

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Gabriel Davis

Office sought or ballot question \_\_\_\_\_ District \_\_\_\_\_

Type of report  Candidate report Period of time covered by report:  
 Campaign committee report  
 Association or corporation report from \_\_\_\_\_ to \_\_\_\_\_  
 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 \$ \_\_\_\_\_ TOTAL CASH-ON-HAND \$ \_\_\_\_\_  
 IN-KIND + \$ \_\_\_\_\_  
 TOTAL AMOUNT RECEIVED = \$ \_\_\_\_\_

## 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
10/25/2024	campaign material	151.94
	TOTAL	151.94

## 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. Gabriel Davis 10/30/24  
Signature Date

Printed Name Gabriel Davis Telephone 612 965 1657 mail (if available) \_\_\_\_\_

Address 6689 Packard Ave NE Elk River Minn 55330

Report Office Name For Office Use Only: