

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation David H. Senjem

Office sought or ballot question County Board #2 District 2

Type of report  Candidate report Period of time covered by report:  
 \_\_\_\_\_ Campaign committee report  
 \_\_\_\_\_ Association or corporation report  
 \_\_\_\_\_ Final report from 5/17/22 to 7/14/22

## 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.

CASH \$ 800.00 TOTAL CASH-ON-HAND \$ 508.15  
 IN-KIND + \$ \_\_\_\_\_  
 TOTAL AMOUNT RECEIVED = \$ 800.00

## 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>7/6/22</u>	<u>Cheeks</u>	<u>26.54</u>
<u>7/14/22</u>	<u>Printing</u>	<u>270.31</u>
<b>TOTAL</b>		<b><u>291.85</u></b>

## 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. \_\_\_\_\_

Printed Name David H. Senjem Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Telephone 507-319-7627 Email (if available) dsenjem@aol.com  
 Address \_\_\_\_\_ Rodester, MN 55901

Report  
Office  
Name  
For Office Use Only:

David M. Seijem  
Contributions in Excess of \$100.00  
5-17-22 - 7/14/22

Name	Address	Employer	Amount Date
David Seijem	[REDACTED] Rochester 55901	State of Minnesota	\$250.00 7/6/22
Jenny Williams	[REDACTED] Rochester 55901	Retired	\$150.00 6/28/22