

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation BARBARA GOODBOE-BISSCHOFF

Office sought or ballot question MAYOR District 16

Type of report  Candidate report  
 Campaign committee report  
 Association or corporation report  
 Final report

Period of time covered by report:

from 8-30-18 to 10-26-18

## 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 \$ \_\_\_\_\_  
 IN-KIND CHECK 10/4/18 \$ 800.00  
 TOTAL AMOUNT RECEIVED = \$ 800.00

TOTAL CASH-ON-HAND \$ \_\_\_\_\_  
 single source -  
 PADDY JONES  
 4135 Constance Blvd W.E. Nampa  
 55304

## 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
10/22/18	STANDS	166.60
10/15/18	PAPER PEPS INK jets taps sliders envelopes	160.00
10/01/18	POSTAGE	270.00
<b>TOTAL</b>		<b>496.60</b>

## 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
<b>TOTAL</b>			

I certify that this is a full and true statement.

Barbara Goodboe-Bisschhoff  
 Signature Date 10-22-18

Printed Name BARBARA GOODBOE-BISSCHOFF Telephone (763) 844-0777 Email (if available) \_\_\_\_\_

Address 8309 Mowbray St. W.E. SLP MN 55432

Report

Office

Name

For Office Use Only: