CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Joe Connolly

Office sought or ballot question County Commissioner District 2nd.

Type of report
- X Candidate report
- ___ Campaign committee report
- ___ Association or corporation report
- ___ Final report

Period of time covered by report:

from ___ to ___

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 $ 0

IN-KIND + $ ___

TOTAL AMOUNT RECEIVED = $ 0

TOTAL CASH-ON-HAND $ 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*
	TOTAL	0

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	0

I certify that this is a full and true statement. Joe Connolly (Signature) 1-13-15 (Date)

Printed Name Joe Connolly Telephone 507-665-6150 Email (if available) ___

Address 36966 261st Ave. Le Sueur, MN 56058

Report

Office

Name

Office Use Only: