

CASH RECEIPTS MONETARY CONTRIBUTIONS

THIS SPACE FOR OFFICE USE

110048594

	001	MINIDOIN	ONO	(1/02)	09	-20-2021
Candidate	or Committee Name (Do not abbreviate. Use full na	ıme.)				
(Friend	ds of Greg Gilday)					
Mailing Ad	dress					
P.O. B	ож 1472					
City Zip			Office Sought (candidates)		Election Date	
Stanwood, WA 98292			STATE REPRESENTATIVE		2022	
1. MONET	ARY CONTRIBUTIONS DEPOSITED IN ACCOUNT	-				
Date Received					Amount	Total
	a. Anonymous					
	b. Candidate's personal funds deposited in the					
	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 itemize	ed and number of p	persons giving (p	ersons)		
2. CONTR	IBUTIONS OVER \$25.00		*	P G		
Date Received	Contributor's Name, Address, City, State, Zip		s of more than \$100:* Name, City and State	R E I N	Amount	Aggregate [*] Total
9/02/21	NOVARTIS SERVICES INC.			х		
	One Health Plaza				\$1,000.00	\$1,000.00
	East Hanover, NJ 07936					
		Occupation		х		
9/02/21	NOVARTIS SERVICES INC. One Health Plaza				# 500.00	# E00.00
	East Hanover, NJ 07936				\$500.00	\$500.00
		Occupation				
		Occupation		 		
		Occupation		1 1 1		
		Occupation				
				Sub-total	\$1,500.00	

4. Date of Deposit

0

09/03/21

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

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.

Check here if additional

pages are attached

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

Treasurer's Signature Date

Amount from

attached pages

09-20-2021 Jason Michaud

\$0.00

\$1,500.00

*See reverse

for details.