

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Lila Spencer

Office sought or ballot question Livonia township Supervisor B District _____

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

Period of time covered by report: from 1-5-26 to 3-10-26

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
	<u>-0-</u>	
	TOTAL	

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

I certify that this is a full and true statement. Lila Spencer 3-11-26
 Signature Date

Printed Name Lila Spencer Telephone 763 772 2245 Email (if available) hdplawme2@gmail.com

Address 33385 Hwy 169 Elk River mn 55330

Report
Office
Name
For Office Use Only: