## CAMPAIGN FINANCE REPORT OF RECEIPTS AND EXPENDITURES As required by the Hennepin County Financial Disclosure Law: Minnesota Statutes 383B.041-383B.058

<u> </u>	INFORMATION ON TRIS REPORT IS PUBLIC.	I YPE OR PRINT IN BLACK INK.	RETAIN A COPY OF THIS REPORT FOR YOUR FILES,
1.	BARB JOHNSON VOLUNTEER CO	MMITTEE(WARD 4)	
2.	·		
	(Treasurer's Name)		(E-mail Address)
3.	4318 XERXES AVE N MINNEAPO (Treasurer's Mailing Address for Committee Busin	LIS, MN 55412	_
4.	Treasurer's Daytime Phone Number: (612) 5		Received the Hennepin County  To prover Services
5.	☐ Change in Committee or Officer's Name, A	Address, Phone. (Attach new "Registration &	Statement of Organization")
6.	☐ No activity since last Report. (Insert Beginn	ing and Ending Balance at #9 & #12 below)	SEP 8 2005
6a.	☐ No activity with 383B.041058 candidates	s, this reporting period. (Complete lines #9-	#12 as applicable) Log
7.	☐ Termination of Committee; Termination of	Committee Registration	PM 9/405 DEL
8.	TYPE OF REPORT: FILING DA	TE: REPORTING PERIOR	D:
	PRE-PRIMARY: 9/6/2005	From: 1/1/2005	Through: 8/30/2005
9.	BEGINNING CASH BALANCE THIS REPORT:	\$11,120.22 (Insert Ending Cash Balance from last repor	t)
(C	olumn A not applicable for this report)	COLUMN B ACTIVITY IN THIS REPORTING PERIOR	COLUMN C  (Total Activity Reported for This Calendar Year)
10.	ADDITIONS:	+ \$ 2900.00 (Insert amount from line 25)	\$ 2900.03 (Insert total of line 10, column B)
11.	SUBTRACTIONS:	-\$ 5607.00 (Insert amount from line 34) _ SB	(Insert total of line 11, column B)
12.	ENDING CASH BALANCE THIS REPORT:	= \$ 84/3.22 (line 9 + line 10(column B) - line 11(column B)	SP9/8/05
SU	MMARY OF IN-KIND DONATIONS & OUTSTAND	DING LOANS RECEIVABLE:	
(Ca	olumn A not applicable for this report)	COLUMN B ACTIVITY IN THIS REPORTING PERIOD	COLUMN C  (Total Activity Reported for This Calendar Year)
13.	In-Kind Donations Received:	+\$ /00.70 (Insert total from line 36)	(Insert total of line 13, column B)
14.	Goods/Services Given to Others:	- \$ (Insert total from line 39)	(Insert total of line 14, column B)
15.	Current Balance of Outstanding Loans Received	vable (loaned to others)	> \$ F U = (Insert total Current Balance from line 45)
	MMARY OF OUTSTANDING DEBT:  Current Balance of Outstanding Loans Payable (I (Amount from Last Report: \$0.00)	loaned to you)	> \$ (Insert total Current Balance from line 42)
17.	Current Balance of Outstanding Unpaid Bills/Adva (Amount from Last Report: \$0.00 )	ance of Credit	(Insert total Amount Owed from line 46)
18.	CERTIFICATION: Any person who signs and certified required information is guilty of a gross misdemeanor.  I, (Print Name) Many Bases		on knows contains false information or who knowingly omits  DRT IS COMPLETE, TRUE AND CORRECT.
SIG	NATURE OF TREASURER: Mary bube	ock	DATE: 9/1/05
	TAXPAYER SERVICES DEPARTMENT, ELECTIONS	FILE THIS REPORT WITH: DIVISION • A-600 GOVERNMENT CENTER,	MINNEAPOLIS, MN 55487-0060 • (612)596-7152

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REC	CEIPT AND EXPENDITURES WORKSHEE	T FOR THIS REPORTING PER	IOD ONLY
NAM	ME OF COMMITTEE OR FUND: BARE TO	chason Volunteer	DATE: 9/6/05
ADD	HTIONS: (Income)	Committee	,
19.	Total ITEMIZED Contributions:	(Insert total from line 35)	
20.	Total NON-ITEMIZED Contributions:	\$ 450.00	\$ 2 900.00 (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:	\$ , 0 -	\$
			(Subtotal: lines 21+22+23+24)
25.	TOTAL INCOME:	\$ 2900. 00 (TOTAL lines 19 through 24. Trans	fer this amount to Line 10, Column B.)
SUE	STRACTIONS: (Expenditures)		
26.	Total ITEMIZED Contributions to Others:	\$ (Insert total from line 38)	
27.	Total NON-ITEMIZED Contributions to Others:	\$	\$ 0 — (Subtotal: lines 26 + 27)
28.	Total ITEMIZED Operating Expenditures:	\$ 4926.13 (Insert total from line 37)	,
29.	Total NON-ITEMIZED Operating Expenditures:	\$ 680.87	\$ 5607.50 (Subtotal: Lines 28 + 29)
30.	Bank service charges, etc., paid by you:	\$ 0	
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:	<u>\$</u>	\$ (Subtotal: lines 30+31+32+33)
34.	TOTAL EXPENDITURES:	\$ 5007.00 (Total lines 26 through 33 Transfe	r this amount to Line 11. Column R.)

Hennepin (	nportant information: Addresses subm County Elections Division. As a conven ovided if you do not want the address of rs' addresses and one without.	ience. Hennepin County also	o displays Schedule A on th	e Hennepin County	web site. Please ch	Seck the box and it	nitial the form on
SCHEDI	JLE A: INCOME FROM CASH	(MONETARY) CONT	RIBUTIONS and IN-I	KIND DONATIO	ons	, ,	
NAME OF	COMMITTEE OR FUND: Bork	Johnson bo	lunteer con	unittel	DA	TE: 9/6/15	
individual, c (**In the cas government *Political Fu	isclose the date and amount of each mone committee or fund that made the monetary se of a contributor who is self-employed, the tyou must list that contributor's occupation ands must itemize contributions of member it a typed or computer-generated list, all ite	contribution or Donation In Kin at is, does not derive earned ir n.) s that, in aggregate in the year	d, and the employer of the income as owner, partner, or e , exceed \$50.	fividual contributor. Imployee of a corpora		other entity, includin	
	T				List contributio		
<u></u>	·	ļ- <del></del>	<u></u>	COLUMN A	COLUMN B	COLUMN B1	COLUMN C
Date Rcvd.	ALPHABETICAL ORDER! Contributor Name & Address	Contributor's Employer**	Description of In-Kind Donation	Previous Total For This Year	\$ Received This Period	\$ Value of In- Kind Donation	Total from Source Year to Date
3/19	Lakes + Phins he signal		`		300.00		300.00
7/27	MFD Pensionars Political			<u> </u>	300.00		300.00
7/28	minnapolis file Dept.				300.00		300.07
4/28	Don Gerberd 19 mpt 5546	master Sevelopment	<u>'</u>		150.00		150.00
7/12	CORE Local #15			ļ <u></u>	300.00		300.00
4/30	of mindepolis				300.00		300.00
6/22	ref valuntary Politach			ļ	200.00	·	200.00
4/23	Jindemy 4900 brew right	Lobbyist	,	<u> </u>	300.00		300.00
4/20	minnesota DRIVE	·		<u> </u>			
Ĺ				<u> </u>			
Subtot	al ITEMIZED Monetary Contributions	received this period:			\$ 2450.00	1	
Subtot	al ITEMIZED Monetary Contributions	received this period listed of	on previous page:		\$		
35. TOTAL	LITEMIZED CONTRIBUTIONS RECE	IVED THIS PERIOD: (Trai	nsfer this amount to Line	19)	\$2460.00		
Subtot	al ITEMIZED In-Kind Donations received	ved this period:				\$ .	}
	al ITEMIZED In-Kind Donations recei		víous page:			\$	
	al NON-ITEMIZED In-Kind Donations	<del></del>				\$ 100.00	
36. TOTAL	IN-KIND DONATIONS RECEIVED	THIS PERIOD: (Transfer th	is amount to Line 13, Co	olumn B)		\$ 100.50	
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## SCHEDULE B: OPERATING EXPENDITURES and CONTRIBUTIONS MADE TO OTHER COMMITTEES

NAME	OF	COM	MITTEE	ΛR	FUND:
14/3141	UI.	COM	YII	$\Delta r$	TUIND.

BARB Johnson Volunteer Committee	DATE: 9/6/05

You must disclose the name and address of each individual, business or committee to whom expenditures/contributions have been made, in an aggregate amount in excess of \$100 within the year, and the amount, date and specific purpose of the expenditure.

If you submit a typed or computer-generated list, all items must be in the same order as they appear on Schedule B.

Attach additional pages as necessary.

				List expenditur current reportir		
			COLUMN A	COLUMN B	COLUMN B1	COLUMN C
	ALPHABETICAL ORDER!		Previous Total	Operating	Contributions	Total to Source
Date Paid	Vendor or Recipient Committee Name and Address	Purpose for Expenditure	For This Year	Expenditures	to Others	Year to Date
1/30	AAA	car coverage		121.85		121.85
2/28 4/27	Canden news	lads		585.68		
416	Cooperative frinting	literature		1433.30		
81.9	Barb Johnson	phonelines, convention	070.	935.00		
4116 112 8119 8118 5110	Jock & and	Convertion photos		245.00		
61,	no RTH Community bigh School	abvertisément		300.00		
41.5 212 115 515 61.8 7110 1121 3125	office max	office Supplies		168.73		
5/15 6/18	Quest.	cellphone		351.51	ļ	
6/26 6/19	Postonaster	postage		467.00		
115 7/17	Star Tubune	newspaper		118.42		
Subtota	I ITEMIZED Operating Expenditures this period:			\$	<u>{</u>	
Subtota	ITEMIZED Operating Expenditures this period listed on prev	ious page:	·· = = -· <del>-</del>	\$	]	
37. TOTAL	ITEMIZED OPERATING EXPENDITURES THIS PERIOD: (T	ransfer this amount to Line	28)	\$	]	

Subtotal ITEMIZED Contributions to Others this period:	\$ 0
Subtotal ITEMIZED Contributions to Others this period listed on previous page:	\$
38. TOTAL ITEMIZED CONTRIBUTIONS TO OTHERS THIS PERIOD: (Transfer this amount to Line 26)	\$ 0

posez

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

	committee or fund: & Johnson Volunteer Con	mi tte		D	ATE: 1/6/05	
excess of \$	isclose the name and address of each individual, business 100 within the year, and the amount, date and specific put	rpose of the expenditure.		have been made	, in an aggregate a	mount in
•	nit a typed or computer-generated list, all items must be in tional pages as necessary.	the same order as they appear of	n Schedule B.			
, adoir addi	lional pages as necessary.			current report		
Date Paid	ALPHABETICAL ORDER!  Vendor or Recipient Committee Name and Address	Purpose for Expenditure	Previous Total For This Year	Operating Expenditures	COLUMN B1 Contributions to Others	Total to Source Year to Date
12 2/11 3h	Dune Tohnson	paper office supplies	19	199.44		199.44
				<u> </u>		
·· <del>-</del>				<del> </del>	<del> </del>	<del></del>
<del></del>				<del> </del>	<del></del>	<u> </u>
		1	 	<u> </u>	<del> </del>	·
				<del> </del>	<del> </del>	<del> </del>
<del></del> _			<del></del> -	<del> </del>	<del> </del>	<del> </del>
				<del></del>	<del></del>	<del> </del>
			<u> </u>			<del>                                     </del>
		,		\$ 4 926.12		<u> </u>
	al ITEMIZED Operating Expenditures this period:	<u> </u>				
	ITEMIZED Operating Expenditures this period listed on JITEMIZED OPERATING EXPENDITURES THIS PERIOD					
37. TOTAL	TEMIZED OF ERATING EXPENDITORES THIS FERIOL	. (Transier uns amount to Line		\$ 4926.13	אַ	
	ITEMIZED Contributions to Others this period:				\$	]
	al ITEMIZED Contributions to Others this period listed on p		3.5		\$	[
38. TOTAL	ITEMIZED CONTRIBUTIONS TO OTHERS THIS PERIO	D: (Transfer this amount to Line	e 26)		\$ -0-	]

	COMMITTEE OR FUND:					_
ou must di gether wit	E C: GOODS AND SERVICE  lisclose the total value of goods the the goods and services, is ription of the goods or service.	ods and services given to a in excess of \$100 within t	nother committee,	as well as any other	rwise non-itemizab	le cash that, ress of the recipie
					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
ite	Recipient	Goods and Services	for This Year	Cash Given	& Services	Year to Date
. Total (	Goods and Services given in	this period: (Transfer this	amount to Line 1	4, Column B)	\$	-0-
	E D: NOTES AND LOANS					
				Current Rep	r Repaid by You in orting Period	
	Alphabetical Orderl		COLUMN A1	COLUMN B	COLUMN B1	COLUMN C1
ate	Name, Address & Emplo	yer of Lender	Loan Balance Last Report	Add New Loan \$ Received	Subtract Loan \$ Repaid	Owed by You
) Total	New Loans Payable this per	od: (Transfer this amount	to Line 22)	S		
	Repayment of Loans Payabl			31)	\$	
Curre	nt Balance of Outstanding Lo	oans Payable: (Transfer th	is amount to Line	16)		5-0-
HEDUL	E E: NOTES AND LOANS I	RECEIVABLE (Loaned by	You)		or Repaid to You in	· · · · · ·
	Alphabetical Order!		COLUMN A1	COLUMN B	column B1	COLUMN C1
	Alphabetical Olders		Loan Balance	Add New Loan	Subtract Loan	Current Balance
te	Name, Address & Emplo	yer of Recipient of Loan	Last Report	\$ Given	\$ Repaid	Owed to You
Total	New Loans Receivable this	period: (Transfer this amo	unt to Line 32)	s		
	Repayment of Loans Receiv			ne 23)	\$	
Curre	nt Balance of Outstanding Lo	oans Receivable: (Transfe	r this amount to L	ine 15)		5-0-
HEDUL	.E F: UNPAID BILLS/ADVA	NCE OF CREDIT (Items o	r services receive	d but not paid)	, ( )	
	Alphabetical Orderi					Current Balance
te	Name & Address of Ven	dor of Goods or Services R	Received But Not Pa	aid For		Owed by You
. Curre	nt Balance of Outstanding U	npaid Bills/Advance of Cre	dit: (Transfer this	amount to Line 17)	)	\$ -7-
	reasurer is to sign this state notations on Schedules B	tement ONLY IF INDEPE	NDENT EXPENDIT	URES WERE MAD		··
(Make INDE I, (Prir candi	PENDENT EXPENDITURE:  nt Name)  dates and reported in this re	SWORN STATEMENT	, hereby certify to	hat all independent or expressed or in	nplied consent of,	or in cooperation
(Make INDE I, (Prir candi or in	PENDENT EXPENDITURE:	SWORN STATEMENT	, hereby certify to	or expressed or in	nplied consent of, ommittee or agent	or in coopera