

Name Troy Kenneth Scheffler Office Commissioner District 4 Report 3rd

County Commissioner

Name Jroy Kenneth Sche

For Office Use Only:

## CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Troy Kenneth Scheffler  
Office sought or ballot question County Commissioner District 4  
Type of report  Candidate report  Campaign committee report  Association or corporation report  
Period of time covered by report: from 8/1-22 to 10/1-22

## CONTRIBUTIONS RECEIVED

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 TOTAL CASH-ON-HAND \$ 0  
IN-KIND + \$ 0  
TOTAL AMOUNT RECEIVED = \$ 0

## DISBURSEMENTS

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
	Jan	

## 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

I certify that this is a full and true statement.

**Signature**

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Printed Name

Troy Schaffer  
359 Shand

Signature Tracy Schell Date 09-17-19  
Telephone 7632257702 Email (if available) TracySchell@gmail.com

Printed Name

Address 

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