CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation __________________________

Office sought or ballot question __________________________

Type of report: X Candidate report

Period of time covered by report: from [8-9-21] to [8-19-21]

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.

<table>
<thead>
<tr>
<th>Date</th>
<th>Purpose</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>8-9-21</td>
<td>Filing Fee</td>
<td>5.00</td>
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<tr>
<td>10-15-21</td>
<td>Yard Sign</td>
<td>1,023.87</td>
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TOTAL 1,028.87

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 __________________________

<table>
<thead>
<tr>
<th>Date</th>
<th>Purpose</th>
<th>Name and Address of Recipient</th>
<th>Expenditure or Contribution Amount</th>
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</thead>
<tbody>
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TOTAL

I certify that this is a full and true statement. __________________________

Signature: __________________________ Date: 10-19-21

Printed Name: __________________________ Telephone: 507-382-4022 Email (if available): __________________________

Address: 529 N 5th St. St. Peter, MN 56082