

RECEIVED

CAMPAIGN FINANCIAL REPORT

OCT 25 2024

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

Name of candidate, committee or corporation Aileen White (AileenWhiteFor281)
Office sought or ballot question District Robbinsdale Area Schools ISD281

Type of report X Candidate report
Period of time covered by report: from 10/6/2024 to 10/24/2024

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 \$ 0.00 TOTAL CASH-ON-HAND \$
IN-KIND + \$ 0.00
TOTAL AMOUNT RECEIVED = \$ 0.00

DISBURSEMENTS

Include the amount, date and purpose for all disbursements made during the period of time covered by report. Attach additional sheets if necessary.

Table with 3 columns: Date, Purpose, Amount. Rows include 10/6/2024 Anchor Paper - Printing (68.07), 10/15/2024 Target - Ink for printing (55.34), 10/15/2024 Anchor Paper - Printing (68.07), and a TOTAL row of 191.48.

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.

Table with 4 columns: Date, Purpose, Name and Address of Recipient, Expenditure or Contribution Amount. Includes a TOTAL row.

I certify that this is a full and true statement. Aileen White
Signature Date aileenwhitefor281@gmail.com
Printed Name Aileen White Telephone 612-310-4569 Email (if available)
Address 11550 42nd Place N., Plymouth MN 55441

Report

Office

Name

For Office Use Only: