## CAMPAIGN FINANCE REPORT OF RECEIPTS AND EXPENDITURES

TANDAIGN FINANC	E REPORT OF RECEIPTS AND I	EXPENDITURES utes 383B.041-383B.058
As required by the Hennepin	,	RETAIN A COPY OF THIS REPORT FOR YOUR FILES.
	TYPE OR PRINT IN BLACK INTO	
Normation on this report is public.	,itt	Campaisna garschiff.ors (E-mail Address)
Contract Con		(E-mail Address)
(Name of Committee or Fund)	11 CS407	(C-Hours in-
(Treasurer's Name)  3215 237 Ave S, Min regal  3215 237 Ave S or Committee Business)	D, MN 3	
(Treasurer's Mailing Address for Committee Business)	COU-2792 _	
(Treasurer's Mailing Address for Committee Business)  Treasurer's Daytime Phone Number: 612 - 3  Committee or Officer's Name, Address	28 "Registration & Staten	nent of Organization")
Treasurer's Daytime Phone Number:  Change in Committee or Officer's Name, Address  Change in Committee or Officer's Name, Address	, Phone. (Attach new Neglation)	Leonanin Cour
<ul> <li>5. Change in Committee or Officer's Natural States</li> <li>No activity since last Report. (Insert Beginning and States of States)</li> </ul>	d Ending Balance at #9 d #12 below,	Received by Hennepin Cour
<ul> <li>No activity since last Report. (Insert Beginning and</li> <li>No activity with 383B.041-,058 candidates, this</li> </ul>	reporting period. (Complete the page than \$	Received by Herritorians (1900). Termination of committee registranspayer Services  AUG 0 9 2017
6a. No activity with 355555	and Ending Balance can be no more asset	AUG 0.9 2017
7. Termination of Committee - All debts must be pair if your committee is a state committee, please conf	act our office regarding comments	
8 2015 ANNUAL REPORT DUE Monday, F	ebruary 1, 2010	Log DB
REPORTING PERIOD: (check one)		
	From: 10/21/2015	Through: 12/31/2015 Through: 12/31/2015
And Political Funds or Committees.	From: 1/1/2015	(Mough, 150 s.)
	。32.97	
9. BEGINNING CASH BALANCE THIS REPORT:	(Insert Ending Cash Balance from last repo	ort)
		COLUMN C
COLUMN A Activity Reported this year,	COLUMN B ACTIVITY IN THIS REPORTING PERIO	D A + B = Total Activity for This Calendar Year
In previous reporting periods.	ACTIVITY IN THE TELL	
10. ADDITIONS:	+\$	(Insert total of line 10, columns A + B)
(Column C, Line 10 from Last Reporting period.)	(Insert amount from line 25)	fulgati total a
		\$
11. SUBTRACTIONS:	(Insert amount from line 34)	(Insert total of line 11, columns A + B)
(Column C, Line 11 from Last Reporting period.)		
THRING CASH BALANCE THIS REPORT:	= \$ 3 Z. 9 7 (Line 9 + line 10(column B) - line 11(column B)	glumn B)
SUMMARY OF IN-KIND DONATIONS & OUTSTANDIN	IG LOANS RECEIVABLE:	COLUMN C
COLUMN A	COLUMN B ACTIVITY IN THIS REPORTING PER	This Colondat Year
Activity Reported on Last Report	ACTIVITY IN THIS REPORT	- <del>-</del>
13. In-Kind Donations Received:		\$
\$	+ \$ (Insert total from line 36)	(Insert total of line 13, columns A + B)
(Column C, Line 13 from Last Reporting period.)	`	
14. Goods/Services Given to Others:	e	(Insert total of line 14, columns A + B)
(Column C, Line 14 from Last Reporting period.)	- \$ (Insert total from line 39)	· ·
(Column C, Line 14 from Last Reporting Parts  15. Current Balance of Outstanding Loans Rec	eivable (loaned to others)	(Insert total Current Balance from line 45)
15. Current Balance of Outstationing 200115		VII.
SUMMARY OF OUTSTANDING DEBT:		
4c Current Balance of Outstanding Loans Fayer	e (loaned to you)	(Insert total Current Balance from line 42)
(Amount from Last Report: \$ )	decrees of Cradit	\$ Sound from line 46)
17. Current Balance of Outstanding Unpaid Bills/	Advance of Credit	(Insert total Amount Owed from line 46)
(Amount from Last Report: \$	Hilles to be true a report or statement which	the person knows contains false information or who knowingly omits
18. CERTIFICATION: Any person who signs and ce required information is guilty of a gross misdemea	nor.	IS COMPLETE, TRUE AND CORRECT.
required information is guilty of a Wilson  1, (Print Name)	, CERTIFY THAT THIS REPORT	13 COMPLETE, 111027 III
1, (1-101/1001/2)		DATE: 8/8/17
SIGNATURE OF TREASURER:	FILE THIS REPORT WITH:	MN 55487-0012 • (612)596-7152
en e	OCH 012 GOVERNMENT CENTER,	Minneapolis , MN 55487-0012 • (612)596-7152

REC	EIPT AND EXPENDITURES WORKSHEET	FOR THIS REPORTING PE	RIOD ONLY
MAP	E OF COMMITTEE OR FUND:		DATE:
ADD	TIONS: (Income)		
19. ·	Total ITEMIZED Contributions:	(Insert total from line 35)	
<b>2</b> 0. '	Total NON-ITEMIZED Contributions:	<u>\$</u>	(Subtotal: lines 19 + 20)
21.	income from bank dividends, interest, etc:	\$	
22.	New Loans Payable (loaned to you):	(Insert total from line 40)	
23.	New Repayments on Loans Receivable: (loaned to others/repaid to you)	(Insert total from line 44)	
24.	Other:	\$	\$ (Subtotal: lines 21+22+23+24)
25.	TOTAL INCOME:	\$ (TOTAL lines 19 through 24. Tra	ansfer this amount to Line 10, Column B.)
SUE	TRACTIONS: (Expenditures)		
26.	Total ITEMIZED Contributions to Others:	(Insert total from line 38)	
<b>27</b> .	Total NON-ITEMIZED Contributions to Others:	<u>\$</u>	\$ (Subtotal: lines 26 + 27)
28.	Total ITEMIZED Operating Expenditures:	\$ (Insert total from line 37)	
29.	Total NON-ITEMIZED Operating Expenditures:	<u>\$</u>	(Subtotal: Lines 28 + 29)
30.	Bank service charges, etc., paid by you:	\$	
31.	New Repayments on Loans Payable: (loaned to you/repaid to lender)	(Insert total from line 41)	
32.	New Loans Receivable (loaned to others):	(Insert total from line 43)	
33.	Other:	\$	\$(Subtotal: lines 30+31+32+33)
- 34.	TOTAL EXPENDITURES:	\$	prefer this amount to Line 11. Column B.)

Important information: Addresses submitted on Schedule A are public data pursuant to the Minnesota Government Data Practices Act. This form is retained on file in the Hennepin County Elections Division. As a convenience, Hennepin County also displays Schedule A on the Hennepin County web site. Please check the box and initial the form on the line provided if you do not want the Division. As a convenience, Hennepin County also displays Schedule A on the Hennepin County web site. If selected, please submit two versions of Schedule A, one with contributors' addresses and one without. address of contributors to be displayed on the website.

## SCHEDULE A: INCOME FROM CASH (MONETARY) CONTRIBUTIONS and IN-KIND DONATIONS

DATE:	ibutor, exceeds \$100 *, the name and address of the individual,
	on or donation in Kind within the year that, in aggregate from any contri
NAME OF COMMITTEE OR FUND:	or dor

("In the case of a contributor who is self-employed, that is, does not derive earned income as owner, partner, or employee of a corporation, partnership, or other entity, including a branch of government, you must committee or fund that made the monetary contribution or Donation In Kind, and the employer of the individual contributor. You must disclose the date and amount of each monetary contrib list that contributor's occupation.)

\*Political Funds must femize contributions of members that, in aggregate in the year, exceed \$50.

Attach additional pages as necessary. uter-generated list, all items must be in the same order as they appear on Schedule A.

II you sublim	II you subline a typed of company general				liet contribution	ist contributions here for the	
					current reportir	ng period	
		List frage		COLUMN A	COLUMN B COLUMN B1	COLUMN B1	COLUMN C
							Total from
			Description of In-Kind	Previous Total	\$ Received	\$ Value of In-	Source
Date	ALPHABETICAL ORDER!	Employer**	Donation	For This Year	This Period	Kind Donation	Year to Date
HCVQ.	COLUMN RAINE & VICTOR						
				-			
		-			,		
				-			
1							

\$	45	מאמי	nount to Line 19) \$	
S. LAMINE Monetary Contributions received this period:	SUDIOIS I LINIELD MOTORING STATE THE STATE OF THE STATE O	Subtotal ITEMIZED Monetary Contributions received this period in previous page.	AS TOTAL ITEMAZED CONTRIBITIONS RECEIVED THIS PERIOD: (Transfer this amount to Line 19)	SO. 10 AE ILEMEELE CONTRICTION

A LAST ITEMIZED IN Kind Danations received this period	of this period:	ക
SUDIOISI II E MIZED III-MIN DOI BION SI COMPANIA		•
C. Line of ITEMIZED In Kind Donations received this period	e received this period listed on previous page:	9
SUBJECT III I EINIETE III I III I I I I I I I I I I I I I		é
Contract In Carl In Kind Donations Received This	Received This Period:	A
Subjected in Civil Lawie LD III - Killing Colleges		6
26 TOTAL IN KIND DONATIONS RECEIVED THIS PERIOD. (Transfer this amount to Line 13, Column B)	IIS PERIOD: (Transfer this amount to Line 13, Column B)	•
30. 10175		

## SCHEDULE B: OPERATING EXPENDITURES and CONTRIBUTIONS MADE TO OTHER COMMITTEES

	f \$100 within	
	ns have been made, in an aggregate amount in excess of \$10	
	gate amount	
	, in an aggre	
	been made	
	utions have	
	ures/contrib	
	tee to whom expendi	
	nittee to wh	
	on must disclose the name and address of each individual, business or committee	Life IPS
	idual, busin	Cartification only by the second of the seco
	of each indiv	
1	d address c	
טיי אט זיין	ne name an	
AME OF COMMITTEE OF FOUR	disclose th	
AME O	ביים הביים מיום	3

DATE

If you submit a typed or computer-generated list, all items must be in the same order as they appear on Schedule B. the year, and the amount, date and specific purpose of the expenditure.

Attach additional pages as necessary.

Attach addi	Attach additional pages as incressally.			7.7	4 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		
				List expenditures here for the	es nere lor me		
				current reportin	ng period		
			COLUMNA	COLUMN B COLUMN B1	COLUMN B1	COLUMN C	
						Total to	
		Primose for	Previous Total	Operating	Contributions	Source	
	ALPHABETICAL ORDER!	Expenditive		Expenditures	to Others	Year to Date	
Date Paid	Vendor or Recipient Committee Name and Address		l				
			-				_
							_
			1				1
-				:			
				€			
C TAIL	Subtotal ITEMIZED Operating Expenditures this period:				T		
				<b>4</b>			

S. LACAL I TEMINED Charating Expenditures this period:		
Subjoid     Elvich Operation		
S. Motel (TEMIZE) Operating Expenditures this period listed on previous page.		
Subjudge in the same of the sa		
37 TOTAL ITEMIZED OPERATING EXPENDITURES THIS PENDLY (Trails) of the control of t		
	-	
The state of the s	•	
Subtotal ITEMIZED Contributions to Others this period	6	
Party of Par	A-	
C. Mater I'TE MIZED Contributions to Others this period listed on previous page.		
Subjudicial Literature Contraction Contrac	<del>-</del>	
THERS THIS DEVICE TO OTHERS THIS PERIOD: (Transfer this amount to Line 20)	*	
38 TOTAL LEMIZED CONTRIBUTIONS TO CHILDREN		

AME OF	COMMITTEE OR FUND:		<del></del>	DATE: _		_
CHEDUL	E C: GOODS AND SERVIC	ES GIVEN TO OTHERS		as well as any othe	erwise non-itemizab	le cash that, together w
oods and	services, is in excess of \$10 ervices given.	00 within the year. You mus	st also disclose the	date, name and ac	dress of the recipie	ent and a description of
		T		Goods & Service	s + Cash = \$100+	
					rrent Period	
	Alphabetical Order!		COLUMN A	COLUMN B	COLUMN B1	COLUMN C
	Name & Address of	Description of	Previous Total		Value of Goods	Recipient Total
ate	Recipient	Goods and Services	for This Year	Cash Given	& Services	Year to Date
9. Total (	Goods and Services given in	n this period: (Transfer this	amount to Line	4, Column Bj	\$	<u></u>
CHEDUL	E D: NOTES AND LOANS	PAYABLE (Loaned to You	1)	· .		
				· ·	or Repaid by You in	
					porting Period	
	Alphabetical Order!		COLUMN A1	COLUMN B	COLUMN B1	COLUMN C1
ate	Name, Address & Emple	over of Lender	Loan Balance Last Report	Add New Loan \$ Received	Subtract Loan \$ Repaid	Owed by You
alt	Hame, Address & Emph	9741 01 14011401		Ţ.122311 ww		
0. Total	New Loans Payable this per	riod: (Transfer this amoun	t to Line 22)	\$		
	Repayment of Loans Payab			31)	\$	
2. Curre	ent Balance of Outstanding L	oans Payable: (Transfer th	is amount to Line	16)		\$
SCHEDUL	LE E: NOTES AND LOANS	RECEIVABLE (Loaned by	You)			
				_	or Repaid to You in	1
					porting Period	000 11170 04
	Alphabetical Order!		COLUMN A1	COLUMN B	COLUMN B1	COLUMN C1 Current Balance
Date	Name, Address & Empl	oyer of Recipient of Loan	Loan Balance Last Report	Add New Loan \$ Given	Subtract Loan \$ Repaid	Owed to You
<del></del>			overt to Line 22)	\$		
	New Loans Receivable this				\$	+
44. Total	Repayment of Loans Receient Balance of Outstanding	vable this period: (Transfel	this amount to	ine 15\	ΙΨ	s
	ent Balance of Outstanding		<del></del>		<u> </u>	1.*
						Current Belance
Date	Alphabetical Order! Name & Address of Ve	ndor of Goods or Services	Received But Not I	Paid For		Current Balance Owed by You
	2500110 01 10000001 40					
			· · · · · · · · · · · · · · · · · · ·			
46. Curn	ent Balance of Outstanding	Unpaid Bills/Advance of Cn	edit: (Transfer this	amount to Line 1	7)	\$
47. The (Mak	Treasurer is to sign this s ke notations on Schedules E	tatement ONLY IF INDEPI 3 or C where Independent E	E <b>NDENT EXPEND</b> Expenditures are ite	ITURES WERE MA mized.)	ADE.	
L/D	EPENDENT EXPENDITURI rint Name) reported in this report were		, hereby certify	that all independen	t expenditures made	e on behalf of other car operation or in concer
or a	t the request or suggestion	n of any candidate, candi	date's campaign	ommittee or agen	t.	-
Sian	nature of Treasurer		<u></u>	E	)ate	