## CAMPAIGN FINANCIAL REPORT

Chapter 211A Report Form

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

		(7.17)	0,			
Name of car	ndidate, comm	ittee, or co	rporation_Friends for	Ken losso		
Name of candidate, committee, or corporation_Friends for Office sought or ballot question County Commissioner				District		
Type of Orga	anization:x	Candida	Post-general  X January report		nmittee/Corp rting period: 1/31/21	
he instruction year. This item CASH N-KIND	nization must in	oclude name.  0  0	, address, employer of o	BUTIONS  The covered by this report. See not ions from a single source that eccupation if self-employed, amount if self-employed, amount if self-employed, amount in the self-employed.		
			EXPEND	iod of time covered by report.	Attach additio	nai silects ii
nclude every	disbursement m	ade for a po	litical purpose during per purpose, and amount for Purpose	ITURES iod of time covered by report. A each expenditure.		Amount
necessary. Ite	emization must in	nclude date,	Purpose			
Date						
					TOTAL	0
					TOTAL	
separate report	ust list any media project. In the second se	project or corp Attach additio		T EXPENDITURES which contribution(s) or expenditure ddress of Recipient	TOTAL	Expenditure or Contribution Ami
					TOTAL	
certify that t	CCOUNT BALA		AV	Email ken.iosso@comca		/31/2022 Date
rinted Name	Ken losso			_ Enfall_ Ronillocool@confloc		
ddress_1886	Palace Ave,	Saint Paul	, MN 55105	Phone_ 651-	253-1252	