

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Joe Gould for Beltrami County  
 Office sought or ballot question Beltrami County Dist 2 District 2

Type of report:  Candidate report Period of time covered by report:  
 Campaign committee report from 5-21-24 to 5-25-24  
 Association or corporation report  
 Final report

## 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 \$ 1150  
 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>5-21-24</u>	<u>Candidate Filing Fee</u>	<u>\$50</u>
	TOTAL	<u>\$50</u>

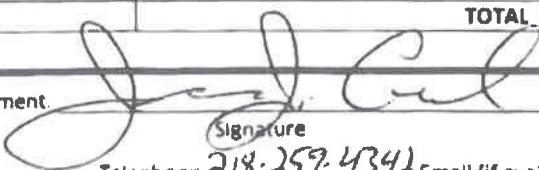
## CORPORATE PROJECT EXPENDITURES

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	

I certify that this is a full and true statement.

  
 Signature \_\_\_\_\_ Date 5-25-24  
 Printed Name Joe Gould Telephone 218-259-4342 Email (if available) ✓  
Benici, MN 56601/joegould05@gmail.com

Report

Office

For Office Use Only: Name

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Joe Gould for Beltrami County  
 Office sought or ballot question County Commissioner District 2

Type of report:  Candidate report Period of time covered by report:  
 Campaign committee report from 5-25-24 to 8-3-24  
 Association or corporation report  
 Final report

## 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 \$ 5755 TOTAL CASH-ON-HAND \$ 2898  
 IN-KIND + \$ \_\_\_\_\_  
 TOTAL AMOUNT RECEIVED = \$ 5755

## 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
7-17	Mailing	\$1918
7-8	Website	\$1270
6-5	Thank you cards & stamps	\$55
5-30	Mailing supplies / copies - Blice Max	\$760
6-11	Advertisements	\$46
<b>TOTAL</b>		<b>\$44,055</b>

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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. 8-3-24  
Signature Date  
 Printed Name Joe Gould Telephone 218-259-4342 Email (if available) joe.gould05@gmail.com  
 Bemidji, MN 56601

Report Office Name For Office Use Only:

**Joe Gould 2024 Donations Over \$100**

<b><u>Date</u></b>	<b><u>Name</u></b>	<b><u>Employer/Occupation</u></b>	<b><u>Amount</u></b>
5-26-2024	Joe Gould	ISD 115	\$600.00
5-26-2024	Gwenia Fiskevold Gould	Bemidji State Alumni	\$600.00
5-27-2024	IUOE Local 49	IUOE Local 49	\$600.00
5-31-2024	Mike Kennedy	Public Relations	\$200.00
6-14-2024	Teamsters 32 Drive	Teamsters 32 Drive	\$300.00

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Name of candidate, committee or corporation Joe Gould for Beltrami County  
 Office sought or ballot question County Commissioner District 2

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

Period of time covered by report: from 8-4-24 to 10-26-24

## CONTRIBUTIONS RECEIVED

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CASH \$ 2695 TOTAL CASH-ON-HAND \$ 2654.03  
 IN-KIND + \$ \_\_\_\_\_  
 TOTAL AMOUNT RECEIVED = \$ 2695

## 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
9-24	Advertising	824.49
10-15	Mailings	286.16
9-11	Signs	400.38
8-29	Stickers	86.27
8-27	Website	155.92
<b>TOTAL</b>		<b>\$ 4,327.32</b>

## CORPORATE PROJECT EXPENDITURES

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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. Joe Gould 10-26-24  
 Signature Date

Printed Name Joe Gould Telephone 218-259-4842 Email (if available) jregould05@gmail.com  
Belvidere, MN 56601

Report Office Name For Office Use Only:

**Joe Gould 2024 Donations Over \$100**

<u>Date</u>	<u>Name</u>	<u>Employer/Occupation</u>	<u>Amount</u>
5-26-2024	Joe Gould	ISD 115	\$600.00
5-26-2024	Gwenia Fiskevold Gould	Bemidji State Alumni	\$600.00
5-27-2024	IUOE Local 49	IUOE Local 49	\$600.00
5-31-2024	Mike Kennedy	Public Relations	\$200.00
6-14-2024	Teamsters 32 Drive	Teamsters 32 Drive	\$300.00

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Name of candidate, committee or corporation Joe Gould for Beltrami County

Office sought or ballot question County Commissioner District 2

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

Period of time covered by report:  
 from 12-6-24 to 1-31-25

## CONTRIBUTIONS RECEIVED

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CASH	\$ _____	TOTAL CASH-ON-HAND	\$ <u>1761.50</u>
IN-KIND	+ \$ _____		
TOTAL AMOUNT RECEIVED	= \$ <u>0</u>		

## 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
<b>TOTAL</b>		<u>0</u>

## 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.

*Joe Gould*  
 Signature

1-31-25  
 Date

Printed Name Joe Gould

Telephone 218-259-4342 Email (if available) joegould05@gmail.com  
Bemidji, MN 56601

Report Office Name For Office Use Only:

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Joe Gould for Beltrami County

Office sought or ballot question County Commissioner District 2

Type of report:  Candidate report      Period of time covered by report  
 Campaign committee report  
 Association or corporation report  
 Final report

from 1-31-25 to 1-31-26

## CONTRIBUTIONS RECEIVED

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CASH \$ \_\_\_\_\_ TOTAL CASH-ON-HAND \$ 1761.50  
 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
<b>TOTAL</b>		<u>0</u>

## CORPORATE PROJECT EXPENDITURES

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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. Joe Gould 1-31-26  
 Signature Date

Printed Name Joe Gould Telephone 218-259-4342 Email (if available) jgould05@gmail.com  
 Bemidji, MN 56601

Report Office Name For Office Use Only: