



Municipal Form

Please print or type all information, except signatures.

Low

2024-12-18 14:24:23

(MM/DD/YYYY)

~~CONFIDENTIAL~~

☒ 20th day of January (Year-End report)

2. I certify that I have not received any contributions, made any expenditures, or incurred any obligations during this reporting period, and do not have a campaign fund in existence.

OFFICE SOUGHT

Bond of Health

[illegible]