

**CITY OF SAINT PAUL  
CAMPAIGN FINANCE REPORT FORM**  
(All data on this form is public information)

Committee Name Soyapa Miranda

Type of organization:  Candidate Committee  Political Committee  Political Fund

Office sought/Purpose of committee City Council Ward 5

Type of report:  Initial report  Final report (closes committee account - see MS Ch 211A.03 for requirements)  
 8 week pre-election  One-time report from political committee registered with Campaign Finance Board  
 2 week pre-election  Registration # \_\_\_\_\_  
 January report  
 This report serves as both the initial and final report.

Reporting period: From 3/16/2019 to 3/21/2019  
 (Day following end date of last report) (5 days prior to due date OR December 31 if January report)

**Summary Statement to Date**  
(In column B, enter totals from column C from previous report.)

	A. Totals for this report	B. Cumulative Totals to Date from previous report	C. Cumulative Totals to Date
1. Total contributions under \$50	\$ <u>0</u>	+ \$ <u>0</u>	= \$ <u>0</u>
2. Total contributions equal to/greater than \$50	\$ <u>100.00</u>	+ \$ <u>0</u>	= \$ <u>100.00</u>
3. Expenditures	\$ <u>0</u>	+ \$ <u>0</u>	= \$ <u>0</u>

Account Balance \$ 100.00  
 (as of report end date)  
 (Column C: 1+2-3 = balance)

**Itemization of Contributions**

Itemize all contributions made by an individual or committee that are equal to or greater than \$50 in the aggregate. Itemization must include: date, name, address, employer or occupation if self-employed, and amount. **Attach separate sheet or Excel spreadsheet.**

**Itemization of Expenditures**

Itemize all expenditures. Itemization must include: date, purpose, and amount. **Attach separate sheet or Excel spreadsheet.**

Depository(ies)/Bank Location of Committee Funds Associated Bank

Signature of candidate, secretary, or treasurer Christine Nelson

Printed Name Christine Nelson Email Christine.nelson17@gmail.com

Address 3858 Polk St. NE Columbia Heights MN 55421 Phone 651-327-0544



**Donations**

First Name	Last Name	Address	City	State	Zipcode	Employed/Self/Occupation	Amount	Date	
Roy	Magnuson	727 Wheelock Pkwy W	St. Paul	MN	55117	Former SPPS Teacher and Coach	\$100.00	05/16/2019	
<b>Total</b>							<b>\$100.00</b>		

**In Kind Contributions**

First Name	Last Name	Address	City	State	Zipcode	Employed/Self/Occupation	Amount	Date	
<b>Total</b>							<b>\$0.00</b>		

**Expenses**

Expenditure	Description/Reason	Amount	Date
<b>Total</b>		<b>\$0.00</b>	