

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Susan G Anderson

Office sought or ballot question County Recorder District _____

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

Period of time covered by report:
 from _____ to 9/19/2018

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	\$	<u>0</u>		TOTAL CASH-ON-HAND	\$	<u>0</u>
IN-KIND	+	<u>0</u>				
TOTAL AMOUNT RECEIVED	=	<u>0</u>				

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
TOTAL		<u>0</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			<u>0</u>

I certify that this is a full and true statement. Susan Anderson 9/19/2018

Signature Date

Printed Name Susan G Anderson Telephone 612-716-6684 Email (if available) Sararobi05@cpaho.com

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Report

Office

Name

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