

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Andrew Thelander for 834

Office sought or ballot question School Board District 834

Type of report X Candidate report Period of time covered by report:  
       Campaign committee report  
       Association or corporation report from 10/29/2022 to 11/23/2022  
X Final report

## 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 \$ \$0.00  
 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.

| Date       | Purpose                                                          | Amount   |
|------------|------------------------------------------------------------------|----------|
| 11/23/2022 | 501(c)(3) Charitable Contribution Check - The Partnership Plan   | \$80.17  |
| 11/23/2022 | 501(c)(3) Charitable Contribution Check - Valley Friendship Club | \$75.00  |
| 11/23/2022 | 501(c)(3) Charitable Contribution Check - Valley Outreach        | \$75.00  |
| 11/23/2022 | 501(c)(3) Charitable Contribution Check - Community Thread       | \$75.00  |
| TOTAL      |                                                                  | \$305.17 |

## 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. Tom Liester, Treasurer 11/25/22  
 Signature Date

Printed Name Tom Liester, Treasurer Telephone        Email (if available) andrewfor834@gmail.com

Address       

Received 11/28/2022  
 Joan Hurley

Report

Office

Name

For Office Use Only: