## 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. **SMITHRUD FOR WARD 5** (Name of Committee or Fund) ROGER SMITHRUD (E-mail Address) (Treasurer's Name) 2357 JAMES AVE N MINNEAPOLIS MN 55411 (Treasurer's Mailing Address for Committee Business) Treasurer's Daytime Phone Number: (612) 767-1990 Change in Committee or Officer's Name, Address, Phone. (Attach new "Registration & Statement of Organization") No activity since last Report. (Insert Beginning and Ending Balance at #9 & #12 below) 6a. 🗌 No activity with 383B.041-.058 candidates, this reporting period. (Complete lines #9-#12 as applicable) Termination of Committee - All debts must be paid and Ending Balance can be no more than \$100. Termination of committee registration. If your committee is a state committee, please contact our office regarding termination. DUE Friday, January 31st, 2014 2013 ANNUAL REPORT Received by Hennepin County **REPORTING PERIOD: (check one)** Taxpavelr Services 2013 Candidates on the ballot **And Political Funds or Committees:** From: 10/24/2012 Through: 12/31/2012 Through: 12/31/2012 Candidates NOT on the ballot in 2013: From: 1/1/2012 **BEGINNING CASH BALANCE THIS REPORT:** Log \_ (insert Ending Cash Balance from last report) PM**COLUMN A COLUMN C** Activity Reported this year, **COLUMN B ACTIVITY IN THIS REPORTING PERIOD** A + B =Total Activity for This Calendar Year In previous reporting periods 10. ADDITIONS: .00 +\$ (Column C, Line 10 from Last Reporting period.) (Insert amount from line 25) (Insert total of line 10, columns A + B) 11. SUBTRACTIONS: (Column C, Line 11 from Last Reporting period.) (Insert amount from line 34) (Insert total of line 11, columns A + B) 12. ENDING CASH BALANCE THIS REPORT: (Line 9 + line 10(column B) - line 11(column B) SUMMARY OF IN-KIND DONATIONS & OUTSTANDING LOANS RECEIVABLE: COLUMN A COLUMN B COLUMN C + B =Total Activity for This Calendar Year Activity Reported on Last Report **ACTIVITY IN THIS REPORTING PERIOD** 13. In-Kind Donations Received: (Insert total of line 13, columns A + B) (Column C, Line 13 from Last Reporting period.) 14. Goods/Services Given to Others: (Insert total of line 14, columns A + B) (Column C, Line 14 from Last Reporting period.) (Insert total from line 39) 15. Current Balance of Outstanding Loans Receivable (loaned to others)......> (Insert total Current Balance from line 45) SUMMARY OF OUTSTANDING DEBT: 16. Current Balance of Outstanding Loans Payable (loaned to you)......> (Insert total Current Balance from line 42) (Amount from Last Report: \$ .00 ) 17. Current Balance of Outstanding Unpaid Bills/Advance of Credit.....> (Insert total Amount Owed from line 46) (Amount from Last Report: \$ .00 CERTIFICATION: Any person who signs and certifies to be true a report or statement which the person knows contains false information or who knowingly omits 55. required information is guilty of a gross misdemeanor. CERTIFY THAT THIS REPORT IS COMPLETE, TRUE AND CORRECT. I, (Print Name) ROGER SMITHRUD SIGNATURE OF TREASURER DATE:

FILE THIS REPORT WITH:

Taxpayer Services Department, Elections Division • PSL 012 Government Center, MINNEAPOLIS, MN 55487-0012 • (612)596-7152

NA	ME OF COMMITTEE OR FUND: $Sm/ThR$	ed forward 5	DATE: FCB-7-2014
ΑE	DITIONS: (Income)		
19.	. Total ITEMIZED Contributions:	(Insert total from line 35)	
20.	Total NON-ITEMIZED Contributions:	<b>\$</b>	(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	BTRACTIONS: (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:	\$ (Insert total from line 37)	
29.	Total NON-ITEMIZED Operating Expenditures:	\$	\$
30.	Bank service charges, etc., paid by you:	s <u>-0</u>	
31.	New Repayments on Loans Payable: (loaned to you/repaid to lender)	\$ (Insert total from line 41)	
<b>32</b> .	New Loans Receivable (loaned to others):	\$ (Insert total from line 43)	
33.	Other:	\$	\$ — Ø — (Subtotal: lines 30+31+32+33)
34.	TOTAL EXPENDITURES:	\$ Cotal lines 26 through 33. Trans	sfer this amount to Line 11, Column B.)

RECEIPT AND EXPENDITURES WORKSHEET FOR THIS REPORTING PERIOD ONLY

Hennepin the line p	important miorination. Addresses so County Elections Division. As a co rovided if you do not want the addre ors' addresses and one without.	nvenience, Hennepin County	also displays Schedule A on the	Hennepin County	web site. Please	theck the boy and in	itial the form on
SCHEE	DULE A: INCOME FROM CA	ASH (MONETARY) CO	NTRIBUTIONS and IN-	CIND DONATIO	ONS		
NAME O	F COMMITTEE OR FUND:	MITHRUSE F	er wards		D	ATE: FCB	-7-2019
You must individual,	disclose the date and amount of each of committee or fund that made the mone	monetary contribution or donation etary contribution or Donation In	on In Kind within the year that, in a Kind, and the employer of the ind	ggregate from any co ividual contributor.	ontributor, exceeds	\$100 *, the name and	address of the
governme	ase of a contributor who is self-employent, you must list that contributor's occu	pation.)		mployee of a corpora	ition, partnership, o	r other entity, including	g a branch of
	Funds must itemize contributions of me mit a typed or computer-generated list,	. 55 5		A Attach addition	nal nages as neces	ean	
ii you sub	The a typed of compater-generated not,		act to they appear on concease.	T. Attest addition	List contributions here for the current reporting period		
				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
	A						
				-			
Subtotal ITEMIZED Monetary Contributions received this period:  Subtotal ITEMIZED Monetary Contributions received this period listed on previous page:  \$						7	
35. TOT	35. TOTAL ITEMIZED CONTRIBUTIONS RECEIVED THIS PERIOD: (Transfer this amount to Line 19) \$						
Subtotal ITEMIZED In-Kind Donations received this period:						\$	7
Sub	total ITEMIZED In-Kind Donations	received this period listed o	n previous page:			\$	]
	total NON-ITEMIZED In-Kind Dona					\$	
36. TO	AL IN-KIND DONATIONS RECEI	VED THIS PERIOD: (Trans	fer this amount to Line 13, C	olumn B)		\$	

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

	COMMITTEE OR FUND: SMITHROOL FOR WOR -	15		D.	ATE: FCB~	2-14
You must di excess of \$	isclose the name and address of each individual, business o 100 within the year, and the amount, date and specific purpo	r committee to whom expendituse of the expenditure.		have been made,	, in an aggregate a	mount in
If you subm	it a typed or computer-generated list, all items must be in the	e same order as they appear or	n Schedule B			
Attach addir	tional pages as necessary.					
				List expenditures here for the current reporting period		
			COLUMN A	COLUMN B	COLUMN B1	COLUMN C
Date Paid	ALPHABETICAL ORDER! 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
	A					
	1 1 0 10 0		<u> </u>			
	1000					
		·				
Subtot	tal ITEMIZED Operating Expenditures this period:			\$		
Subtotal ITEMIZED Operating Expenditures this period.  Subtotal ITEMIZED Operating Expenditures this period listed on previous page:						
37. TOTAL ITEMIZED OPERATING EXPENDITURES THIS PERIOD: (Transfer this amount to Line 28)						
37. IVIA	LITEMIALD OF LIVERING LAST CO. T.	•		<u> </u>		

\$

Subtotal ITEMIZED Contributions to Others this period:

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)

SCHEDU	JLES C, D, E, and F (A	ttach additional pages	if necessary for	or Schedules C	, D, E, and F)	2014
SCHEDUL	E C: GOODS AND SERVICE disclose the total value of go	CES GIVEN TO OTHERS			,	
together w	rith the goods and services, cription of the goods or servi	is in excess of \$100 within t	the year. You must	t also disclose the o	late, name and add	ress of the recipien
				Goods & Service	s + Cash = \$100+ irrent Period	
	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
		Nons				
20 Total	Goods and Services given in	this period: /Transfer this	amount to Line 1	(4 Column B)	\$	
39. 10tal	Goods and Services given in	n this period. (Transfer dis	amount to Line	14, Column D)	ΙΨ	l
SCHEDUL	E D: NOTES AND LOANS	PAYABLE (Loaned to Yo	u)			
				Loans Given to o	r Repaid by You in	
		<u> </u>	0011115	Current Rep	porting Period	COLUMN C1
<u>.</u>	Alphabetical Order!		COLUMN A1 Loan Balance	Add New Loan	Subtract Loan	Current Balance
Date	Name, Address & Emplo	over of Lender	Last Report	\$ Received	\$ Repaid	Owed by You
		fron-e				
		<u>/</u>	14-11 00	<u> </u>		
40. Total 41. Total	New Loans Payable this per Repayment of Loans Payab	lod: (Transfer this amoun	s amount to line	<u>  \$</u> 31)	s	
42. Curre	nt Balance of Outstanding L	oans Payable: (Transfer th	is amount to Line	16)		\$
SCHEDUL	E E: NOTES AND LOANS	RECEIVABLE (Loaned by	You)			
· -				Loans Given by Current Rep	0011111101	
· ·	Alphabetical Order!		COLUMN A1  Loan Balance	Add New Loan	Subtract Loan	COLUMN C1 Current Balance
Date	Name, Address & Emplo	oyer of Recipient of Loan	Last Report	\$ Given	\$ Repaid	Owed to You
		Nove				
						·
43. Total	New Loans Receivable this	period: (Transfer this amo	unt to Line 32)	\$ 22)		
44. <u>Total</u>	Repayment of Loans Receivers of Balance of Outstanding L	/able this period: (Transfer	r this amount to L	ine 15)	Ψ	\$
	E F: UNPAID BILLS/ADVA	<del></del>				
Date	Alphabetical Order! Name & Address of Ven	ndor of Goods or Services F	Received But Not P	aid For		Current Balance Owed by You
	1 Menc					
<u> </u>		10000			·	
40 0::=	46. Current Balance of Outstanding Unpaid Bills/Advance of Credit: (Transfer this amount to Line 17)					S
47. <b>The T</b> (Make	Freasurer is to sign this state notations on Schedules B	atement ONLY IF INDEPE or C where Independent Ex	NDENT EXPENDIT	TURES WERE MAI		
l, (Prir candi	PENDENT EXPENDITURE:  nt Name)	o <i>M/ThRUOL</i> Poort were made <b>WITHOUT</b>	, hereby certify to the authorization candidate, candi	date's campaign (	committee or agen	t.
Signs	nture of Treasurer	chipped	_	Da	ate FEB-	7-2019