Lisa

These are amended
Campaign Finance Reports
Son 2022. I Think They
can be posted as such.
Reports for 2023 are due on
January 31, 2024 so that
will be forth coming.

David M. Senjeun

ffice sought or ballot	mmittee or corporation	David M. Senjer y Board #2 District	2
Type of	Candidate repo Campaign comi Association or o Final report	nittee report	covered by report:
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money or in-kind) rathe	r than contributor. See note on	period of time covered by this report. Contribu contribution limits on the back of this form. Use uring the calendar year. This itemization must increase contributions.	a separate sheet to itemize a
CASH	\$ <u>500</u>	CONTRACTOR TOTAL CASH-ON-HAND	\$ 308115
N-KIND	+ \$	·	515.19
FOTAL AMOUNT RECE	IVED = \$ 800	.0001	
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Attach additional shee	Cheeks Printing	Purpose J. \$ 16.55	Amount 2124 270.3)
		TOTAL	991.85
			286.86
more than \$200. Subr	t any media project or corpo nit a separate report for each	TE PROJECT EXPENDITURES brate message project for which contribution project. Attach additional sheets if necessa	n(s) or expenditure(s) totary.
more than \$200. Subr	t any media project or corpo	orate message project for which contribution project. Attach additional sheets if necessa	ry.
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more than \$200. Subr Project title or descrip	t any media project or corponit a separate report for each	orate message project for which contribution project. Attach additional sheets if necessations in the contribution of the cont	Expenditure or Contribution
more than \$200. Subr Project title or descrip	t any media project or corpo nit a separate report for each ition	orate message project for which contribution project. Attach additional sheets if necessa Name and Address of Recipient	Expenditure or Contribution

Office sought or bal	lot question _	Commussi	nep	District	_d
Type of	<u> </u>	_ Candidate report _ Campaign commit _ Association or corp _ Final report			le covered by report:
(money or in-kind) rat contributions from a s	ther than contribingle source that mployed, amour	ceived during the peri outor. See note on cor	BUTIONS RECEIVE find of time covered by a stribution limits on the b ag the calendar year. This contributions. TOTAL CA	his report. Contri ack of this form. U i itemization must O SH-ON-HAND	se a separate sheet to it
Include the amount, Attach additional shape 7/16/23 7/14/23 9/6/23 //2/2	eets if necessa Ched Print	iry	nents made during the	e period of time o	Amount 270.31 2.338,74 5,422.12
10/30/22	Posto	IN Cheek to	donar	ATOTAL	196.00
Corporations must I more than \$200. Su Project title or descr	iption	project or corporate	PROJECT EXPENDI e message project for oject. Attach addition Name and A of Recipi	which contribut al sheets if neces address	ion(s) or expenditure sary. 8287.
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	envertende saarstaages besteldige				1 . 1 . 1

CAMPAIGN FINANCIAL REPORT

		ion in this report is public information)	y Board				
	ite, committee or corporation <u>Se</u>	£_3	7 1004100				
Office sought or	ballot question <u>LOWMISS</u>	LONCY District					
Type of report	Candidate report	ittee report	covered by report:				
	Association or co	rporation report from 0/30	/22to /2/31/22				
handers and become subject to the deposition of the		RIBUTIONS RECEIVED	entreprisente de la contractiva del contractiva de la contractiva				
(money or in-kind) contributions from	all contributions received during the po rather than contributor. See note on c a single source that exceeded \$100 dur If-employed, amount and date for these	eriod of time covered by this report. Contrib ontribution limits on the back of this form. Use ing the calendar year. This itemization must in contributions.	a separate sneet to Itemize all				
CASH	\$ <u></u>	2.08 TOTAL CASH-ON-HAND	\$ 112.03 57				
IN-KIND	* \$		\$ 3303.57				
TOTAL AMOUNT	RECEIVED = \$						
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		ISBURSEMENTS ements made during the period of time co	vered by report.				
Date		Purpose	Amount				
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		E PROJECT EXPENDITURES	cu ·				
Corporations mumore than \$200.	ist list any media project or corpora Submit a separate report for each p	ate message project for which contribution project. Attach additional sheets if necess	on(s) or expenditure(s) total ary.				
Project title or de	escription						
Date	Purpose	Name and Address of Recipient	Expenditure or Contribution Amount				
		TOTAL	none				
Parameter and the state of the							
I certify that this is a full and true statement. CDH Sourjour 1/31/0-3							
Signature Date							
Printed Name David H Seijam Telephone 507/319- Email (if available) d senjeme gol. con							
Address 2423 12th Muse NCO Rochester, MN 55901							