



# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation PETER KUHLMAN

Office sought or ballot question CITY COUNCIL MEMBER District W1

Type of report X Candidate report  
\_\_\_\_\_ Campaign committee report  
\_\_\_\_\_ Association or corporation report  
\_\_\_\_\_ Final report  
Period of time covered by report: from OCT 28 to NOV 7

## 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 + \$ 170.00  
TOTAL AMOUNT RECEIVED = \$ 170.00

## 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
10/31/2017	SHOPPER AD	170.00
	TOTAL	170.00

## 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. Peter Kuhlman 11/14/2017  
Signature Date

Printed Name PETER KUHLMAN Telephone 813-651-3116 Email (if available) \_\_\_\_\_

Address 808 SWIFT ST, ST. PETER

Report Second  
Office Council Ward 1  
Name Peter Kuhlman

For Office Use Only:



# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation PETER KUHLMAN

Office sought or ballot question CITY COUNCIL MEMBER District W 1

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

Period of time covered by report:

from Aug 15, 2017 to Oct 27, 2017

## 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 \$ 0 TOTAL CASH-ON-HAND \$ 0  
IN-KIND + \$ 0  
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
8/15/2017	FILING FEE	\$5.00
10/5/2017	YARD SIGN	\$240.00
	TOTAL	\$245.00

## CORPORATE PROJECT EXPENDITURES

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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.

Peter Kuhlman  
Signature

10/27/2017  
Date

Printed Name PETER KUHLMAN

Telephone 651-399-446

Email (if available) peterkuhlman@gmail.com

Address 508 SWIFT STREET, ST. PETER MN 56482

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