

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation James Bulman

Office sought or ballot question Mayor - City of Montevideo District \_\_\_\_\_

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

Period of time covered by report:  
 from 5/27/2020 to 8/4/2020

## 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

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
6/4/2020	4 imprint - Pens	155.92
7/17/2020	Outlaw Graphix - Tshirts	362.00
8/4/2020	Mind your business - flyers	129.32
8/4/2020	Outlaw Graphix - Tshirts	129.00
<b>TOTAL</b>		<b>776.24</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. [Signature] 8/19/2020  
 Signature Date

Printed Name James Bulman Telephone 320-221-2584 Email (if available) jamesbulman80@gmail.com  
 Address 306 S. 8th ST Montevideo, MN 56265

Report  
Office  
Name  
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