

CITY OF SAINT PAUL CAMPAIGN FINANCE REPORT FORM

(All data on this form is public information)

Committee Name	Robins	Kaplaı	n Minnesota PA	C							
Type of organization: Candidate Committee				-	P	olitical Com	mittee	_X	Politica	al Fund	
Office sought/Purp	ose of co	mmittee	For the purpos	se of i	nfluenc	ing the no	minatio	n or elec	tion of a	candidate.	
Type of report: Initial report					Final report (closes committee account - see MS Ch 211A.03 for requirements)						
		2 week pre-primary 8 week pre-election				One-time report from political committee registered with Campaign Finance Board Registration #This report serves as both the initial and final report.					
		2 week pre-election $egin{array}{cccccccccccccccccccccccccccccccccccc$									
Reporting period:		om = 10/19/2018 (Day following end date of last re				•	1/24/2019 (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		Tota	iulative ils to Date n previous re	C. Cumulative Totals to Date		te		
1. Total contributions under \$50			\$	_ +	\$		_ =	\$			
2. Total contribution greater than \$5	•	to/	\$	- +	\$		_ =	\$		_	
3. Expenditures		:	\$. +	\$		_ =	\$		<u> </u>	
					Account Balance \$ 657.04 (as of report end date) (Column C: 1+2-3 = balance)						
Itemization of Co Itemize all contributi Include: date, name,	ions made l	by an Ind				l to or greate	er than \$	50 in the a	ggregate.		
Itemization of Ex	•		ist include: date, pur	rpose,	and amo	unt. Attach s	eparate	sheet or E	xcel sprea	dsheet.	
Depository(les)/Ba Location of Commi	nk ttee Fund:	s <u>US I</u>					MN 5	5402			
Signature of candid secretary, or treasu			Januar Lu	pul	tous	n					
Printed Name Kat	hleen Flyr	n Peter	rson /		_ Ema	il KFlynnF	eterson	@Robins	Kaplan.c	om	
800 LaSaile Avenue, Suite 2800, Minneapolis, MN 5540 Address						2 Phone (612) 349-8219					