

CITY OF SAINT PAUL CAMPAIGN FINANCE REPORT FORM

(All data on this form is public information)

Committee Name Kingfor 7			
Type of organization: Candidate Committee Political Fund			
Office sought/Purpose of committee			
Type of report: Initial report 8 week pre-election 2 week pre-election January report One-time report from political committee registered with Campaign Finance Board Registration # This report serves as both the initial and final report.			
Reporting period: From 10-23-19 to 12-4-19 (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 A. Totals for Totals to Date from previous report.			
1. Total contributions under \$50 \$ + \$ = \$			
2. Total contributions equal to/ sittle $+$ 376 $+$ 376 $+$ $+$ 476 $+$ 776			
3. Expenditures $$100-00 + $370.17 = 470.17			
Account Balance \$(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 Sunvise Bank			
Signature of candidate, secretary, or treasurer			
Printed Name Kartumu King Email info@ Kingfor 7. com			
Address 1281 Margaret St. Phone 651-214-9217			

Date: 12000.108 585	Banker Making Change: Roud Comez Account Type: Common by Checking	
Authorized Signer Requesting Change: Manager Authorizing Change	Cartumu S King	
	Portfolio - Relationship	respondent er spiller er spiller Performent er spiller
Port Name (B)	Port Email	Dad Dhara Nambar
Port TIN (B)	Port Date of Birth	Port ID Type
Account Level Port Attach (Confirmation of ownership)	Account Level - Relationship Account Level Signer or Owner (B)	
	Addenda	
Beneficiary Addenda ^(B)	Transfer Addenda (Confirmation of related account required)	
Multiple Mailing Addenda	Service Charge Addenda (non-coin/curren	cy)
	Codes	
Sweep	Service Chg Waiver/Reason (A)	CD Maturity Date (A)
Withholding (A)	Paper Stmt Fee Waiver/Reason (A)	CD Issue Date
Interest Overrides	Image Fee Waiver/Reason	CD Renewal Code
Current or Previous YTD (A)		CD Term
Overdrafts Options (A)		SDB Discount Code (A)
Acct Analysis Overrides		SDB Payment Due Date
Handling Code (A)		SDB Status Code
In person requests require the custome Account # New Address Banker Signature Authorized Signer Signature Customer Authentication method *requires 2	Address Changes ers signature, requests received via phone requests 1)	uire authentication
eduncy) professor and selection of the s	Summary of Changes	and the second second by the second s
	Account Closure	
Banker Signature		
Authorized Signer Signature Customer Authentication method *requires 2	1	8
How were the funds disbursed? Act a	1 20.00 Balance	
(A) Manager Approval Required	(B) Secondary Document	
- Relationship (customer has profitable relationship with bank) - Retention (exception needed to retain customer)	6 - Program Relationship (ba 7 - Charitable Donation (for f	ank / community partnership) future use)
3 - Referral Source (customer has referred business to bank) 4 - 3 Month Expiration	8 - Direct Deposit	

Account the Maintenance Support Form

Donation: 11-4-19 Timothy Lippert \$100 00 check

Kathryn Lippert

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Saint Paul, min sslor

Kartumu King 1281 Margaret St Whemplayed

Saint Paul, min SSlore

Total Contributions \$100.00

Expenditures., Total \$100.00

10/23/19 Printer paper \$28.98

10/27/19 ink cartridges \$33.99

10/27/19 hole puncher \$20.00

10/27/19 transportation \$17.03

LDan repayment. Total \$ 150.00