CAMPAIGN FINANCIAL REPORT

Chapter 211A Report Form

(All of the information in this report is public information)

| Office sought or ballot question | | | District | |
|------------------------------------|--|--|--|-------------------------------|
| Type of Or | ganization: Candida | ate Committee | Political (Action) Committee/Co | orporation |
| Type of report: Initial report Po | | Post-general | Reporting period: | |
| | Pre-primary | January report | | to |
| | Pre-general | Final report (closes co see M.S. Ch. 211A.03 f | | |
| | | | NS ered by this report. See note on contr om a single source that exceed \$100 | |
| year. This it | emization must include name | e, address, employer or occupat | ion if self-employed, amount, and d | ate. |
| CASH | \$ | | | |
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| IN-KIND | ېې | | | |
| | = | | | |
| TOTAL RECE | = = \$ | EXPENDITURE | S | |
| Include ever | ry disbursement made for a po | - | time covered by report. Attach additi | 1 |
| Include ever | ry disbursement made for a po | olitical purpose during period of | time covered by report. Attach additi | ional sheets if <u>Amount</u> |
| necessary. | ry disbursement made for a po | olitical purpose during period of , purpose, and amount for each | time covered by report. Attach additi | 1 |
| Include even necessary. | ry disbursement made for a po | olitical purpose during period of , purpose, and amount for each | time covered by report. Attach additi | 1 |
| Include even necessary. Date | ry disbursement made for a po Itemization must include date | plitical purpose during period of , purpose, and amount for each Purpose CORPORATE PROJECT EX prporate message project for which ional sheets if necessary. | time covered by report. Attach additi expenditure. TOTAL | Amount |
| Include even necessary. Date | ry disbursement made for a po Itemization must include date | plitical purpose during period of , purpose, and amount for each Purpose CORPORATE PROJECT EX prporate message project for which ional sheets if necessary. | time covered by report. Attach additi expenditure. TOTAL PENDITURES contribution(s) or expenditure(s) total mo | Amount |

| CORRENT ACCOUNT DALANCE. 9 | | |
|--|---------------|------|
| I certify that this is a full and true statement _ | Crede Ka Moon | |
| | Signature | Date |
| Printed Name | Email | |
| Address | Phone | |
| | | |

Mullin 4 School Board 3847 E. Cty. Line Rd. White Bear Lake, MN 55110 \$250