

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation The Committee to Elect Steve Erickson
 Office sought or ballot question Cass County Commissioner District Four

Type of report
 Candidate report
 Campaign committee report
 Association or corporation report
 Final report

Period of time covered by report:
 from 10/28/22 to 12/6/22

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 \$ 0 TOTAL CASH-ON-HAND \$ (1,156.99)
 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
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. Stephen K. Erickson 1-17-23
 Signature Date

Printed Name Stephen K. Erickson Telephone 612-741-3394 Email (if available) Steve@erickson
 Address 4890 Hiram Loop Rd; Hackettsack, MN 56452 medication, ci

Name Steve Erickson Office Co. Commissioner Dist. 4 Report Final "Report"

For Office Use Only: