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BY:

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation LIZ WORKMAN

Office sought or ballot question DAKOTA COUNTY COMM District #5

Type of report

- Candidate report
- Campaign committee report
- Association or corporation report
- Final report

Period of time covered by report:
from 10/11/24 to 11/30/24

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 \$ 4379.11
 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
<u>10/24</u>	<u>CANVA (LIT)</u>	<u>250.00</u>
	TOTAL	<u>250.00</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
<i>(Large diagonal scribble)</i>			
		TOTAL	

I certify that this is a full and true statement. Liz Workman Signature Date 11/30/24

Printed Name LIZ WORKMAN Telephone _____ Email (if available) _____
 Address 2332 E 121 ST ST. BURNSVILLE, 55337

Report Office Name For Office Use Only: