

# CAMPAIGN FINANCIAL REPORT

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

*rec'd  
10/4/22  
SB*

Name of candidate, committee or corporation Patricia Lesmeister Nelson

Office sought or ballot question County Commissioner District 5

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

Period of time covered by report:  
 from 5/17/22 to 10-4-22

## 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. *see attachment*

CASH \$ 1,200.00 TOTAL CASH-ON-HAND \$ 0.00  
 IN-KIND + \$ \_\_\_\_\_  
 TOTAL AMOUNT RECEIVED = \$ 1,200.00

## 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
5/17/22	Billing fee	50.00
6/1-10/11	Printing fees, Brochures + cards	307.97
9/1-10/30	Advertising + Float	433.58
10/1-9/1	Sign graphics + printing signs	563.20
6/1-10/11	Miscellaneous - - - - -	301.48
	<b>TOTAL</b>	<u>1,656.23</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
		<b>TOTAL</b>	

I certify that this is a full and true statement. Patricia Lesmeister Nelson 10/4/22

Signature Date

Printed Name Patricia Lesmeister Nelson Telephone 612-599-1309 Email (if available) \_\_\_\_\_

Address 1000 Park Ave, Morris, MN 56267

Name Patricia Lesmeister Nelson Office County Commissioner Report Initial Report

For Office Use Only:

**CONTRIBUTIONS RECEIVED**

<u>Name</u>	<u>Address</u>	<u>Employment</u>	<u>Amount</u>	<u>Date</u>
Michelle R. Lelwica	36083 Mary Beach Rd. Pine River, MN. 56474	Self- Employed Chiropractor	\$500.00	9/2/22
James Lelwica	36083 Mary Beach Rd. Pine River, MN 56474	Self-Employed Telecommunications	\$500.00	9/2/22
Kenwood Rund	33103 160 <sup>th</sup> St. Battle Lake, MN 56515	Retired Chiropractor	\$200.00	9/4/22

TOTAL CONTRIBUTIONS RECEIVED \$1,200.00