DECEIVE	
10-29-24	U

	CAMPAIGN	FINANCIAL REPORT	
		on in this report is public information)	
Name of candidate	, committee or corporation	KIM P SES	-
Office sought or ba	llot question CiTY_Cc	District	10-1
Type of report 	Candidate report Campaign commi Association or con Final report		covered by report: //2/to_10/23/24
money or in-kind) ra contributions from a	contributions received during the pe ather than contributor. See note on co single source that exceeded \$100 dur	<b>IBUTIONS RECEIVED</b> riod of time covered by this report. Contribution limits on the back of this form. Use ing the calendar year. This itemization must in	a separate sheet to itemiz
or occupation if self- CASH	employed, amount and date for these s	TOTAL CASH-ON-HAND	s O
N-KIND	+ 12		
	nt, date and purpose for all disburse sheets if necessary.	ements made during the period of time co	vered by report.
Date		Purpose	Amount
		·	
		TOTAL	0
		TOTAL	
more than \$200. S	t list any media project or corpora	E PROJECT EXPENDITURES ate message project for which contribution project. Attach additional sheets if necess	on(s) or expenditure(s) † ary.
Date	Purpose	Name and Address of Recipient	Expenditure or Contribution Amount

Name For Office Use Only:

Report

Office

Date Date I certify that this is a full and true statement. Signature Printed Name AmpiBEISE Telephone 657761955 Email (if available) KBEISE City AUGO Address 968 AURANA CIRCLE REDWING, MN 55066

TOTAL