

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation DON HEINONEN

Office sought or ballot question Beltrami County Commissioner District 2

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

Period of time covered by report:
 from 5/31/2022 to 7/25/2022

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
<u>5/31/2022</u>	<u>Filing Fee</u>	<u>50-</u>
<u>7/30/2022</u>	<u>YARD SIGNS</u>	<u>160 75</u>
	TOTAL	<u>210 75</u>

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. 

Signature

Date

Printed Name DON HEINONEN Telephone 218 556 9689 Email (if available) Donheinonen@yahoo.com
 Address 415 Gould Ave NE Bemidji MN 56601

Report

Office

Name

For Office Use Only: