# MUNICIPAL CAMPAIGN FINANCIAL DISCLOSURE

Michael Grant Jorgensen
Full name of candidate

City Councilman
Name of office

1. Total contributions (Form "A" total) $ Ø
2. Total campaign expenses (Form "B" total) $ Ø
3. Balance at the end of the reporting period $ Ø

12/04/25
Date

Signature of Candidate

| Date Received | Name of Donor | Amount of Contribution |
|---|---|---|
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| xxxxxxxxxxxxxx | Total Campaign Contributions | $ 0 |

**ITEMIZED CONTRIBUTION REPORT (FORM "A")**

| Date of Expenditure | Person/Organization to whom Expenditure was made | Amount of Expenditure |
|---|---|---|
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| xxxxxxxxxxxxx | Total Campaign Expenditures | $ |

**ITEMIZED EXPENDITURE REPORT (FORM "B")**