

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Johnna Johnson

Office sought or ballot question Crow Wing 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 10/23/24 to 12/30/24

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 contributions from a single source that exceeded \$100 during the calendar year. This itemization must include name, address, employ or occupation if self-employed, amount and date for these contributions.

CASH \$ _____ TOTAL CASH-ON-HAND \$ 95-
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>12/15/24</u>	<u>Advertising</u>	<u>380-</u>
TOTAL		<u>95-</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
TOTAL			

I certify that this is a full and true statement.

Printed Name Johnna Johnson Signature _____ Date _____
Telephone 218-838-3710 Email (if available) _____
Address PO BOX 62 CRUSBY MN 56441

