

**CAMPAIGN FINANCIAL REPORT (Photocopy version)**

**CAMPAIGN FINANCIAL REPORT**

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

Name of candidate, committee or corporation SHEILA KISCADEN

Office sought or ballot question COUNTY COMMISSIONER District 6  
OLMSTED COUNTY

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 7/22/22  
INITIAL 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 \$ 0 TOTAL CASH-ON-HAND \$ 33.27  
 IN-KIND + \$ 0  
 TOTAL AMOUNT RECEIVED = \$ 0

**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
<b>NO DISBURSEMENTS</b>		
	<b>TOTAL</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. R Kiscaden 7/22/22  
 Signature Date

Printed Name TREASURER RICHARD KISCADEN Telephone 507-288-5980 Email (if available) RKISCADEN@GMAIL.COM  
 Address [REDACTED] ROCHESTER, MN 55902

Report

Office

For Office Use Only: Name