

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation John Grimm

Office sought or ballot question LESUEVA County Commissioner District 3

Type of report Candidate report Period of time covered by report:
 Campaign committee report from 8/2/14 to 10/20/14
 Association 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 \$ 0
 IN-KIND + \$ _____
 TOTAL AMOUNT RECEIVED = \$ 0

EXPENDITURES

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

| Date | Purpose | Amount |
|----------------|------------------|----------------------|
| <u>8/2/14</u> | <u>ENVELOPES</u> | <u>25.75</u> |
| <u>8/4/14</u> | <u>STAMPS</u> | <u>98.00</u> |
| <u>8/11/14</u> | <u>PRINTING</u> | <u>499.64</u> |
| <u>8/11/14</u> | <u>STAMPS</u> | <u>196.00</u> |
| TOTAL | | <u>817.39</u> |

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. John Grimm 10/20/14
Signature Date

Printed Name John Grimm Telephone 612-756-1075 Email (if available) _____

Address 206 First St. N., Montgomery, MD 56069

Report Office Name For Office Use Only: