

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Trevor Lund

Office sought or ballot question Hastings City Council District Ward 4

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

Period of time covered by report: from 09.23.2016 to 10.24.2016

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 | \$ | 0.00 | | TOTAL CASH-ON-HAND | \$ | 0.00 |
| IN-KIND | + | 0.00 | | | | |
| TOTAL AMOUNT RECEIVED | = | 0.00 | | | | |

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 |
|--------------|----------------------|-----------------|
| 09.26.2016 | Hastings Inn Sign Ad | \$38.00 |
| 09.27.2016 | KDWA Sign Ad | \$39.00 |
| 09.29.2016 | KDWA Radio Ads | \$60.00 |
| 10.24.2016 | Door Hangers | \$277.12 |
| 10.24.2016 | Facebook | \$23.97 |
| TOTAL | | \$438.09 |

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. _____
Signature Date

Printed Name Trevor Lund Telephone 651.206.9025 Email (if available) VOTE4TrevorLund@gmail.com

Address 723 36th Street West - Hastings, MN 55033

Report
Office
Name
For Office Use Only: