Received 10/29/24

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation: Laurel Kilde

Office sought or ballot question: City Council - Ward 4 District: Fergus Falls Ward 4

Type of report:
- X Candidate report
- ___ Campaign committee report
- ___ Association or corporation report
- ___ Final report

Period of time covered by report: from 8/19/24 to 10/25/24

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 $ Ø

IN-KIND + $ Ø

TOTAL AMOUNT RECEIVED = $ Ø

TOTAL CASH-ON-HAND $ 47.44

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
	None	
	TOTAL	None

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
	None		
		TOTAL	None

I certify that this is a full and true statement. Laurel Kilde

Signature Date

Printed Name Laurel Kilde Telephone 218-205-6687 Email (if available) laurelkilde@gmail.com

Address 506 South Union Avenue, Fergus Falls, MN 56537

For Office Use Only: Name Office Report