Received 1/22/2024
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# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation BALOGA FOR COUNCIL COMMITTEE

Office sought or ballot question CITY COUNCIL District III

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

Period of time covered by report:

from 1/1/23 to 12/31/23

## 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 $ .03

IN-KIND + $ ____

TOTAL AMOUNT RECEIVED = $ .03

TOTAL CASH-ON-HAND $ Ø

## 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 |
|---|---|---|
| 8/15/2023 | POLITICAL CONTRIBUTION | 600.00 |
| 9/26/2023 | POLITICAL CONTRIBUTION | 150.00 |
| 9/26/2023 | CHARITABLE DONATION | 13.80 |
| | | |
| | TOTAL | 763.80 |

## 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 | Ø |

I certify that this is a full and true statement. Jack Baloga (Signature) 1/22/24 (Date)

Printed Name JACK BALOGA Telephone 952-944-5194 Email (if available) JACK@BALOGAENTERPRISES.COM

Address 10498 E TOPAZ CIRCLE, SCOTTSDALE AZ 85258

Report

Office

Name

For Office Use Only: