

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation DARRELL SHANNON

Office sought or ballot question CITY COUNCIL District \_\_\_\_\_

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

Period of time covered by report:  
 from 8/16/2016 to 11/9/2016

## 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 \$ \_\_\_\_\_  
 IN-KIND + \$ \_\_\_\_\_  
 TOTAL AMOUNT RECEIVED = \$ \_\_\_\_\_

## 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
<u>8/16/2016</u>	<u>FILING FEE</u>	<u>2.00</u>
<u>9/24/2016</u>	<u>SANDWICH BONDS</u>	<u>75.49</u>
<u>10/1/2016</u>	<u>PUBLIC ADDRESS SPOT</u>	<u>65.00</u>
<u>10/12/2016</u>	<u>PRINT AD</u>	<u>230.40</u>
	<b>TOTAL</b>	<b><u>372.89</u></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. [Signature] 11/9/2016  
 Signature Date

Printed Name DARRELL SHANNON Telephone 218-692-1438 Email (if available) \_\_\_\_\_

Address 17014 SHANNON RD, CROSSCREEK, MA 01642

Report

Office

Name

For Office Use Only:

Office of the Minnesota Secretary of State

**CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING**

**Instructions**

Each county, municipal or school district candidate or treasurer of a committee formed to promote or defeat a ballot question shall certify to the filing officer that all reports required by *Minnesota Statutes 211A.02* have been submitted to the filing officer or that the candidate or committee has not received contributions or made disbursements exceeding \$750 in the calendar year. The certification shall be submitted to the filing officer not later than seven days after the general or special election. (*Minnesota Statutes 211A.05, subdivision 1*)

**Campaign Information**

Name of candidate or committee: DARRELL SHANNON  
Office sought by candidate (if applicable): CITY COUNCIL  
Identification of ballot question (if applicable): \_\_\_\_\_

**Certification**

Select the appropriate choice below, and sign.

I do swear (or affirm) that all campaign financial reports required by Minnesota Statutes 211A.02 have been submitted to the filing officer.

I do swear (or affirm) that all campaign contributions or disbursements did not exceed \$750 in the calendar year.

Signature of candidate or committee treasurer:   
Date: 11/9/2014