# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Campaign Fund of Grover Sayre for City Council

Office sought or ballot question North Oaks City Council Member District _____

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

Period of time covered by report:

from 12/4/2024 to 1/30/2025

## 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 $ None

IN-KIND + $ None

TOTAL AMOUNT RECEIVED = $ None

TOTAL CASH-ON-HAND $ 527.63

## 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 | None | 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* |
|---|---|---|---|
| | | | |
| | | | |
| | | **TOTAL** | |

I certify that this is a full and true statement. Grover C. Sayre, III 1/30/2025

Signature Date

Printed Name Grover C. Sayre, III Telephone (612) 202-5768 Email (if available) gsayre@tsglaw.com

Address 5 Willow Road, North Oaks, MN 55127

*For Office Use Only:* Name Office Report