

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Nicole Eckstrom

Office sought or ballot question County Commissioner District 5

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

Period of time covered by report:  
 from 7/10/22 to 10/28/22

## 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 \$ \_\_\_\_\_ 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
10/5/22	Post + Great Supplies	\$ 200
9/29/22	Marketing - fliers, rackcards	\$ 2,833
	<b>TOTAL</b>	<b>\$ 3,033</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
N/A			
		<b>TOTAL</b>	

I certify that this is a full and true statement. Nicole Eckstrom 10/28/22  
 Signature Date

Printed Name Nicole Eckstrom Telephone 507-377-2776 Email (if available) \_\_\_\_\_

Address 72099 Wineglass Rd Albert Lea, MN 56007



Report

Office

Name

For Office Use Only: