

RECEIVED
NOV 23 2016
CITY OF RICHFIELD

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Garcia for Richfield City Council
Office sought or ballot question Richfield City Council District Ward 2

Type of report _____ Candidate report
_____ Campaign committee report
X _____ Association or corporation report
_____ Final report

Period of time covered by report:
from 10/26 to 11/22/16

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
8-11-16	Zalesky Printing	1239.54
8-14-16	Campaign Fundraiser	110.00
8-14-16	Postage	65.10 53.00
8-3-16	Printing	97.46
8-18-16	Office Supplies and signs	
	TOTAL	55.00

11-8-16 Election Night Party 100.00

CORPORATE PROJECT EXPENDITURES Total: \$1655.00

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.

Jeff Wright
Signature

11-22-16
Date

Printed Name Jeff Wright

Telephone 6126441312

Email (if available) jdwright1962@yahoo.com

Address 136 E 70th St Richfield, MN 55423

Report

Office

Name

For Office Use Only: