CAMPAIGN FINANCE REPORT OF RECEIPTS AND EXPENDITURES

As required by the Henri ALL INFORMATION ON THIS REPORT IS PUBLIC.	epin County Financial Disclosure Law: Minnesota St TYPE OR PRINT IN BLACK INK.	atutes 383B.041-383B.058 RETAIN A COPY OF THIS REPORT	FOR YOUR FILES
DIANE HOFSTEDE FOR CITY COUNCIL			. 511 100111 12201
(Name of Committee or Fund) 2. DOUG DAVIS, TREASURER		Tour Hofe @ Puratsola	Cam
(Treasurer's Name)		Tony Hofs @ CUCN+Sale (E-mail Address)	, (01)
610 RAMSEY ST NE MINNEAPOLIS MN 5541 (Treasurer's Mailing Address for Committee Busine		Received by Henne	pin Co unty
•	•	Taxpayer Serv	vices
4. Treasurer's Daytime Phone Number: (612) 789-	"	FED () 0, 20	200
5. Li Change in Committee or Officer's Name, Addr		ment of Organization*) FEB 0 0 20	JU/
6. U No activity since last Report. (Insert Beginning		Log UB	/
6a. No activity with 383B.041058 candidates, th	, , , ,	applicable) DM 1-3\707 DFL	
7. Termination of Committee - All debts must be p		100. Termination of committee registration.	
If your committee is a state committee, please committee. 8. 2006 ANNUAL REPORT DUE Wednesd	tay, January 31, 2007		
REPORTING PERIOD: (check one)	247, 04.1447 01, 2001	· · · · · · · · · · · · · · · · · · ·	
2006 Candidates on the ballot			
And Political Funds or Committees	Erom: 10/25/2006	Through: 12/31/2006	
Candidates NOT on the ballot in 200	<u>06</u> : From: 1/1/2006	Through: 12/31/2006	
O DECINING CACLIDAL ANCE THE DEPORT.	\$8.185.27		
9. BEGINNING CASH BALANCE THIS REPORT:	(Insert Ending Cash Balance from last report	-	
COLUMN A		,	
Activity Reporter this year, In previous reporting periods.	COLUMN B ACTIVITY IN THIS REPORTING PERIOD	COLUMN C A + B =Total Activity for This Calend	lar Voor
	ACTIVITIES REPORTED TO A A A		_
10. ADDITIONS: 137 30 8	+\$ 7610=	\$ 99.093 2 . 5	B7610.00
(Column C, Line 10 from Last Reporting period.)	(Insert amount from line 25)	(Insert total of line 10, columns A + B)	
11. SUBTRACTIONS: SIB (7)	11-254	100 001/14	665354
(Column C, Line 11 from Last Reporting period.)	-\$ 665354 (Insert amount from line 34)	. <u> </u>	<u> </u>
(Column C, Line 11 noin East Reporting period.)	041/173	(Insert total of line 11, columns A + B)	2-25
12. ENDING CASH BALANCE THIS REPORT:	(Line 9 + line 10(column B) - line 11(column	n P)	₀ 0
		H 0)	
SUMMARY OF IN-KIND DONATIONS & OUTSTANDING			
COLUMN AActivity Reported on Last Report	COLUMN B ACTIVITY IN THIS REPORTING PERIOD	COLUMN C A + B =Total Activity for This Calend	or Veor
13. In-Kind Donations Received:	MOTOR IN THIS REPORT IN THE PROPERTY OF THE PR	A S - I CLAP A CLIFTLY TO THIS CALCING	ai i cai
s -0-	+s - O -	s - 0 -	
(Column C, Line 13 from Last Reporting period.)	(Insert total from line 36)	(Insert total of line 13, columns A + B)	
14. Goods/Services Given to Others:			
<u> </u>	s — O —	s - 0 -	
(Column C, Line 14 from Last Reporting period.)	(Insert total from line 39)	(Insert total of line 14, columns A + B)	
15. Current Balance of Outstanding Loans Receiv	able (loaned to others)>	\$ — 💍 (Insert total Current Balance from line	45)
		- · · · · · · · · · · · · · · · · · · ·	
SUMMARY OF OUTSTANDING DEBT:16. Current Balance of Outstanding Loans Payable (le	oaned to you)>	\$ 61, 935 34	
(Amount from Last Report \$61,955.24)	• ,	(Insert total Current Balance from line	42)
17. Current Balance of Outstanding Unpaid Bills/Adva	nce of Credit>	\$ -0-	
(Amount from Last Report: \$0.00)		(Insert total Amount Owed from line 46	
 CERTIFICATION: Any person who signs and certifies required information is quitty of a gross misdemeanor. 	to be true a report or statement which the personal	on knows contains false information or who kno	wingly omits
required information is guitty of a gross misdemeanor. I. (Print Name) Dov3! 15 C Dav18	, CERTIFY THAT THIS REPOR	T IS COMPLETE, TRUE AND CORRECT.	
SIGNATURE OF TREASURER: Douglas C	Pavis	DATE: Jan. 31 07	
, ,	FILE THIS REPORT WITH:	γ	

TAXPAYER SERVICES DEPARTMENT, ELECTIONS DIVISION • A-600 GOVERNMENT CENTER, MINNEAPOLIS, MN 55487-0060 • (612)596-7152

RECEIPT AND EXPENDITURES WORKSHE		IOD ONLY
NAME OF COMMITTEE OR FUND: Diane Hay	Lotedy for City Council	DATE: 1/31/07
ADDITIONS: (Income)	J () .	
19. Total ITEMIZED Contributions:	\$ — O — (Insert total from line 35)	
20. Total NON-ITEMIZED Contributions:	s \$7610 €	\$ 7610° (Subtotal: lines 19 + 20)
21. Income from bank dividends, interest, etc:	s - 0 -	
22. New Loans Payable (loaned to you):	(Insert total from line 40)	
23. New Repayments on Loans Receivable: (loaned to others/repaid to you)	\$	
24. Other:	s - 0 -	\$ - O - (Subtotal: lines 21+22+23+24)
25. TOTAL INCOME:	\$ 76/0.02 (TOTAL lines 19 through 24. Transi	er this amount to Line 10, Column B.)
SUBTRACTIONS: (Expenditures)		
26. Total ITEMIZED Contributions to Others:	\$	
27. Total NON-ITEMIZED Contributions to Others:	<u>s - 0 - </u>	\$
28. Total ITEMIZED Operating Expenditures:	\$ 6403 10 (Insert total from line 37)	
29. Total NON-ITEMIZED Operating Expenditures:	\$ 50 ⁴⁴	\$ 645354 (Subtotal: Lines 28 + 29)
30. Bank service charges, etc., paid by you:	\$ 200°°	
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:	s — O —	\$ 2000 °C (Subtotal: lines 30+31+32+33)
34. TOTAL EXPENDITURES:	\$ 665354 (Total lines 26 through 33. Transfer	this amount to Line 11, Column B.)

the line prov	portant information: Addresses sub- ounty Elections Division. As a conve vided if you do not want the address of dividences and one without.	inience. Hennebin County ai	ISO AISDIAVS SCHAAIIIA A AN th	a Hannanin County	wah sita Dianca s	Shook the have and in	IALAT Aba Ea
SCHEDU	LE A: INCOME FROM CAS	H (MONETARY) CON	ITRIBUTIONS and IN-I	KIND DONATIO	ONS		
NAME OF	COMMITTEE OR FUND: Deane	. Hofotede for	CityComil			ATE: <u>1/31/07</u>	
(**In the case government,	close the date and amount of each mon mmittee or fund that made the monetar e of a contributor who is self-employed, you must list that contributor's occupation	y contribution or Donation in K that is, does not derive earned on.)	tind, and the employer of the ind d income as owner, partner, or e	lividual contributor.			
	ds must itemize contributions of member a typed or computer-generated list, all i						
	a typed or computer-generated list, all t	tems must be in the same ord	er as they appear on Schedule /	A. Attach addition	nal pages as neces	sary. ons here for the	T
					current report		
				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
	1/1			111	111	Y/ A	1//
	// //			1/14	1114	NA	///
<u></u>							
					· · · · · · · · · · · · · · · · · · ·	 	
						 	<u> </u>
				-			
							-
·							
Subtoto	UTEMIZED Manadan Contribution					-	
Subtotal ITEMIZED Monetary Contributions received this period: \$ - 0 -						4	
Subtotal ITEMIZED Monetary Contributions received this period listed on previous page: \$ -0 - 35. TOTAL ITEMIZED CONTRIBUTIONS RECEIVED THIS PERIOD: (Transfer this amount to Line 19) \$ -0 -					-		
	TO THE TOTAL CONTROL OF THE CONTROL	PENTED THIS PERIOD. (11	ansier this amount to Line	19)	\$ _0 -	_	
Subtotal ITEMIZED In-Kind Donations received this period:					\$ -0-		
	I ITEMIZED In-Kind Donations rece		revious page:			\$ - 0 -	
	I NON-ITEMIZED In-Kind Donation					\$ _ 0	
36. TOTAL IN-KIND DONATIONS RECEIVED THIS PERIOD: (Transfer this amount to Line 13, Column B)					\$_0-		

SCHEDULE B: OPERATING EXPENDITURES and CONTRIBUTIONS MADE TO OTHER COMMITTEES

	Whatstede for City Council			D/	ATE: 1/31/0	7
You must disexcess of \$1	sclose the name and address of each individual, business or co 100 within the year, and the amount, date and specific purpose	mmittee to whom expendituon of the expendituon	ures/contributions			
If you submi	t a typed or computer-generated list, all items must be in the sa	me order as they appear or	n Schedule B.			
Attach additi	ional pages as necessary.					
				current reporti	List expenditures here for the current reporting period	
	ALPHABETICAL ORDER!		COLUMN A	COLUMN B	COLUMN B1	COLUMN C
Date Paid	Vendor or Recipient Committee Name and Address	Purpose for Expenditure	Previous Total For This Year	Operating Expenditures	Contributions to Others	Total to Source Year to Date
4/26/06	ambarador Press Mols, MN 55411	Printing	101 ms real	489 º	to Others	real to Date
2/10/06	Fiven Chida Molo MN 55421	accounting Desiries		15000		
5/22/06	SBLT Parade Mpis MN 55467	Parole tel		1650		-
5)14/06	Lavender Media Mais, MN 65407			93510		
7/12/06	Mpls Labor Review Mo15 MN55414			32000		,
3/31/06	N.E. Chamber of Comm Mois MN 55418			/75∞		
12/30/06	NORTH/NORTHEAST Pleas ETRI Park News =			-		
	U.S. BANK.	Ada		367800		
11/16/06	Take action MN Mp15 MN 55/04	Ad		17500		
4/20/06	U.SPostmaster Mp15, MN 55418	Postage		31600		
Subtota	ITEMIZED Operating Expenditures this period:	U		\$ 640310	1	
	ITEMIZED Operating Expenditures this period listed on previous	us page:		8		
	TEMIZED OPERATING EXPENDITURES THIS PERIOD: (Tra		28)	\$ 64030		
Subtotal	ITEMIZED Contributions to Others this period:				\$ -0-	1
	ITEMIZED Contributions to Others this period listed on previou	us page:			\$ -0 -	1
	TEMIZED CONTRIBUTIONS TO OTHERS THIS PERIOD: (Tr.		9 26)		\$ -0 -	1
				·		ļ

SCHEDU	LES C, D, E, and F (Al	tach additional page	s if necessary fo	or Schedules C	, D, E, and F)	
NAME OF (COMMITTEE OR FUND:	rane Hofstede of	or City Coun	DATE:	1/31/07	<u>,</u>
SCHEDULE You must di together wit	E C: GOODS AND SERVICE is close the total value of go the three goods and services, in the goods or services in the goods or services.	ES GIVEN TO OTHERS ods and services given to s in excess of \$100 within	another committee	as well as any other	envise non-itemizat	olo cach that
	,				s + Cash = \$100+	
-	Alphabetical Orderl		COLUMN A	COLUMN B	column B1	COLUMN C
Date	Name & Address of Recipient	Description of Goods and Services	Previous Total for This Year	Cash Given	Value of Goods & Services	Recipient Total Year to Date
	1//1					
	14/4					
39. Total G	oods and Services given in	this period: (Transfer thi	s amount to Line 1	4, Column B)	\$	
SCHEDULE	D: NOTES AND LOANS	PAYABLE (Loaned to Yo	u)			-
		-	1		r Repaid by You in	<u> </u>
	Alphobatical Order		COLUMNIA		orting Period	
	Alphabetical Orderl		COLUMN A1 Loan Balance	Add New Loan	COLUMN B1 Subtract Loan	COLUMN C1 Current Balance
Date	Name, Address & Emplo		Last Report	\$ Received	\$ Repaid	Owed by You
	Diano Hots	ede	61,955 24	-0-	-0-	6/95524
40 Total N	ew Loans Pavable this peri	od: (Transfer this amoun	t to Line 22)	¢ ^-		
40. Total New Loans Payable this period: (Transfer this amount to Line 22) \$ -0- 41. Total Repayment of Loans Payable this period: (Transfer this amount to Line 31) \$ -0-						
	Balance of Outstanding Lo					\$ 6/955 34
SCHEDULE	E: NOTES AND LOANS I	RECEIVABLE (Loaned by	/ You)			
					r Repaid to You in orting Period	
	Alphabetical Order!		COLUMN A1	COLUMN B	COLUMN B1	COLUMN C1
Date	Nama Addraga 9 Emplo	use of Doniniont of Lan-	Loan Balance	Add New Loan	Subtract Loan	Current Balance
Date	Name, Address & Emplo	yer of Recipient of Loan	Last Report	\$ Given	\$ Repaid	Owed to You
	H N/A					
43. Total Ne	ew Loans Receivable this p	eriod: (Transfer this amo	unt to Line 32)	\$		
44. Total Repayment of Loans Receivable this period: (Transfer this amount to Line 23)						-
45. Current	Balance of Outstanding Lo	ans Receivable: (Transfe	r this amount to Li	ne 15)		\$
SCHEDULE	F: UNPAID BILLS/ADVAI	NCE OF CREDIT (Items o	r services received	1 but not paid)		
Alphabetical Orderi					Current Balance	
Date Name & Address of Vendor of Goods or Services Received But Not Paid For					Owed by You	
	N/A					
46. Current Balance of Outstanding Unpaid Bills/Advance of Credit: (Transfer this amount to Line 17) \$						
	easurer is to sign this state					[\$]
(Make n	notations on Schedules B or	C where Independent Ex	penditures are itemi	zed.)		
INDEPE						
ا, (Print ۱)	NOENT EXPENDITURE:	DAVIS	, hereby certify tha	at all independent e	expenditures made	on behalf of other
or in co	Name) <u>DOV gla5</u> tes and reported in this rep oncert with, or at the requ	ort were made WITHOUT est or suggestion of any	the authorization of	or expressed or im ate's campaign co	iplied consent of, mmittee or agent.	or in cooperation
or in co	vame) <u>Dov g a 5 C</u> tes and reported in this rep	ort were made WITHOUT est or suggestion of any	the authorization of	or expressed or im ate's campaign co	iplied consent of	or in cooperation