

# CASH RECEIPTS MONETARY CONTRIBUTIONS

# C3

(1/02)

THIS SPACE FOR OFFICE USE

110044934

09-07-2021

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

**Nicole Macri (Friends of Nicole Macri)**

Mailing Address

**PO Box 9100**

City

**Seattle, WA**

Zip + 4

**98109**

Office Sought (candidates)

**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 <u>0</u> (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	G E N	Amount	Aggregate* Total
09/01/21	UnitedHealth Group Inc PO Box 1459 Minneapolis, MN 55440		X		\$1,000.00	\$1,000.00
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Occupation				
		Sub-total			\$1,000.00	*See reverse for details.
	<input type="checkbox"/> Check here if additional pages are attached	Amount from attached pages			\$0.00	

## 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.

**\$1,000.00**

4. Date of Deposit

**09/01/21**

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

Treasurer's Signature

Date

**Jason Bennett**

**09-07-2021**

Treasurer's Daytime Telephone No.: **(206)486-0085**