## CITY OF SAINT PAUL CAMPAIGN FINANCE REPORT FORM

Type of Organization: X Can	didate Committee	Political (Action) Committee	
	eek pre-primary eek pre-election	2 week pre-election January report Final report (closes committee accorde M.S. Ch. 211A.03 for requirements)	unt –
Period of time covered by report: F			
	SUMMARY STATEM	ENT TO DATE	
	Total for this Report	Total From Total To Previous Report Date	
MAJOR CONTRIBUTORS	0	+ 3655.62 = 3655.62	
ALL OTHER CONTRIBUTIONS RECEI	VED 0	+ 165.00 = 165.00	
EXPENDITURES	4.95	+ 3721.95 = 3726.90	
X <del></del>		NTRIBUTIONS FOR THIS PERIOD	
aggregate. Itemization must provide date, all expenditures must also be provided. It	name, address, employer or	l or committee that are equal or greater than \$ coccupation if self-employed, and amount. An , purpose, and amount.	
	name, address, employer or emization must include date	occupation if self-employed, and amount. An	
aggregate. Itemization must provide date, all expenditures must also be provided. It Contributions under \$50	name, address, employer or emization must include date	occupation if self-employed, and amount. An	
aggregate. Itemization must provide date, all expenditures must also be provided. It Contributions under \$50  Contributions equal to/greater tha	name, address, employer or emization must include date  0  n \$50	occupation if self-employed, and amount. An , purpose, and amount.	
aggregate. Itemization must provide date, all expenditures must also be provided. It Contributions under \$50 Contributions equal to/greater tha Expenditures  Current Account Balance  List the name and address of all de	name, address, employer or emization must include date  0  n \$50  4.95  \$ 103.62	occupation if self-employed, and amount. An , purpose, and amount.	
aggregate. Itemization must provide date, all expenditures must also be provided. It Contributions under \$50 Contributions equal to/greater tha Expenditures  Current Account Balance	name, address, employer or emization must include date  0  1  1  1  1  1  1  1  1  1  1  1  1	occupation if self-employed, and amount. An , purpose, and amount.	itemized

## ITEMIZATION OF EXPENDITURES AND CONTRIBUTIONS

The Lechowich Campaign Committee, David W. Lee, Treasurer

Expenditures
Date Na
9/30/13 TO

Name TCF Bank

<u>Purpose</u> Monthly bank fee

Amount 4.95

David W. Lee Treasurer

10/22/13