

# CAMPAIGN FINANCIAL REPORT

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



Name of candidate, committee or corporation KATHLEEN A. HEANEY

Office sought or ballot question Sherburne Co A Heaney District \_\_\_\_\_

Type of report:  Candidate report;  Campaign committee report;  Association or corporation report;  Final report. Period of time covered by report: from 5-29-18 to 8-3-18

### 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 \$ \_\_\_\_\_ TOTAL CASH-ON-HAND \$ 0  
IN-KIND + \$ \_\_\_\_\_  
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
05-29-18	PARADE HANDICUTS	89 <sup>33</sup>
07-18-18	PARADE	100 <sup>00</sup>
	TOTAL	189 <sup>33</sup>

### 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. [Signature] 3 August 2018  
Signature Date

Printed Name KATHLEEN HEANEY Telephone 602-437-2007 Email (if available) robert.heaney@gmaif.com  
Address \_\_\_\_\_

Report  
Office  
Name  
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