

Rec. 10/26/16  
mz

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation LUNDBERG 4 LF City Council

Office sought or ballot question \_\_\_\_\_ District \_\_\_\_\_

Type of report \_\_\_\_\_ Candidate report  
 \_\_\_\_\_  Campaign committee report  
 \_\_\_\_\_ Association or corporation report  
 \_\_\_\_\_ Final report

Period of time covered by report:  
 from 9/7/2016 to 10/26/2016

## CONTRIBUTIONS RECEIVED

Give the total for all contributions received during the period of time covered by this report. Contributions should be listed by type (money or in-kind) rather than contributor. See note on contribution limits on the back of this form. Use a separate sheet to itemize all contributions from a single source that exceeded \$100 during the calendar year. This itemization must include name, address, employer or occupation if self-employed, amount and date for these contributions.

CASH \$ 2,100.00 TOTAL CASH-ON-HAND \$ 75.14  
 IN-KIND + \$ 215.00  
 TOTAL AMOUNT RECEIVED = \$ 2,315.00

## DISBURSEMENTS

Include the amount, date and purpose for all disbursements made during the period of time covered by report. Attach additional sheets if necessary.

Date	Purpose	Amount
9/9/2016	FROGGY'S: CAMPAIGN YARD SIGNS	2,308.50
9/14/2016	CITY OF LITTLE FALLS: MAP OF WARD	5.00
9/23/2016	SPECTRUM: DOOR HANGERS POSTCARDS	268.16
10/26/2016	MORRISON COUNTY RECORD: AD	223.20
TOTAL		2,804.86

## CORPORATE PROJECT EXPENDITURES

Corporations must list any media project or corporate message project for which contribution(s) or expenditure(s) total more than \$200. Submit a separate report for each project. Attach additional sheets if necessary.

Project title or description \_\_\_\_\_

Date	Purpose	Name and Address of Recipient	Expenditure or Contribution Amount
TOTAL			

I certify that this is a full and true statement. Susan L. Prossano 26 October 2016  
Signature Date

Printed Name Susan L. Prossano Telephone 320-632-6341 Email (if available) \_\_\_\_\_

Address 10139 HALTON ROAD, LITTLE FALLS, MN 56245

Report

Office

Name

For Office Use Only: