Can

		INANCIAL REPORT	^
		in this report is public information)	1 16
ıme of candidate, cor	mmittee or corporation $\frac{\sum \varrho_{-\nu}}{}$	- y thory rough for i	admis Height Council
fice sought or ballot (question Val Acris	(0:01000000	
pe of	Candidate report Campaign committe Association or corp Final report	Entil Report Period of time co ee report Chapter 211 A eoration report from 1/3/24	to 8/20/24
in-lond) rather than cor on a cinele source that	ributions received during the period o	BUTIONS RECEIVED of time covered by this report. Contributions sho mits on the back of this form. Use a separate she year. This itemization must include name, addre	ould be listed by type (money et to itemize all contributions ess, employer or occupation if
4-KIND	+ \$ 100.	11,000	3979
OTAL AMOUNT RECE	\$ 1/, 100.		a so pak
	DIS	SBURSEMENTS	red by report.
rclude the amount, d	late and purpose for all disbursen	SBURSEMENTS nents made during the period of time cove	red by report.
ttach additional shee	iate and purpose for all disbursemets if necessary.	SBURSEMENTS nents made during the period of time cove	Amount
nclude the amount, dettach additional sheet	iate and purpose for all disbursemets if necessary.	nents made during the period of time cove	58
Date 7/30/24	late and purpose for all disburservets if necessary. The lamp per	nents made during the period of time cove	Amount
Date Date 130/2 4 130/2 4 130/2 4	corporate to any media project or corporate report for each project.	Purpose The office of faralicy for faralicy of the coverage o	Amount Solve Colored Solve Colored Solve Colored Solve Colored Amount Solve Colored Solve Colored Amount Solve Colored Solve Colored The
Corporations must list	corporate to any media project or corporate report for each project.	Purpose Total PROJECT EXPENDITURES message project for which contribution(s) of Attach additional sheets if necessary.	Amount Signal Color Col
Corporations must list	corporate t any media project or corporate report for each project.	Purpose TOTAL PROJECT EXPENDITURES message project for which contribution(s) of Attach additional sheets if necessary.	Amount Solve Colored Solve Colored Solve Colored Solve Colored Amount Solve Colored Solve Colored Amount Solve Colored Solve Colored The
Corporations must list	CORPORATE t any media project or corporate report for each project. Purpose	Purpose Total PROJECT EXPENDITURES message project for which contribution(s) of Attach additional sheets if necessary.	Amount S Amount Amount S Amount Amou
Corporations must list	corporate t any media project or corporate report for each project priori	Purpose The Atlantage of time cove Purpose The Atlantage of the paralle of the	Amount Signal Signal
Corporations must list	corporate t any media project or corporate report for each project priori	Purpose The second of time cove Purpose The second of time cove TOTAL PROJECT EXPENDITURES message project for which contribution(s) of Attach additional sheets if necessary. Name and Address of Recipient	Amount S Amount Amount S Amount Amou
Corporations must list	corporate t any media project or corporate report for each project priori	Purpose The Atlantage of time cove Purpose The Atlantage of the paralle of the	Amount 5,00,00 6,00,00 7,99
Date Date 13024 13024 13024 Corporations must list than \$200. Submit a Project title or descrip	corporate t any media project or corporate report for each project priori	Purpose The Atlantage of time cove Purpose The Atlantage of the paralle of the	Amount Signal Signal

Campaign Financial Report Form (Printable)

CAMPAIGN FINANCIAL REPORT (All of the information in this report is public information)

		4 . 1 +	1
Type of	Candidate report Campaign comm Association or c		e covered by report 2 i
or in-kind) rather than c	tributions received during the perionatribution. See note on contribution	RIBUTIONS RECEIVED od of time covered by this report. Contributions in limits on the back of this form. Use a separate:	sheet to itemize all coots
	or exceeded \$100 during the calend and date for these contributions.	ar year. This itemization must include name, ad	oress, employer or occup
CASH	\$ 4,000	TOTAL CASH-ON-HAND	\$
IM-KIND	+ 5 100	- 450 BU	Il wright sic
TOTAL AMOUNT REC	= \$ 4,100.	\$ 50 Mad	H clysdill
Date 7 20/24 8 20/24 8/18/24	Bull Weight Brech It & mattalgs	Purpose Signs (#50 in land has ketting (in kind)	# 1,440 = 50
		TOTAL	192, 226
	t any media project or corporate separate report for each projec	E PROJECT EXPENDITURES e message project for which contribution(s) Attach additional sheets if necessary.	2, 226 or expenditure(5) tota
-	Purpose	Name and Address of Recipient	Expenditure or Contribution
than \$200. Submit a: Project title or descrip Date		oj necipieni	Amount
Project title or descrip	3.		Amount
Project title or descrip	-	TOTAL	Amount
Project title or descrip Date	full and true statement.		Amount



Office of the Minnesota Secretary of State AFFIDAVIT OF CANDIDACY

Filing # VH-O1
Cash/Check#_6
Amount \$ 5.00

NOTARY RUBLIC MINNESOTA My Commission Expires 01/31/2026

Instructions

All information on this form is available to the public. Information provided will be published on the Secretary of State's website. If filing for partisan office and not a major party candidate, you must file both an affidavit of candidacy and a nominating petition. (Minn. Stat. 2048.03)

partisan office and not a major party candidate, you must file both an affidavit of candidacy and a nominating petition. (Minn. Stat. 204B.03)
Candidate Information Name, Office, and Party
Candidate Name (as it will appear on the ballot)
Office Sought Mahase Horal to C.A. Com 11
Candidate Name (as it will appear on the ballot) Office Sought Valuais Heights Cotty Political Party or Principle (State or Federal offices only) Name of Incumbent (Judicial seats only)
Name of Incumbent (Judicial seats only)
Contact Information
Required (federal, judicial, county attorney, and county sheriff candidates are exempt) Check box if you do not have an email address
Phone number (51-470-88 Email (non-government issued) Mogningh series Pyanhaw, was
Address Information 8873
Residence Address Required (unless box is checked; federal, judicial, county attorney, and county sheriff candidates are exempt)
My residence address is to be classified as private data. I certify a police report has been submitted, an order for protection has been issued, or I have a reasonable fear for my or my family's safety; or my address is otherwise private by Minnesota law. I have attached a separate form listing my residence address.
Residence Address 4380 Evorgreen Dr City Vadnan Horghols State and Zip Code 55127
Campaign Contact Information (Address required if box above is checked)
City State 7in Code
Campaign Website 7.30
Affirmation
 If filing for a state or local office, I also swear (or affirm) that: I am eligible to vote in Minnesota; I have not filed for the same or any other office at the upcoming primary or general election except as authorized by Minn. Stat. 204B.06, subd. 9; I am, or will be on assuming office, 21 years of age or more; I will have maintained residence in this district for at least 30 days before the general election; and If a major political party candidate, I either participated in the party's most recent precinct caucuses or intend to vote for a majority of that party's candidates at the next general election.
If filing for one of the following offices, I also swear (or affirm) that I meet the requirements listed below: United States Senator – I will be an inhabitant of this state when elected and I will be at least 30 years old and a citizen of the United States for not less than nine years on the next January 3rd, or if filled at special election, within 21 days after the election. United States Representative – I will be an inhabitant of this state when elected and I will be at least 25 years old and a citizen of the United States for not less than seven years on the next January 3rd, or if filled at special election, within 21 days after the election. Governor or Lieutenant Governor – I will be at least 25 years old on the first Monday of the next January and a resident of Minnesota for not less than one year on election day. I am filing jointly with Supreme Court Justice, Court of Appeals Judge, District Court Judge, or County Attorney – I am learned in the law and licensed to practice law in Minnesota. My Minnesota attorney license number is and a copy of my license is attached. Supreme Court Justice, Court of Appeals Judge, or District Court Judge – I will not turn 70 years of age before the first Monday of next January. State Senator or State Representative – I will have maintained residence in Minnesota not less than one year and in this district for six months on the day of the general or special election. County Sheriff – I am a licensed peace officer in Minnesota. My Board of Peace Officer Standards and Training license number is and a copy of my license is attached. School Board Member – I have not been convicted of an offense for which registration is required under Minn. Stat. 243.166. County, Municipal, School District, or Special District Office – I meet any other qualifications for that office prescribed by law.
Subscribed and sworn to before me this 30 day of JULY
Notary public or other officer empowered to take and certify acknowledgement Notary public or other officer empowered to take and certify acknowledgement NOTARY RUBLIC STATES

Teny how now? L

candidate for vaglania He. 1875

etty Commists

val nois Herents, ma 55127

banker

banker

Acerwood Bark of

your Stigley (account perce)

of your Stigley (account of and

a van to be repaid at end

a van to be repaid at end

can Gargh.

\$	CITY OF VADNAIS HEIGHTS, MN.	58160
DESCRIPTION	AMOUNT FUND	ACCT
Filing fee	(5.00)	
1		
Jerry Moynagh		
\.		
w P		
<u> </u>	15.00	DOLLARO
RECEIVED BY	K Cash Cash	DOLLARS



Grande Parade Entry Form Sunday, August 18, 2024

A limited number of parade units will be accepted. Register early to hold your position in the parade! Please sign up by July 30, 2024. Lineup on Sunday, August 18 begins at 11 a.m. Lineup information will be sent to parade unit contact in early-August. The contact person is asked to pass on line up information to all parade unit members.

Name of Entry (as you would like it to appear): Jerra Magnagh how V.	admong Hoigh
Name of Entry (as you would like it to appear): Jerry Mognagh bor V. Years in Parade:/	aunci/
Approximate space needed for lineup area (in feet): 3 0 ?	
Number of people in your unit:/ O	
Vehicle: AYes □ No	
Contact Name: <u>Serry Mognagh</u> Address (including City, State, and Zip): <u>U380 Evorgreen Dr. W.</u> Day Phone: <u>651-470-8873</u> Cell Phone: <u>6900</u>	
Address (including City, State, and Zip): 4380 Evorqueen Dr. V.	advacy High
Day Phone: 651-470-8873 Cell Phone: 6900	
E-mail address: moznagh jewy @ yahoo, wom	
Fee: \$\sum \\$75 - commercial \\$\sum \\$100 - political \sum \\$25 - non-profit	
Fee waived with Platinum level sponsorship (must be received prior to parade entry).	
Information about your group: vanning for vit city chunce 10 people - wet have of right, walking with car and signs/bi	1, afunt now
I acknowledge that Vadnais Heights Days prohibits any content, behavior, or products that contain language regarding a person or a group on the basis of religion, ethnicity, nationality, race, gender or other identity factor. I also acknowledge that Vadnais Heights Days prohibits items that in any w weapon, offensively or defensively. I understand that the determination of what is appropriate for the to Vadnais Heights Days staff, without exception. Any demonstration of verbal abuse of volunteers, event will not be tolerated and will result in immediate dismissal. Failure to comply with any of the in my dismissal from Vadnais Heights Days without refund. Signature: Date: Date:	s, sexual orientation, ay could be used as a see festival is strictly up the public, or the guidelines may result
Please send completed entry form and payment (payable to City of Vadnais Height Vadnais Heights Days, 800 East County Road E, Vadnais Heights, MN 55127 Phone: 651.204.6000 Fax: 651.204.6100 Credit cards and cash accepted in-person at counter only.	
Office use only Entered: Confirm Sout:	

Δmt.

Parment time: T Credit Card T Cach T Check #

07/30/24 09:09 MN000416 FARMERS & MERCHANTS SAVNGS BANK

845 E COUNTY RD E VANAIS HEIGHTS, MN RECORD NO. WITHDRAWAL FROM CHECKING

AVAILABLE BAL \$ 591.13

919 100.00

Debit A0800000042203

WWW.FMBANK.BIZ



Minneapolis BD #652

3311 Broadway Street NE Minneapolis, MN 55413

T4 Member 1117 - 21102

4 @ 19.99

79/96 A E 1481907 KS FUNHOUSE 10.97 A Ε 1799222 BRACH MINTS 14.99

1455530 ORG GRMT 50

1389080 RING POP 40 14.49 A E 22.99 A E 1845030 NERD GUM VB SUBTOTAL 43.40 11.59 TAX **** TOTAL

AID: A0000000031110

10859 App#: 51 Seq# Resp: APPROVED Visa

Tran ID#: 422805017659

APPROVED - Purchase

AMOUNT: \$154.99 08/15/2024 16:32 652 10 220 39

> Visa CHANGE

154.99 0.00

CHIP Read

TAX A 9.025% TOTAL TAX

11.59 11.59

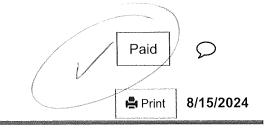
TOTAL NUMBER OF ITEMS SOLD = 0:34 [37] 16:32 652 10 220 39

OP#: 39 Name: Brayden S.

Thank You!

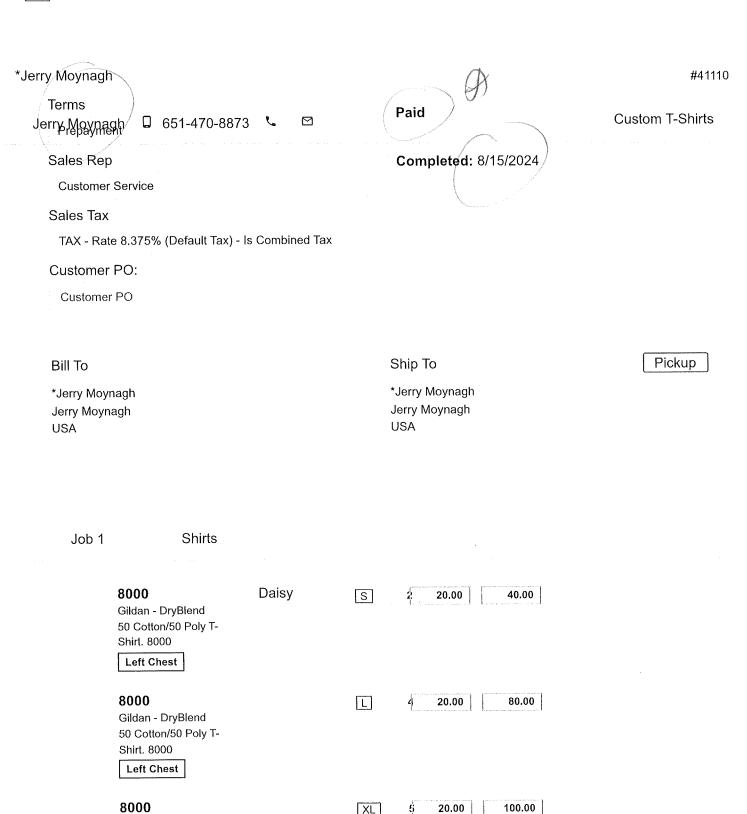
Please Come Asain Whse:652 Trm:10 Trn:220 OP:39

Items Sold: 8 T4 08/15/2024 16:32



Invoice





XL

100.00

20.00

Gildan - DryBlend 50 Cotton/50 Poly T-Shirt. 8000 Left Chest 8000 2XL] 24.50 98.00 Gildan - DryBlend 50 Cotton/50 Poly T-Shirt. 8000 Left Chest Left Chest Logo 15 Logo For 1 Embroidery Color Comment: No Initial 7500 Instructions to Artist. Stitches

View Order Totals ^

\$ 318.00

Santaproputor

Bill Weigel Signs
bill weigel signs.com 651.429.6086

470 Koehler Road Vadnais Heights, MN 55127

24-276 INVOICE NO.

111/voj(de

INVOICE

August 15, 2024

DATE

SHIP TO:

CUSTOMER ORDER NUMBER Jerry

Drive 5, MN 55127	TERMS		J				
D VIA		,					
D VIII			J				J
D VIII						The second secon	ALL CONTROL OF THE PARTY OF THE
	Duc	on	receipt	F.O.B.			
ग्रह्मस	44(0)()			10001		7840004	Ī
t of two Magnetic	signs				-4	150	.00
RRY YNAGH dnais Heights City	Counci	il e	etc				
scount						(50	.00)
ate tax						8	.40
atal duo						\$108	.40
	t of two Magnetic RRY YNAGH dnais Heights City scount	YNAGH dnais Heights City Counci scount ate tax	t of two Magnetic signs RRY YNAGH dnais Heights City Council of scount .ate tax	t of two Magnetic signs RRY YNAGH dnais Heights City Council etc scount ate tax	t of two Magnetic signs RRY YNAGH dnais Heights City Council etc scount	t of two Magnetic signs RRY YNAGH dnais Heights City Council etc scount	t of two Magnetic signs RRY YNAGH dnais Heights City Council etc scount (50)

Vote Jerry Moynagh

for Vadnais Heights City Council

MARKETING PROPOSAL



Lisa Beecroft www.beecroftmarketing.com August 2024



INVOICE

Beecroft Marketing & Events 2179 4th St, Suite 1-C Saint Paul, MN 55110 lisa@beecroftmarketing.com +1 (612) 250-4991



Bill to

Jerry Moynagh 1060 Dakota Drive Mendota Heights, MN 55120 Ship to Jerry Moynagh 1060 Dakota Drive Mendota Heights, MN 55120

Invoice details

Invoice no.: 71 Terms: Net 15

Invoice date: 08/09/2024 Due date: 08/24/2024

#	Product or service	Description	Qty	Rate	Amount	
1.	BME New Website Build	New Wix website	1	\$1,000.00	\$1,000.00	
2.	BME Domain Registration	Domain registration (included)	1	\$0.00	\$0.00	
3.	BME Web Content Management	Hosting & website content management (monthly)	4	\$100.00	\$400.00	
4.	BME Custom Email	Branded email	4	\$10.00	\$40.00	
		Total		(\$-	1,440.00	1

Ways to pay

Pay VISA DISCOVER BANK PROVING VERSION

Thank you for your business! I accept payments via credit card, ACH bank transfer, or a check mailed to:

Beecroft Marketing & Events 2179 4th St, Suite 1-C White Bear Lake, MN 55110

Note to customer

Thank you so much for your business. I have put together a proposal for a new website build in Wix, including web maintenance and content management. I have also added a price for social media management, including content planning, creation, and scheduling. I look forward to working with you! Lisa

riss check is void without a green a silve conder and Jerry Moynagh for. Vadnais Heights City Cou 4399 — Grandels Of Vadnais Heights City Cou Vadnais Hts., Mith 55127	васколочио PLUS A KNIGHT & uncil Date	FINGERPRINT WATERMARK ON THE I	5000 75-712/919
Pay to the Bill Waccorder of One hundred on	ged Sig	n = \$ 1	0 S. YO Dollars
DEERWOOD 131 6th Avenue South PO Box 337 Water Park, MN 5638 809,291-5597 For 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9	e proprietar	24. O	
#10919071 25th 1459	12355000	> >	
THIS CHECK IS VOID WITHOUT A DREEN & BLUE BORDER Jerry Moynagh for. Vadnais Heights City 4792 Surgician Dr Vadnais Hts, MN 55127	AND BACKGROUND PLUS A KNIG Council Date _	THE & FINGERPRINT WATERMARK ON	THE BACK - ROLD AT ANGLE TO VIEW 5001 75-712/919
Pay to the Recuption Order of	+ Market	the state of	1 4 40, 00 Dollars
DEERWOOD 31 6th Avonu PO BOX 337 Walto Park M	had red to for	005	

1,091,9071,6511,69127,5901

DEERWOOD BANK ✓ CASH SIGN HERE FOR LESS CASH RECEIVED LESS CASH RECEIVED TOTAL DEPOSIT \$ 101 1:5555551001 CASHIER'S CHECK No. 093-900 383 DATE: August 19, 2024 FOUR THOUSAND DOLLARS AND 00 CENTS PAY 4,000.00 TO THE ORDER OF: DEERWOOD BANK MEMO: PERSONAL CAMPAIGN CONTRIBUTION Location: 210 Grand Ave U.S. Bank, National Association Minneapolis, MN 55480

DEPOSITED WITH

CHECKING DEPOSIT



Mendota Heights (800) 291-6597

Teller 111 Seq# 103 08/19/2024 02:57 PM Deposit Acct# CK

Amounts Received Cash In: Checks Checks (other)

\$4,000.00

Amounts Disbursed: Cash Out:

Grand Total: Balance: \$4,000.00 ***.**

Deposits may not be available for immediate withdrawal