## **CAMPAIGN FINANCIAL REPORT**

(All of the information in this report is public information) Name of candidate, committee or corporation Bob Mitchel District Medina Type of Candidate report Period of time covered by report: report Campaign committee report from 9-1-14 to 9-9-14Association or corporation report Final report 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** TOTAL CASH-ON-HAND IN-KIND TOTAL AMOUNT RECEIVED **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 0 TOTAL 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 Expenditure or of Recipient Contribution Amount I certify that this is a full and true statement. \_\_\_ Printed Name Bob Mitchell Telephone 6/2-298-1785 Email (if available) Address 1745 N. Willow Dr. Long Lake MN 55358

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