

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Rachael Mikkelsen  
 Office sought or ballot question School Board District 13D191

Type of report \_\_\_\_\_ Candidate report  
 \_\_\_\_\_ Campaign committee report  
 \_\_\_\_\_ Association or corporation report  
X Final report

Period of time covered by report:  
 from 8/13/24 to 11/5/24

## 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 \$ \_\_\_\_\_ TOTAL CASH-ON-HAND \$ \_\_\_\_\_  
 IN-KIND + \$ \_\_\_\_\_  
 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
8/13/24	Campaign signs	1,088.95
8/13/24	Parade application	258.75
9/1/24	Candy for parade	366.31
8/16 to 10/21/24	Facebook ads	78.95
<b>TOTAL</b>		<b>1,787.96</b>

## 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
<b>TOTAL</b>			

I certify that this is a full and true statement. Rachael Mikkelsen 11/11/24  
Signature Date

Printed Name Rachael Mikkelsen Telephone 612-816-0730 Email (if available) rachael.mikkelsen191@gmail.com

Address 13841 Colorado Ave S, Savage, MN 55378

Report  
Office  
Name  
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