CAMPAIGN FINANCIAL REPORT

(All of the	information i	n this	report	is public	information)
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	Type of report	allot question <u>School</u> R	ate report		of time covered by report:			
	- -	X Campa	ign committee report		15/13 to 10/23/13			
		C	ONTRIBUTIONS					
	sheet to itemize all	= -	source that exceed \$100 on if self-employed, amoun	ion limits on the back	of this form. Use a separ			
			YPENDITURES					
	Include the amount,	date, and purpose for all e	EXPENDITURES expenditures made during :	the period of time ear	and the Mate			
	Attach additional sh	eets if necessary,	The state of the s	nie belied of title co.	vered by this report,			
ı	Date		Purpose		Amount			
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	10-16-13	Virtue Max -F	2000/8		566.00			
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			TE PROJECT EXPEN		Marie			
	Corporations must lis	t any media project or cor mit a separate report for e	porate message project fo	or which contribution	s) or expenditure/e/ total			
		Transfer of C	ach project. Attach addition	onal sheets if necessa	0CT 2.3 Z015			
•	Project title or descrip	tion			001 8-5 2017			
					RAMSEN COLNI			
Г	Date	Purpose	N	-1417	LIII (III OSS			
				nd Address ecipient	Expenditure or Contribution			
-					Amount			
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_				Tota				
	certify that this is a fu	ll and true statement.						
			Signature		Date			
,	Printed Name		Telephone	Emall (if availat	ole)			
					·			

Report

Name of candidate, committee, or corporation MVEDA Office sought or ballot question Campaign committee report Period of time covered by the report Contributions received during the period of time covered by type (money or in-kind) rather than contributor. See note on contribution limits on the back of this form. Use sheet to itemize all contributions from a single source that exceed \$100 during the calendar year. This itemize include name, address, employer or occupation if self-employed, amount, and date for these contributions. CASH TOTAL CASH ON HAND \$ TOTAL AMOUNT RECEIVED Suppose the calendar year of the self-employed amount, and date for these contributions.	y report:
Candidate report Campaign committee report Association or corporation report Final report CONTRIBUTIONS Give the total for all contributions received during the period of time covered by this report. Contributions show by type (money or in-kind) rather than contributor. See note on contribution limits on the back of this form. Use sheet to itemize all contributions from a single source that exceed \$100 during the calendar year. This itemizate include name, address, employer or occupation if self-employed, amount, and date for these contributions. CASH TOTAL CASH ON HAND **TOTAL CASH ON HAND \$	y report:
Candidate report Campaign committee report Association or corporation report Final report CONTRIBUTIONS Give the total for all contributions received during the period of time covered by this report. Contributions show by type (money or in-kind) rather than contributor. See note on contribution limits on the back of this form. Use sheet to itemize all contributions from a single source that exceed \$100 during the calendar year. This itemizate include name, address, employer or occupation if self-employed, amount, and date for these contributions. CASH TOTAL CASH ON HAND **TOTAL CASH ON HAND \$	y report:
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sheet to itemize all contributions from a single source that exceed \$100 during the calendar year. This itemiza include name, address, employer or occupation if self-employed, amount, and date for these contributions. CASH TOTAL CASH ON HAND * TOTAL CASH ON HAND *	
CASH \$ TOTAL CASH ON HAND \$	
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TOTAL AMOUNT RECEIVED \$ SAL Page 1	——————————————————————————————————————
EXPENDITURES	
Include the amount, date, and purpose for all expenditures made during the period of time covered by this report additional sheets if necessary.	ort.
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Date Purpose Amou	ınt
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TOTAL SULV	5
Caroal total 41729	
	83:
CORPORATE PROJECT EXPENDITURES	
Corporations must list any medla project or corporate message project for which contribution(s) or expenditure more than \$200. Submit a separate report for each project. Attach additional sheets if necessary.	(s) total
Project title or description	
Date Purpose Name and Address	
Purpose Name and Address Expenditur of Recipient Contributi Amount	on
Total	
certify that this is a full and true statement.	12
Signature	0-1
ddress 900 Long lake Rd. State #110 New Brighton, MN SK)	

For Office Use Only:

Name