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

## SUMMARY, FULL REPORT RECEIPTS AND EXPENDITURES

PDC OFFICE USE 110009429

**C4** 

(3/97)

02-10-2021

Candidate or Committee Name	(Do not abbreviate.	Include full name)
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(Friends of Gr	eg Gilda	y)					
Mailing Address P.O. Box 1472					City Stanwood, WA		
Zip + 4 98292		Office Sought (Cano STATE REPRES		Election Date 2022	*For PACs, Parties & C this report period, did the co		
Report Period F	From (last C-4	) To (ei	nd of period)	Final Report?	expenditure (i.e., an expen	se not consi	dered a contribution)
Covered	01/01/21	L 01	/31/21	Yes No X	supporting or opposing a sta	ate or local o	andidate?
RECEIPTS					*See next page	Yes	No
<ol> <li>Previous total ca (if beginning a n</li> </ol>	ash and in kin ew campaign	d contributions (From or calendar year, se	i line 8, last C-4) e instruction boo	) klet)		·· <u>\$</u>	\$3,889.69
2. Cash received (	From line 2, S	Schedule A)			\$ \$0.00	<u> </u>	
3. In kind contribut	ions received	(From line 1, Schedu	ıle B)		\$0.00	<u> </u>	
4. Total cash and i	n kind contrib	utions received this p	eriod (Line 2 plu	us 3)			\$0.00
5. Loan principal re	epayments ma	ade (From line 2, Sch	edule L)		\$0.00	<u> </u>	
6. Corrections (Fro	om line 1 or 3,	Schedule C)		Show + or	(-) \$0.00	<u> </u>	
7. Net adjustments	this period (	Combine line 5 & 6)			Show + or (-)		\$0.00
8. Total cash and i	n kind contrib	utions during campai	gn (Combine line	es 1, 4 & 7)			\$3,889.69
9. Total pledge pay	yments due (F	From line 2, Schedule	В)	\$0.00			
EXPENDITURES							
10. Previous total ca (If beginning a n	ash and in kin Iew campaign	d expenditures (From or calendar year, se	i line 17, last C-4 e instruction boo	4) oklet)			\$0.00
11. Total cash expe	nditures (Fror	n line 4, Schedule A)			\$44.0	0	
12. In kind expendit	ures (goods &	services) (From line	1, Schedule B)		\$0.0	٥	
13. Total cash and i	n kind expend	ditures made this peri	od (Line 11 plus	line 12)			\$44.00
14. Loan principal re	epayments ma	ade (From line 2, Sch	edule L)		\$0.0	<u>0</u>	
15. Corrections (Fro	om line 2 or 3,	Schedule C)		Show + or	(-) \$0.0	0	
16. Net adjustments	this period (	Combine lines 14 & 1	5)		Show + or (-)		\$0.00
	n kind expend						\$44.00
CANDIDATES ONLY Wor	n Lost L	Name not Inopposed on ballot	18. Cash on ha	and (Line 8 minus line	17) ance(s) plus your petty cash balance.]		\$3,845.69
Primary election					bts owed)		\$5,000.00
Treasurer's Daytime	Telephone N	o.:					<u> </u>
(253)220-5590	)		20. Balance (S	Surplus or deficit) (Line	18 minus line 19)		(\$1,154.31)
	ertify that the inf	_	accompanying sch		is true and correct to the best of n	ny knowledge.	
Candidate's Signature		Date		Treasurer's Signatu	re		Date
GREGORY L. GII	DAY	02	/10/21	Jason Michau	d		02/10/21

## CASH RECEIPTS AND EXPENDITURE



Candidate or Committee Nar	me (Do not ab	breviate. Use full name.)			ĸ	epon Dale
(Friends of Greg G	Gilday)				01/01/21	01/31/21
1. CASH RECEIPTS (Cont	tributions) whic	h have been reported on (	C3. List each dep	oosit made since last C4	report was submitted	
Date of deposit	Amount	Date of deposit	Amount	Date of deposit	Amount	Total deposits
						r.
<ol><li>TOTAL CASH RECEIPT</li></ol>	S			Enter a	so on line 2 of C4	<sup>⊅</sup> \$0.00

CODES FOR CLASSIFYING EXPENDITURES: If one of the following codes is used to describe an expenditure, no other description is generally needed. The exceptions are:

- 1) If expenditures are in-kind or earmarked contributions to a candidate or committee or independent expenditures that benefit a candidate or committee, identify the candidate or committee in the Description block;
- When reporting payments to vendors for travel expenses, identify the traveler and travel purpose in the Description block; and 2)
- If expenditures are made directly or indirectly to compensate a person or entity for soliciting signatures on a statewide initiative or referendum 3) petition, use code "V" and provide the following information on an attached sheet: name and address of each person/entity compensated, amount paid each during the reporting period, and cumulative total paid all persons to date to gather signatures.
  - C Contributions (monetary, in-kind & transfers)

CODE DEFINITIONS ON NEXT PAGE

- I Independent Expenditures
- L Literature, Brochures, Printing
- B Broadcast Advertising (Radio, TV)
- N Newspaper and Periodical Advertising
- O Other Advertising (yard signs, buttons, etc.)
- V Voter Signature Gathering

- P Postage, Mailing Permits
- S Surveys and Polls
- F Fundraising Event Expenses
- T Travel, Accommodations, Meals
- M Management/Consulting Services
- W Wages, Salaries, Benefits
- G General Operation and Overhead

## 3. EXPENDITURES

- a) Expenditures of \$50 or less, including those from petty cash, need not be itemized. Add up these expenditures and show the total in the amount column on the first line below ...
- b) Itemize each expenditure of more than \$50 by date paid, name and address of vendor, code/description, and amount.
- c) For each payment to a candidate, campaign worker, PR firm, advertising agency or credit card company, attach a list of detailed expenses or copies of receipts/invoices supporting the payment.

Amount	Purpose of Expense and/or Description	Code	Vendor or Recipient (Name and Address)	Date Paid
\$44	N/A	N/A	Expenses of \$50 or less	N/A
_				
s \$ \$0	Total from attached pages			

4. TOTAL CASH EXPENDITURES

IN KIND CONTRIBUTIONS, PLEDGES,
ORDERS, DEBTS, OBLIGATIONS



Candidate or Committee Name (Do not abbreviate. Use full name.) (Friends of Greg Gilday)

Report Date 01/01/21 01/31/21

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3. ORDERS PLACED, DEBTS, OBLIGATIONS. (Give estimate if actual amount not known. Exclude loans. Report loans on Schedule L.)

Expenditure Date	Vendor's/Recipient's Name and	Address	Amount Owed	Code	OR De	escription of O	bligation
1/01/2021	AB HAYS, LLC PO BOX 2101 TACOMA WA, 98401		5000.00		Carry	Forward	Debt
		TOTAL THIS PAGE	5000.00		1		