CAMPAIGN FINANCIAL REPORT

RECEIVED
NOV - 4 2014
CITY OF SCANDIA

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

Name of candidate, committee or corporation JIM SCHNEIDER

Office sought or ballot question CITY COUNCIL District

Type of report
- X Candidate report
- ___ Campaign committee report
- ___ Association or corporation report
- ___ Final report

Period of time covered by report:

from 8-1-14 to 11-3-14

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 $ ___

IN-KIND + $ ___

TOTAL AMOUNT RECEIVED = $ 0

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	0

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	0

I certify that this is a full and true statement. James R Schneider
Signature Date

Printed Name JAMES R SCHNEIDER Telephone 651-433-3692 Email (if available) ___

Address 21020 OZARK AVE SCANDIA MN 55073

For Office Use Only: Name Office Report