the amount that you must pay on this statement is \$0.00. **Remember that Finance Charges continue to accrue on all unpaid balances.**

If you use a bill paying service and pay the minimum, the payment made will be the amount of the minimum payment due displayed on the first page rather than the Regular Minimum Payment. You may opt out of the Pay-Ahead Program at any time by calling us at 1-800-531-9762.

Ex. K

Declaration of John Ley in Support of
Response to Voter Challenge

EX

9105A NE HWY 99, STE 200
Vancouver, WA 98665
(P) 360-635-6464 (F) 888-509-8268





Account Number

Need to change your mailing address?

Call a Member Service Representative or please visit us at www.usaa.com.

Simply log on, then:

1. Click on your profile, in the upper right-hand corner containing your initials or photo.
2. Select "Contact Information".
3. Complete changes to your address, email or phone.

New Balance	Minimum Payment Due	Payment Due Date	Amount Enclosed
\$3,307.32	\$0.00	09/09/24	\$

To ensure proper credit, please return this portion with your Check or Money Order payment made payable to USAA Federal Savings Bank. DO NOT SEND CASH.

JOHN P LEY
8500 NE HAZEL DELL AVE APT
H4
VANCOUVER WA 98665-8075



USAA Credit Card Payments
 PO BOX 8337
 Carol Stream, IL 60197-8337



Please detach and mail the coupon above with your payment.



Statement Closing Date

08/15/24

Account Number

Credit limit

\$25,000.00

Available credit

\$20,676.00

Questions?

Visit us at www.usaa.com

Questions? Call Customer Service

(800) 531-9762

Lost or Stolen Card

(800) 531-9762

Or write us at:

PO BOX 65020, SAN ANTONIO, TX 78265-5020

Remit payment to: USAA Credit Card Payments

PO BOX 8337

Carol Stream, IL 60197-8337

USAA Documents Online

Get statements faster, save paper, and reduce your risk of identity theft with USAA Documents Online. It's free, convenient, and helps us save you money. Log on to usaa.com and sign up today.

Summary of Account Activity

Previous Balance		\$1,257.69
Payments	-	\$1,257.69
Other Credits	-	\$3,206.30
New Purchases	+	\$6,513.62
New Cash Advances	+	\$0.00
New Balance Transfers	+	\$0.00
Fees Charged	+	\$0.00
Interest Charged	+	\$0.00

New Balance	\$3,307.32
Credit Limit	\$25,000.00
Available Credit	\$20,676.00
Days in Billing Cycle	31

Payment Information

New Balance	\$3,307.32
Minimum Payment Due	\$0.00
Payment Due Date	09/09/24

Late Payment Warning: If we do not receive your minimum payment by the date listed above, you may have to pay a late fee up to \$35.00.

Minimum Payment Warning: If you make only the regular minimum payment* each period, you will pay more in interest and it will take you longer to pay off your balance. For example:

If you make no additional charges using this card and each month you pay ...	You will pay off the balance shown on this statement in about ...	And you will end up paying an estimated total of ...
Only the minimum payment	18 years	\$5,978.00
\$109.00	3 years	\$3,912.00 (Savings = \$2,066.00)

If you would like information about credit counseling services, call 1-800-531-1291.

*See Important Account Information at end of statement. You may repay the total balance at any time.

Payment Conditions. Payments must be made in U.S. dollars and drawn on funds on deposit at an insured U.S. financial institution. **Please do not mail cash.**

- Payments made by check, money order, or through a third-party bill paying service, received by us by 5 PM Central Time will be credited as of the same date if the payment is accompanied with this payment coupon or your full 16-digit card number, and mailed to our payment address on the front of this statement.
- Payments made online (usaa.com) or over the phone (800-531-9762) by 11:59 PM Central Time on any day, except your Statement Closing Date, will be credited to your Account as of the same date. On your Statement Closing Date, online and phone payments must be made before 5 PM Central Time to be credited as of the same date, unless otherwise noted.
- In person payments received by the close of business at any location where such payments are accepted will be credited as of the date of receipt.
- Payments received after the times indicated will be credited the next business day.
- Payments that we accept that do not meet the above requirements will be credited within 5 days. We reserve the right to withhold credit availability until we confirm receipt of good funds.

Transactions (continued)				
Trans Date	Post Date	Reference Number	Description	Amount
Transactions				
JOHN P LEY - [REDACTED]				
Total Payments And Credits For This Period				\$4,463.99-
Trans Date	Post Date	Reference Number	Description	Amount
07/15	07/16	[REDACTED]	[REDACTED]	[REDACTED]
07/15	07/16	[REDACTED]	CLARK COUNTY REP PARTY CLARKREPUBLIC WA	\$50.00
07/15	07/16	[REDACTED]	[REDACTED]	[REDACTED]
07/18	07/18	[REDACTED]	[REDACTED]	[REDACTED]
07/18	07/18	[REDACTED]	[REDACTED]	[REDACTED]
07/19	07/19	[REDACTED]	[REDACTED]	[REDACTED]
07/20	07/20	[REDACTED]	[REDACTED]	[REDACTED]
07/21	07/21	[REDACTED]	[REDACTED]	[REDACTED]
07/27	07/27	[REDACTED]	[REDACTED]	[REDACTED]
07/30	07/30	[REDACTED]	[REDACTED]	[REDACTED]
08/02	08/02	[REDACTED]	[REDACTED]	[REDACTED]
08/06	08/06	[REDACTED]	[REDACTED]	[REDACTED]
08/06	08/06	[REDACTED]	[REDACTED]	[REDACTED]
08/06	08/06	[REDACTED]	[REDACTED]	[REDACTED]
08/10	08/10	[REDACTED]	[REDACTED]	[REDACTED]
08/14	08/14	[REDACTED]	[REDACTED]	[REDACTED]
Total Transactions For JOHN P LEY				[REDACTED]
Fees				
Trans Date	Post Date	Card Reference Number	Description	Amount
Total Fees For This Period				\$0.00
Interest Charged				
Trans Date	Post Date	Reference Number	Description	Amount
08/15	08/15	[REDACTED]	Interest Charge on Purchases	\$0.00
08/15	08/15	[REDACTED]	Interest Charge on Cash Advances	\$0.00
08/15	08/15	[REDACTED]	Interest Charge on Balance Transfers	\$0.00
Total Interest For This Period				\$0.00

2024 Totals Year-to-Date	
Total fees charged in 2024	\$0.00
Total interest charged in 2024	\$0.00

Interest Charge Calculation			
Your Annual Percentage Rate (APR) is the annual interest rate on your account.			
Type of Balance	Annual Percentage Rate (APR)	Balance Subject to Interest Rate *	Interest Charge
Regular Purchases (v)	11.25%	\$0.00	\$0.00
Regular Cash Advances (v)	11.25%	\$0.00	\$0.00
The APR for a balance type followed by a (v) is a variable rate.			
Paying Interest and Your Grace Period: We will not charge you any further interest on your Purchase Balance on this Statement if you pay your entire New Balance by your Payment Due Date of 09/09/24.			
*Balance Computation Method: Average Daily Balance (including New Purchases). For more information about how we calculate the Balance Subject to Interest Rate and how resulting interest was determined, call (800) 531-9762.			



Account Summary	
Statement Closing Date	08/15/24
Account Number	[REDACTED]
Payment Due Date	09/09/24

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San Antonio, TX 78265-3009

In your letter, please provide us with your name, address, account number, the information you believe to be incorrect, and if possible, the name of the Consumer Reporting Agency involved with a copy of the credit report and any other documentation which supports your claim.

You can also visit usaa.com and use keyword "Consumer Report Dispute Form" in the search field or if you are an existing USAA member, log into your USAA account and use the chat option keyword "Credit Bureau Dispute".

NOTE: When you pay by check, you authorize us to use information from your check to make a one-time electronic funds transfer from your checking account. Funds may be withdrawn from your account as early as the day we receive your payment and you will not receive your check back from your bank.

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