CAMPAIGN FINANCE REPORT OF RECEIPTS AND EXPENDITURES

As required by the Hennepin County Financial Disclosure Law: Minnesota Statutes 383B.041-383B.058

ALL	INFORMATION ON THIS REPORT IS PUBLIC.	TYPE OR PRINT IN BLACK INK.	RETAIN A COPY OF THIS REPORT FOR YOUR FILES.
1.	People for Alondra		
_	(Name of Committee or Fund)		musal@hatmail.com
2.	Matt Musel (Treasurer's Name)	<u> </u>	musel@hotmail.com (E-mail Address)
3.	4411 Morgan Ave. North, Minneapolis, MN		
	(Treasurer's Mailing Address for Committee Busi	ness)	
4.	Treasurer's Daytime Phone Number: 612	:-735-1890	
5.	Change in Committee or Officer's Name, Add	dress, Phone. (Attach new "Registration & Stateme	nt of Organization")
6.	No activity since last Report. (Insert Beginning		
6a.	No activity with 383B.041058 candidates,	this reporting period. (Complete lines #9-#12 as ap	oplicable) Hennepin Count
7.	Termination of Committee - All debts must be	paid and Ending Balance can be no more than \$10	oplicable) 0. Termination of Resolved by Hennepin Count Taxpayer Services
_			
8.		/, February 2, 2015	AUG 28 2015
	REPORTING PERIOD: (check one)	e de la la de la transpolito de la materia de la composition de la composition de la composition de la composi La composition de la	
	2014 Candidates on the ballot	5-4-40/00/00/4	Through: 12/31/201 4.09DB
	And Political Funds or Committee Candidates NOT on the ballot in 2		Through: 12/31/2014-09 DEL
	<u>Баначанна учасника высай вини навайна иналиватива</u>		All research in relations and the second
9.	BEGINNING CASH BALANCE THIS REPORT:		Amended
	COLUMN A	(Insert Ending Cash Balance from last report)	, , , , , , , , , , , , , , , , , , ,
	Activity Reported this year,	COLUMN B	COLUMN C
	In previous reporting periods.	ACTIVITY IN THIS REPORTING PERIOD	A + B =Total Activity for This Calendar Year
10.	ADDITIONS:	STREET CO.	•
	(Column C. Line 10 from Leat Bon orting poried.)	± \$ 4,380.00	(Insert total of line 10, columns A + B)
	(Column C, Line 10 from Last Reporting period.)	(Insert amount from line 25)	(Insert total of line 10, columns A + b)
11.	SUBTRACTIONS:	P# 0 700 40	•
	\$ (Column C, Line 11 from Last Reporting period.)	\$ 9,706.10 (Insert amount from line 34)	(Insert total of line 11, columns A + B)
	(Column o, Elilo 11 Hom Edoc Reporting portod.)	,	(moort otal or me 11) oslamilo (1) by
12.	ENDING CASH BALANCE THIS REPORT:	\$ 1308.09 (Line 9 + line 10(column B) - line 11(column l	D)
	·		
SUN	MMARY OF IN-KIND DONATIONS & OUTSTANDIN		
	COLUMN A	COLUMN B	COLUMN C
	Activity Reported on Last Report	ACTIVITY IN THIS REPORTING PERIOD	A + B =Total Activity for This Calendar Year
13.	In-Kind Donations Received:		
	\$ (Column C, Line 13 from Last Reporting period.)	+ \$ (Insert total from line 36)	(Insert total of line 13, columns A + B)
		(msert total nom me 30)	(insert total of line 13, columns A + b)
14.	Goods/Services Given to Others:		
	(Column C, Line 14 from Last Reporting period.)	(Insert total from line 39)	(Insert total of line 14, columns A + B)
		,	(moet total of line 14, columns A / b)
15.	Current Balance of Outstanding Loans Rece	ivable (loaned to others)>	(Insert total Current Balance from line 45)
			,
	MMARY OF OUTSTANDING DEBT: Current Balance of Outstanding Loans Payable	(loaned to you)	\$
. J.	(Amount from Last Report: \$		(Insert total Current Balance from line 42)
17.	Current Balance of Outstanding Unpaid Bills/Advance of Credit		\$
	(Amount from Last Report: \$)		(Insert total Amount Owed from line 46)
18.	CERTIFICATION: Any person who signs and certifi	es to be true a report or statement which the person	knows contains false information or who knowingly omits
	required information is quilty of a gross misdemeanor	4	
	I, (Print Name)	, CERTIFY THAT THIS REPORT IS COMP	
SIG	NATURE OF TREASURER: /// /// ///	Mod	DATE: 8/25/15

RECEIPT AND EXPENDITURES WORKSHEET FOR THIS REPORTING PERIOD ONLY

NAI	ME OF COMMITTEE OR FUND: <u>People for Alono</u>	lra	DATE: <u>8/19/2015</u>
ADI	DITIONS: (Income)		
19.	Total ITEMIZED Contributions:	\$ 850.00 (Insert total from line 35)	
20.	Total NON-ITEMIZED Contributions:	\$ 3,530.00	\$ 4,380.00 (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:	\$ 4,380.00 (TOTAL lines 19 through 24.	Fransfer this amount to Line 10, Column B.)
sui	BTRACTIONS: (Expenditures)		
26.	Total ITEMIZED Contributions to Others:	\$ (Insert total from line 38)	
27.	Total NON-ITEMIZED Contributions to Others:	\$	\$ (Subtotal: lines 26 + 27)
28.	Total ITEMIZED Operating Expenditures:	\$ 9,093.05 (Insert total from line 37)	
29.	Total NON-ITEMIZED Operating Expenditures:	\$ 613.05	\$ 9,706.10 (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:	\$ 9,706.10 (Total lines 26 through 33. Tr	ansfer this amount to Line 11. Column B.)

"Political Funds must itemize contributions of members that, in aggregate in the year, exceed \$50. If you submit a typed or computer-generated list, all items must be in the same order as they appear on Schedule A. Attach additional pages as necessary. List contributions he current reporting per **COLUMN A** COLUMN B **Previous Total** ALPHABETICAL ORDER! Description of In-Kind Contributor's Date \$ Received This Period For This Year Employer** Donation Rcvd. Contributor Name & Address 200.00 0.00 Mahamaud Wadere 2929 Housing Advocate CHICAGO AVE #303 MINNEAPOLIS MN 55407 200.00 0.00 Thomas Hoch 2100 JAMES Hennepin Theatre Trust MINNEAPOLIS MN AVE \$ 55405 200.00 0.00 Ruhel Islam 5728 -44TH AVE S Ghandi Mahal MINNEAPOLIS MN 55417 250.00 Dick Senese 2929 Chicago Capella University 0.00 Avenue S Minneapolis, MN 55407 . \$850.00 Subtotal ITEMIZED Monetary-Contributions received this period: \$ 0.00 Subtotal ITEMIZED Monetary Contributions received this period listed on previous page: \$850.00 35. TOTAL ITEMIZED CONTRIBUTIONS RECEIVED THIS PERIOD: (Transfer this amount to Line 19)

Subtotal ITEMIZED In-Kind Donations received this period:

Subtotal NON-ITEMIZED In-Kind Donations Received This Period:

Subtotal ITEMIZED In-Kind Donations received this period listed on previous page:

36. TOTAL IN-KIND DONATIONS RECEIVED THIS PERIOD: (Transfer this amount to Line 13, Column B)

\$ 0.0

\$ 0.0

\$ 0.0

\$ 0.0

9. Total Goods and Services given in this period: (Transfer this amount to Line 14, Column B) \$	
SCHEDULE D: NOTES AND LOANS PAYABLE (Loaned to You)	NAMES OF THE PARTY
	Alphabetical Orderl
	The state of the s
Date	Name, Address & Employer
	\$
0. Total New Loans Payable this period: (Transfer this amount to Line 22)	\$
11. Total Repayment of Loans Payable this period: (Transfer this amount to Line 31)	\$
2. Current Balance of Outstanding Loans Payable: (Transfer this amount to Line 16)	1 V
SCHEDULE E: NOTES AND LOANS RECEIVABLE (Loaned by You)	
The state of the s	
	Alphabetical Order!
Date	Name, Address & Employer
	I STANDARI - LANGUERA AND ANTE AND
3. Total New Loans Receivable this period: (Transfer this amount to Line 32)	\$
14. Total Repayment of Loans Receivable this period: (Transfer this amount to Line 23)	\$
5. Current Balance of Outstanding Loans Receivable: (Transfer this amount to Line 15)	\$
SCHEDULE F: UNPAID BILLS/ADVANCE OF CREDIT (Items or services received but not paid)	
	Alphabetical Orderi
Date	Name & Address of Vendor c
46. Current Balance of Outstanding Unpaid Bills/Advance of Credit: (Transfer this amount to Line 17)	\$
A STATE OF THE STA	
 The Treasurer is to sign this statement ONLY IF INDEPENDENT EXPENDITURES WERE MADE. (Makindependent Expenditures are itemized.) 	e notations on Schedules B or C where
INDEPENDENT EXPENDITURE: SWORN STATEMENT I, (Print Name), hereby certify that all independent expenditure and reported in this report were made WITHOUT the authorization or expressed or implied consent of, or appendix provided to comparing committee or agent	res made on behalf of other candidates or in cooperation or in concert with,
or at the request or suggestion of any candidate, candidate's campaign committee or agent.	2/2015
Signature of Treasurer ///////////////////////////////////	