CAMPAIGN FINANCE REPORT OF RECEIPTS AND EXPENDITURES As required by the Hennepin County Financial Disclosure Law: Minnesota Statutes 383B.041-383B.058 TYPE OR PRINT IN BLACK INK. RETAIN A COPY OF THIS REPORT FOR YOUR FILES. BARB JOHNSON VOLUNTEER COMMITTEE(WARD 4) (Name of Committee or Fund) MARY BABCOCK, TREASURER (E-mail Address) (Treasurer's Name) 4318 XERXES AVE N MINNEAPOLIS MN 55412 (Treasurer's Mailing Address for Committee Business) Received by Hennepin County **Taxpayer Services** Treasurer's Daytime Phone Number: (612) 522-7873 Change in Committee or Officer's Name, Address, Phone. (Attach new "Registration & Statement of Organization") 3 2005 NOV No activity since last Report. (Insert Beginning and Ending Balance at #9 & #12 below) No activity with 383.041-.058 candidates, this reporting period. (Complete lines #9-#12 as applicable) Log 6a. 🗌 Termination of Committee - All debts must be paid and Ending Balance can be no more than \$100 DEL REPORTING PERIOD: TYPE OF REPORT: **FILING DATE:** Through: 10/25/2005 PRE-GENERAL: 11/1/2005 From: 8/31/2005 \$8,<u>413</u>.22 **BEGINNING CASH BALANCE THIS REPORT:** (Insert Ending Cash Balance from Pre-Primary report) **COLUMN A** COLUMN B COLUMN C **ACTIVITY IN THIS REPORTING PERIOD** A + B =Total Activity for This Calendar Year Activity Reported on Pre-Primary Report 10. ADDITIONS: 9477.70 \$2,900,00 (Line 10 from Pre-Primary Report this year.) (Insert amount from line 25) 11. SUBTRACTIONS: 7211.06 12818.06 \$5.607.00 (Line 11 from Pre-Primary Report this year.) 10879.95 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 C COLUMN A COLUMN B** ACTIVITY IN THIS REPORTING PERIOD A + B = Total Activity for This Calendar Year Activity Reported on Pre-Primary Report 13. In-Kind Donations Received: 10 O-100 (Line 13 from Pre-Primary Report this year.) (Insert total from line 36) (Insert total of line 13, columns A + B) 14. Goods/Services Given to Others: (Insert total of line 14, columns A + B) (Line 14 from Pre-Primary Report this year.) + 00,00 15. Current Balance of Outstanding Loans Receivable (loaned to others)......> (Insert total Current Balance from line 45) SUMMARY OF OUTSTANDING DEBT: -0-16. Current Balance of Outstanding Loans Payable (loaned to you)> (Insert total Current Balance from line 42) (Amount from Last Report: \$0.00) - 0 17. Current Balance of Outstanding Unpaid Bills/Advance of Credit.....> (Insert total Amount Owed from line 46) (Amount from Last Report: \$0.00) 18. 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 required information is builty of a gross misdemeanor.

FILE THIS REPORT WITH:

CERTIFY THAT THIS REPORT IS COMPLETE, TRUE AND CORRECT.

i, (Print Name) _ Mary

Babcock

	CEIPT AND EXPENDITURES WORKSHE		ERIOD ONLY
NA	ME OF COMMITTEE OR FUND: BARB	lohnson Volunteer	DATE: 11/1/05
ΑD	DITIONS: (Income)	Committe	2
19.	Total ITEMIZED Contributions:	\$ 4975.53 (Insert total from line 35)	
20.	Total NON-ITEMIZED Contributions:	\$ 4702.00	\$ \(\frac{702.00}{0}\) (Subtotal: lines 19 + 20)
21.	Income from bank dividends, interest, etc:	\$ -0-	
22.	New Loans Payable (loaned to you):	\$	
23.	New Repayments on Loans Receivable: (loaned to others/repaid to you)	(Insert total from line 44)	
24. ·	Other: O	\$ -0-	\$
25.	TOTAL INCOME:	\$ 9677.75 (TOTAL lines 19 through 24. Tra	nsfer 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:	\$	\$ 700,00 (Subtotal: lines 26 + 27)
28.	Total ITEMIZED Operating Expenditures:	\$ 5550.00 (Insert total from line 37)	
29.	Total NON-ITEMIZED Operating Expenditures:	\$ 1661.06	\$ 72 11 . o 6 (Subtotal: Lines 28 + 29)
30.	Bank service charges, etc., paid by you:	\$ - 0 -	
	New Repayments on Loans Payable: (loaned to you/repaid to lender)	\$ - 0 - (Insert total from line 41)	
32.	New Loans Receivable (loaned to others):	\$ 0 (Insert total from line 43)	
33.	Other:	\$ -0 -	\$ (Subtotal: lines 30+31+32+33)
34.	TOTAL EXPENDITURES:	\$ 73-11.0 C	er this amount to Line 11. Column B.)

			•				
the line p	Important information: Addresses sub- County Elections Division. As a conve- rovided if you do not want the address ors' addresses and one without.	mitted on Schedule A are puble enience, Hennepin County also of contributors to be displayed	ic data pursuant to the Minro displays Schedule A on the don the don the website.	nesota Government e Hennepin County If selected, please	Data Practices Act web site. Please of submit two version	t. This form is retair theck the box and in ons of Schedule A, c	ned on file in the litial the form on one with
SCHE	DULE A: INCOME FROM CAS	H (MONETARY) CONT	RIBUTIONS and IN-I	KIND DONATIC)NS	1	
NAME O	F COMMITTEE OR FUND: BAR	B Johnson Vale	etelr Com	ritte e		ATE: 11/)/6	5
You must individual, (**In the case)	disclose the date and amount of each mor committee or fund that made the monetar ase of a contributor who is self-employed.	netary contribution or donation in y contribution or Donation in Kin	Kind within the year that, in a	ggregate from any co	entributor, exceeds	\$100 *, the name and	address of the
				mployee of a corpora	tion, partnership, or	r other entity, including	g a branch of
If you sub	unds must itemize contributions of member mit a typed or computer-generated list, all	ers that, in aggregate in the year items must be in the same order	, exceed \$50.	A A44- 1 1999			
		THE SAME OIGH	as triey appear on Schedule ,	A. Attach addition	nal pages as neces	sary. ons here for the	T
		<u> </u>			current report		1
		 		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
9/21	Johnson	Dobbyist			300.10		300.00
1915	Facyle + Bener	Law Film			300.00		300.00
9/21	Ross Fatercorn Stephent Jenniferfaen	developer			300.00		300.00
9/21	<u></u>	3 developer			300.00		300,0
9/21	Deane Johnson	husband la Hory	in		150,00	1 1 1	150.00
7/21	Som i Sylvia Kaplan	a Horney	7		2000	 	
9/21	faul Klodt	d endance		 			200.00
9/21	Laborers Distrect Coun	Lobor			303.00		800.00
9/21	Llorard vevine				300.00		300,00
9/21	KellyLindgunt	Lobbyist	 		 		2000
				<u> </u>	300.00	<u> </u>	300,00
	otal ITEMIZED Monetary Contribution		,	 	\$		
Subt	otal ITEMIZED Monetary Contribution	is received this period listed	on previous page:		\$		·
35. 1017	AL ITEMIZED CONTRIBUTIONS REC	CEIVED THIS PERIOD: (Tra	nsfer this amount to Line	e 19)	\$;
Subt	otal ITEMIZED In-Kind Donations rec	eived this period:					· 7
	otal ITEMIZED In-Kind Donations rec		evious page:			\$ \$	
Subt	otal NON-ITEMIZED In-Kind Donation	ns Received This Period:		<u> </u>		\$	
	AL IN-KIND DONATIONS RECEIVED	THIS PERIOD: (Transfer the	nis amount to Line 13, Co	olumn B)		\$	
CF Report	Page 3 rev 8 05	•	Page 3				

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Page 3

Hennepin the line pr contributo	mportant information: Addresses subn County Elections Division. As a conver ovided if you do not want the address overs' addresses and one without.	nitted on Schedule A are pub nience, Hennepin County also if contributors to be displayed	lic data pursuant to the Minn o displays Schedule A on the d on the website.	esota Government Hennepin County If selected, please	Data Practices Act web site. Please c submit two versio	. This form is retain heck the box and in ons of Schedule A, o	ed on file in the itial the form on ne with
	ULE A: INCOME FROM CASH						
NAME OF	COMMITTEE OR FUND: Bor	- Johnson Val		IND DONATIO		1.1	<u>, </u>
You must of Individual, if the care government *Political F	lisclose the date and amount of each mon- committee or fund that made the monetary use of a contributor who is self-employed, t at, you must list that contributor's occupation unds must itemize contributions of membe	etary contribution or donation in contribution or Donation in Kin hat is, does not derive earned in n.)	Kind within the year that, in ag d, and the employer of the indi ncome as owner, partner, or en	ggregate from any covidual contributor. Inployee of a corpora	ontributor, exceeds \$	ATE: //// 6	address of the
. , , , , , , , , , , , , , , , , , , ,	nit a typed or computer-generated list, all it	ems must be in the same order	as they appear on Schedule A	Attach addition	nal pages as necess	ary.	
 -					List contribution current reporti	ons here for the	
				COLUMN A	COLUMN B	COLUMN B1	COLUMN C
Date Rovd. 9/21	ALPHABETICAL ORDER! Contributor Name & Address Ellen me Ennis	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
	mina Copalis humain par	borking		100.00	25.00		125.07
115	Engloyers humicapol Engloyers Reticementalism manageris Volica Reget association				303.00		301.00
10/1:	MEA Political Fund	60601			300.00		300.50
10/20	mippesota assoc.	Labor			300.00		303.00
0/25	minn Council of	Rotoss. assoc.			200.00		203.00
10/20	HERE	Lobor		100.00	10000		200.00
10/15 10/21	Pipe Filters Local 537 Blit is action for 8 Blian Rice	Co 600			200.00		200,00
7/21	John Julee Rimarcik	attorny			150.00		150.00
9/21	John Stanoch	RESTRAINTOU			250.10		250.00
		CEO/pulst.	L		203.00		200,00
Subto	otal ITEMIZED Monetary Contribution	s received this period:			T &	7	
Subto	otal ITEMIZED Monetary Contribution:	received this period listed	on previous page:		\$	4	
35. TOTA	AL ITEMIZED CONTRIBUTIONS REC	EIVED THIS PERIOD: (Tra	nsfer this amount to Line	19)	\$	-\frac{1}{2}	. :
Subto	otal ITEMIZED In-Kind Donations rece	ived this period:		-	· · · · · · · · · · · · · · · · · · ·	J 	
Subto	otal ITEMIZED In-Kind Donations rece	lived this period listed on pro	vious page:		<u> </u>	\$	
Subto	otal NON-ITEMIZED In-Kind Donation	s Received This Period:		<u> </u>		\$	
36. TOTA	L IN-KIND DONATIONS RECEIVED	THIS PERIOD: (Transfer t)	nis amount to Line 13 Col	umn B)		\$	• .
CF Report	Page 3 rev 8 05		Page 3			\$	

page 2013

Imp Hennepin Co the line prov contributors	portant information: Addresses subrounty Elections Division. As a conveiled if you do not want the address of addresses and one without.	mitted on Schedule A are publ mience, Hennepin County also of contributors to be displayed	lic data pursuant to the Minro o displays Schedule A on the d on the website. □	esota Government I Hennepin County v If selected, please	Data Practices Act veb site. Please cl submit two versio	This form is retain heck the box and in ns of Schedule A, o	ed on file in the itial the form on ne with
SCHEDU	LE A: INCOME FROM CASI	H (MONETARY) CONT	PIRUTIONS and IN I	CIND DONATIO	NO.		
NAME OF (COMMITTEE OR FUND: bars	o Johnson volu	ndo nons and in-	NIND DONATIO		ATE: 11/1/65	•
You must dis	close the date and amount of each	4			الت \$ ntributor_exceeds	100 * the name and	addrage of the
(""In the case government	e of a contributor who is self-employed, you must list that contributor's occupation	that is, does not derive earned in	ncome as owner, partner, or e	ividual contributor, mployee of a corporat	ion, partnership, or	other entity, including	a branch of
If you submit	ds must itemize contributions of member	ers that, in aggregate in the year	exceed \$50.				
J	a typed or computer-generated list, all i	items must be in the same order	as they appear on Schedule	A. Attach addition	al pages as necess	ary.	
					List contribution current reporti	ons here for the	
				COLUMN A	COLUMN B	COLUMN B1	COLUMN C
Date Rovd.	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
12/20	Goul Thatcher	Susmissmm			300.00	Turis Bottettory	300.00
· .							300.00
<u>.</u>						 	
			 				
•			 				
· · · · · ·			<u> </u>				
		<u> </u>			<u></u>		
-							
						 	
				 		 	
						 	
				<u> </u>		<u> </u>	
Subtota	al ITEMIZED Monetary Contribution	ns received this period:			\$ 4975.0		:
Subtota	al ITEMIZED Monetary Contribution	ns received this period listed	on previous page:		\$	<u>el</u>	•
35. TOTAL	ITEMIZED CONTRIBUTIONS RE	CEIVED THIS PERIOD: (Tra	ansfer this amount to Line	e 19)	\$ 4975.00	1	•
Subtota	al ITEMIZED In-Kind Donations rec	eived this pariod:					
	al ITEMIZED In-Kind Donations rec		ovious popul		<u></u>	\$-0-]
Subtota	NON-ITEMIZED In-Kind Donation	ns Received This Period	evious page:		-	\$-0-	
36. TOTAL	IN-KIND DONATIONS RECEIVED	THIS PERIOD: (Transfer t	his amount to I ine 13 Co	lump B)	; :	\$-6-	
	age 3 rev 8 05		Page 3			\$ -0 -	Jr. Barrier
•		· /	pa 863 of 3	•			8/15/05

SCHEDULE B: OPERATING EXPENDITURES and CONTRIBUTIONS MADE TO OTHER COMMITTEES

NAME OF COMMITTEE OR FUN	MITTEE OR ELIND.
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<i></i>		,
BARS Johnson	IIII	A 11.
JIMS VONNSON	_oolohizer	Comments of
,		

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		
	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
9/25 9/9	Cooperative Printing		1433.30	1909.96		3343.26
7/1	Impact marling. Dune Johnson			706.94		
			199.44	83.81		283.25
7/10	EnilyJohnson			T		203.25
9/2	morgaret Johnson		<u> </u>	130.00		
9/6 10/12	Office Bepot			149.52		
9/21	Paradise Craise			1883.28		
9/6/0/2	Postmoster		467.00	222.60		(60
9/10/10/2	Quest		, -, (, - 0	283.57		689.60
10/10	Star Tribunt		118.42	6032		178. 74

	Subtotal ITEMIZED Operating Expenditures this period:	8 - 1 - 1
	Subtotal ITEMIZED Operating Expenditures this period listed on previous page:	\$ 5550.00
;	37. TOTAL ITEMIZED OPERATING EXPENDITURES THIS PERIOD: (Transfer this amount to Line 28)	\$5550,00
-		1 42220.40 L

Subtotal ITEMIZED Contributions to Others this period:	
Subtotal ITEMIZED Contributions to Others this period listed on previous page:	3
TOTAL ITEMIZED CONTRIBUTIONS TO OTHERS THIS PERIOD: (Transfer this amount to Line 26)	
(Transfer this amount to Line 26)	\$

SCHEDULE B: OPERATING EXPENDITURES and CONTRIBUTIONS MADE TO OTHER COMMITTEES

You must d excess of \$	isclose the name and address of each individual, business or co 100 within the year, and the amount, date and specific purpose of	mmittee to whom expenditu	res/contributions	have been made,	in an aggregate a	mount in
Attach addi	it a typed or computer-generated list, all items must be in the satisficial pages as necessary.	me order as they appear or	Schedule B.			
				List expenditu current reporti	res here for the	
Date Paid	ALPHABETICAL ORDER! Vendor or Recipient Committee Name and Address	Purpose for Expenditure	COLUMN A Previous Total For This Year	COLUMN B Operating	COLUMN B1 Contributions	COLUMN C Total to Source
10/20	it on Hooker Volunteer Committee	- apode for experienting	roctrus rear	Expenditures	to Others	Year to Date
8 (30	Jelsemargia voiantele Committel				300.00	
<u> </u>						
				-		
·-						
Subtot	al ITEMIZED Operating Expenditures this period:			\$	1	<u> </u>
37. TOTAL	al ITEMIZED Operating Expenditures this period listed on previous ITEMIZED OPERATING EXPENDITURES THIS PERIOD: (Tr	ous page: ansfer this amount to Lin	e 28)	\$		
Subtot	al ITEMIZED Contributions to Others this period:				\$ 800.01,	
38. TOTAL	al ITEMIZED Contributions to Others this period fisted on previous ITEMIZED CONTRIBUTIONS TO OTHERS THIS PERIOD: (T	us page:			\$ 800.00	

20HEDO	LES C, D, E, and F (A)	tach additional page	s if necessary i	for Schedules (3, D, E, and F)	
NAME OF	COMMITTEE OR FUND: /	Barb Johnso	n Vakesta	CLY, DATE:	11/105	
			(4	multip		
	E C: GOODS AND SERVICE is close the total value of go			~		bla cach that
together wi	th the goods and services, i	s in excess of \$100 within	the year. You mus	st also disclose the	date, name and add	dress of the recipier
and a desc	ription of the goods or servi	ces given.		•		,
	1			Goods & Service	es + Cash = \$100+	,
			Ţ.		urrent Period	
	Alphabetical Order!		COLUMN A	COLUMN B	COLUMN B1	COLUMNIC
Data	Name & Address of	Description of	Previous Total	Out of the	Value of Goods	Recipient Total
Date	Recipient	Goods and Services	for This Year	Cash Given	& Services	Year to Date
•			ŀ	·		
39. Total G		this period: (Transfer this	s amount to Line 1	I4. Column B)	\$	<u> </u>
	* .			,		
SCHEDULE	ED: NOTES AND LOANS I	PAYABLE (Loaned to Yo	u)		·	
					r Repaid by You in porting Period	
	Alphabetical Order!		COLUMN A1	COLUMN B	COLUMN B1	COLUMN C1
Data	Nome Address 9 Emple		Loan Balance	Add New Loan	Subtract Loan	Current Balance
Date	Name, Address & Employ	Aet of religer	Last Report	\$ Received	\$ Repaid	Owed by You
						·
					1	
10: Total N	ew Loans Payable this perio	od: (Transfer this amount	t to Line 22)	\$		
11. Total R	epayment of Loans Payable	this period: (Transfer thi	s amount to Line	31)	\$	
	Balance of Outstanding Lo					\$
SCHEDIII E	E: NOTES AND LOANS R	ECEIVABLE /Loaned by	Vous			
JOI!LDULL	. E. NOTEO AND LOANS I	LOCITABLE (Louised by	· Vaj	• •		
•					r Repaid to You in	
	Alphabetical Order!		COLUMN A1	COLUMN B	orting Period COLUMN B1	COLUMN C1
	Alphabetical Orderi		Loan Balance	Add New Loan	Subtract Loan	Current Balance
ate	Name, Address & Employ	er of Recipient of Loan	Last Report	\$ Given	\$ Repaid	Owed to You
· · · · · · · · · · · · · · · · · · ·	,	· · · · · · · · · · · · · · · · · · ·				
	,					
3. Total Ne	ew Loans Receivable this pe	eriod: (Transfer this amou	unt to Line 32)	\$.	\$	·
	payment of Loans Receival Balance of Outstanding Loa				4	\$
0. 000	DESCRIPTION OF CONSTRUCTION OF ECO.	110 1 1000				,
CHEDULE	F: UNPAID BILLS/ADVAN	CE OF CREDIT (Items or	services received	l but not paid)		
	Alphabetical Order!	· · · · · · · · · · · · · · · · · · ·		 		Current Balance
ate	Name & Address of Vendo	or of Goods or Services Re	eceived But Not Pai	d For		Owed by You
	<u> </u>	V v				
				<u> </u>	•	
			,			
6. Current	Balance of Outstanding Unp	paid Bills/Advance of Credi	it: (Transfer this ar	mount to Line 17)		\$
	asurer is to sign this state otations on Schedules B or				≛.	
INDEPE	NDENT EXPENDITURE: S'	WORN STATEMENT	hereby certify the	t all independent e	kpenditures made o	n behalf of other
candidati	es and reported in this report neert with, or at the reques	rt were made WITHOUT the st or suggestion of any c	he authorization o	r expressed or im	plied consent of, o	or in cooperation
Sinnatura	e of Treasurer			. Date		
Cignatule				, ,		
		•		•		