## **CAMPAIGN FINANCIAL REPORT**

(All of the information in this report is public information)

CONTRIBUTIONS RECEIVED  ive the total for all contributions received during the period of time covered by this report. Contributions should be money or in-kind) rather than contributor. See note on contribution limits on the back of this form. Use a separate she contributions from a single source that exceeded \$100 during the calendar year. This itemization must include name, add to occupation if self-employed, amount and date for these contributions.  ASH  \$ 0.16 (interest) TOTAL CASH-ON-HAND  OTAL AMOUNT RECEIVED    \$ 0.16	
CONTRIBUTIONS RECEIVED  Sive the total for all contributions received during the period of time covered by this report. Contributions should be money or in-kind) rather than contributor. See note on contribution limits on the back of this form. Use a separate she contributions from a single source that exceeded \$100 during the calendar year. This itemization must include name, add or occupation if self-employed, amount and date for these contributions.  CASH  \$ 0.16 (interest) TOTAL CASH-ON-HAND \$ 3,837.92  DISBURSEMENTS  Include the amount, date and purpose for all disbursements made during the period of time covered by reportational sheets if necessary.	
Sive the total for all contributions received during the period of time covered by this report. Contributions should be money or in-kind) rather than contributor. See note on contribution limits on the back of this form. Use a separate she contributions from a single source that exceeded \$100 during the calendar year. This itemization must include name, add or occupation if self-employed, amount and date for these contributions.  CASH  \$ 0.16 (interest)	
Include the amount, date and purpose for all disbursements made during the period of time covered by repor Attach additional sheets if necessary.	et to item dress, emp
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TOTAL	
CORPORATE PROJECT EXPENDITURES  Corporations must list any media project or corporate message project for which contribution(s) or expen more than \$200. Submit a separate report for each project. Attach additional sheets if necessary.  Project title or description	diture(s)
Date Purpose Name and Address Expenditur of Recipient Contribut Amoun	tion
TOTAL	
I certify that this is a full and true statement.  Signature  Printed Name  Sean Hayford Oleary  Telephone	
Address 7229 2nd Ave S, Richfield MN 55423	