

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Simonette for Aud/TREAS Committee
 Office sought or ballot question Auditor/Treasurer District Le Sueur County

Type of report _____ Candidate report
 _____ Campaign committee report
 _____ Association or corporation report
 _____ Final report

Period of time covered by report:
 from 5/20/14 to 7/23/14

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 \$ 50- TOTAL CASH-ON-HAND \$ 0
 IN-KIND + \$ _____
 TOTAL AMOUNT RECEIVED = \$ 50-

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>5/20/14</u>	<u>Filing Fee</u>	<u>50.00</u>
TOTAL		<u>50.00</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. Rm G. A. D. 23 July 14
 Signature Date
 Printed Name Rm Gernscheid Telephone (507) 357-6516 Email (if available) _____
 Address 32 N. Cordova Avenue, LeCenter, MN 56057

Name Pam Simonette Office Aud-Treas Report 1st

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