

CASH RECEIPTS MONETARY CONTRIBUTIONS

C3

(1/02)

THIS SPACE FOR OFFICE USE

110020821

05-17-2021

Candidate or Committee Name (Do not abbreviate. Use full name.)

(Friends of Greg Gilday)

Mailing Address

P.O. Box 1472

City Zip + 4 Office Sought (candidates)
 Stanwood, WA 98292 STATE REPRESENTATIVE

Election Date
 2022

1. MONETARY CONTRIBUTIONS DEPOSITED IN ACCOUNT

Date Received		Amount	Total
	a. Anonymous		
	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	P R I N T	G E N E R A L	Amount	Aggregate* Total
05/17/21	LAW OFFICE OF COLE & GILDAY, 10101 270TH ST., NW STANWOOD, WA 98292		X		\$1,000.00	\$1,000.00
	Occupation					
05/17/21	LAW OFFICE OF COLE & GILDAY, 10101 270TH ST., NW STANWOOD, WA 98292			X	\$1,000.00	\$1,000.00
	Occupation					
05/16/21	PATRICK GILDAY 510 N. CRESTVIEW MOSES LAKE, WA 98837		X		\$1,000.00	\$1,000.00
	Occupation	RETIRE				
05/16/21	SHARON GILDAY 510 N. CRESTVIEW MOSES LAKE, WA 98837		X		\$1,000.00	\$1,000.00
	Occupation	RETIRE				
05/16/21	PATRICK GILDAY 510 N. CRESTVIEW MOSES LAKE, WA 98837			X	\$1,000.00	\$1,000.00
	Occupation	RETIRE				
	<input checked="" type="checkbox"/> Check here if additional pages are attached	Sub-total			\$5,000.00	*See reverse for details.
		Amount from attached pages			\$1,000.00	

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.

\$6,000.00

4. Date of Deposit

05/17/21

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

Treasurer's Signature

Date

Jason Michaud

05-17-2021

Treasurer's Daytime Telephone No.: (253)220-5590

RECEIPTS CONTINUATION SHEET (Attachment to C-3 Form)

Page 2

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

Deposit Date
05/17/21

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	P R I	G E N	Amount	Aggregate Total*
05/16/21	SHARON GILDAY 510 N. CRESTVIEW MOSES LAKE, WA 98837	, Occupation RETIRED		X	\$1,000.00	\$1,000.00
		Occupation				
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Page Total \$1,000.00