

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Claudia M. Lacy
 Office sought or ballot question City Council District _____

Type of report Candidate report Period of time covered by report:
 _____ Campaign committee report
 _____ Association or corporation report from 9/1/22 to 10/1/22
 _____ 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 = \$ 100.00

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
<u>Sept 2022</u>	<u>SIBS + POSTS</u>	<u>500.00</u>
TOTAL		

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. Claudia M Lacy

Signature

Date

Printed Name Claudia M Lacy Telephone 952 836 6347 Email (if available) Claudialacy1@gmail.com
 Address 5940 Loring Dr Minnetrista MN 55364

RECEIVED

OCT 28 2022

CITY OF

Report

Office

Name

For Office Use Only: