

## CITY OF SAINT PAUL CAMPAIGN FINANCE REPORT FORM

(All data on this form is public information)

Committee Name Vote	Yes Fo	r A Fairer St. Pau	illi				
Type of organization: Candidate Committee			-	X Political Committee Political Fund			
Office sought/Purpose of	committe	ee 2025 Charter	Ame	enc	dment f	Ballo	ot Question
Type of report:	Initial report  X 8 week pre-election  2 week pre-election  January report				Final report (closes committee account - see MS Ch 211A.03 for requirements)  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	From 8/27/2025					to	9/4/2025
	(Day following end date of last rep						(5 days prior to due date OR December 31 if January report)
Summary Statement to (In column B, enter totals from column C from previous report.		A. Totals for this report		В	. Cumula Totals to from pr	Date	C. Cumulative re Totals to Date us report
1. Total contributions und	er \$50	<b>\$</b> _0	+	\$_	0		= \$
2. Total contributions equ greater than \$50	al to/	<u>\$</u> 0	+	\$_	5000		= \$ <u>5000</u>
3. Expenditures		<u>\$</u> 0	+	\$_	0		= \$_0
					(	as of	unt Balance \$ 5000 f report end date) mn C: 1+2-3 = balance)
	de by an ir					_	reater than \$50 in the aggregate. Itemization must t. Attach separate sheet or Excel spreadsheet.
Itemization of Expendit Itemize all expenditures. Item		nust include: date, pur	pose,	and	l amount	. Attac	ach separate sheet or Excel spreadsheet.
Depository(ies)/Bank Location of Committee Fu	nds Ass	sociated Bank, 20	)2 S	nel	lling Av	e., S	St. Paul, MN 55104
Signature of candidate, secretary, or treasurer	1	July (	0	J	7 Ci	5	
Printed Name Rick Varco				Email rvarco@hotmail.com			
345 Randolph Ave. #100, St. Paul MN 55116 Address				Phone651-231-2775			

Contributions

SEIU Healthcare MN & IA Name

Address 345 Randolph Ave. #100

City St. Paul

State Zip MN 55014

Amount \$5,000

Date 8/14/2025