CAMPAIGN FINANCE REPORT OF RECEIPTS AND EXPENDITURES As required by the Hennepin County Financial Disclosure Law: Minnesota Statutes 383B.041-383B.058 (Name of Committee or Fund (Treasurer's Mailing Address for Committee Business) Received by Hennepin County 612 673 2209 4. Treasurer's Daytime Phone Number: Taxpayer Services Change in Committee or Officer's Name, Address, Phone. (Attach new "Registration & Statement of Organization") FEB 0 4 2008 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. 8. 2007 ANNUAL REPORT DUE Thursday, January 31, 2008 **REPORTING PERIOD: (check one)** 2007 Candidates on the ballot And Political Funds or Committees: From: 10/24/2007 Through: 12/31/2007 Candidates NOT on the ballot in 2007: From: 1/1/2007 Through: 12/31/2007 BEGINNING CASH BALANCE THIS REPORT: (Insert Ending Cash Balance from last report) **COLUMN A COLUMN B** Activity Reported this year, COLUMN C **ACTIVITY IN THIS REPORTING PERIOD** In previous reporting periods 10. ADDITIONS: 11. SUBTRACTIONS: (Column C. Line 11 from Last Reporting period.) 58 324652 PB 2-4-08 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 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) 14. Goods/Services Given to Others: (Column C, Line 14 from Last Reporting period.) (Insert total of line 14, columns A + B) (Insert total Current Balance from line 45) **SUMMARY OF OUTSTANDING DEBT:** 16. Current Balance of Outstanding Loans Payable (loaned to you) (Amount from Last Report: \$ ____ 561853,99 Nb2-407 17. Current Balance of Outstanding Unpaid Bills/Advance of Credit> (Amount from Last Report: \$ (Insert total Amount Owed from line 46) 156 5416.95 PA 2407 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 guilly of a gross misdemeanor. SCHIFF 6A24 CERTIFY THAT THIS REPORT IS COMPLETE, TRUE AND CORRECT. I, (Print Name) SIGNATURE OF TREASURER:

FILE THIS REPORT WITH:

	CEIPT AND EXPENDITURES WORKSHEE		OD ONLY
NA	ME OF COMMITTEE OR FUND:Noight	ons for GARLY Scliff	DATE: 131 08
	DITIONS: (Income)		
19.	Total ITEMIZED Contributions:	(Insert total from line 35)	
20.	Total NON-ITEMIZED Contributions:	<u>s</u> 6968.75	(Subtotal: lines 19 + 20)
21.	Income from bank dividends, interest, etc:	\$ 0	
22.	New Loans Payable (loaned to you):	\$ 260. J.T. (Insert total from line 40)	
23.	New Repayments on Loans Receivable: (loaned to others/repaid to you)	(Insert total from line 44)	_
24.	Other:	\$	\$ 560 a 2.7 (Subtotal: lines 21+22+23+24)
25.	TOTAL INCOME:	\$ 6968.75 (TOTAL lines 19 through 24. Transfe	r 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:	\$ 8082.56 , (Insert total from line 37)	
29.	Total NON-ITEMIZED Operating Expenditures:	\$	\$ 8082.56 (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:	\$ O	\$ (,000.00 (Subtotal: fines 30+31+32+33)
34.	TOTAL EXPENDITURES:	\$ 9082 - 56 (Total lines 26 through 33. Transfer the	nis amount to Line 11, Column B.)

the line	in County Elections Division. As a conve provided if you do not want the address ators' addresses and one without.	enience, Hennepin Count of contributors to be disp	y also displays Schedule A on the played on the website.	e Hennepin County If selected, please	web site. Please o submit two versi	check the box and in ons of Schedule A, c	itial the form on one with
SCHE	DULE A: INCOME FROM CAS			KIND DONATIO	NS		
NAME	OF COMMITTEE OR FUND:	ary Schiff	, Neighbors	for	C	DATE: 1/31	108
You mus	st disclose the date and amount of each mo at, committee or fund that made the monetar	netary contribution or donatry contribution or Donation	ion In Kind within the year that, in a	aggregate from any co	ontributor, exceeds	\$100 *, the name and	address of the
(**In the	case of a contributor who is self-employed, nent, you must list that contributor's occupat	that is, does not derive ear	ned income as owner, partner, or e	employee of a corpora	tion, partnership, o	r other entity, including	g a branch of
	Funds must itemize contributions of memb						
If you su	bmit a typed or computer-generated list, all	items must be in the same	order as they appear on Schedule	A. Attach addition	nal pages as neces		
					List contributions here for the		
,				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
					-		
Su	Subtotal ITEMIZED Monetary Contributions received this period:						
				\dashv			
	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						
Şu	btotal ITEMIZED In-Kind Donations red	ceived this period:			_	\$ ()	7
Subtotal ITEMIZED In-Kind Donations received this period listed on previous page:					\$ 0	-{.	
Subtotal NON-ITEMIZED In-Kind Donations Received This Period:					\$ 0	1	
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 NAME OF COMMITTEE OR FUND: DATE: 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 expenditures here for the current reporting period **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 1067 5/16/0 4,073.62 produnc 1,512,90 48%.00 252.87 1/07 401 Misc. Supplies 249.25 247.25 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)	\$ 8082.56
Subtotal ITEMIZED Contributions to Others this period:	\$ O
Subtotal ITEMIZED Contributions to Others this period listed on previous page:	\$ 0
38. TOTAL ITEMIZED CONTRIBUTIONS TO OTHERS THIS PERIOD: (Transfer this amount to Line 26)	\$

	LO C, D, E, and I (At			77 Ochleddies C,	N o i	
NAME OF C	OMMITTEE OR FUND:	Neighbors fro	m GARY	DATE: _	Jan 31,	28
You must di together with	C: GOODS AND SERVIC sclose the total value of goon the goods and services, is ption of the goods or services	ods and services given to a s in excess of \$100 within t	I nother committee, he year. You must	as well as any othe	erwise non-itemizab	le cash that,
				Goods & Services Given in Cu	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
Date	Recipient	Goods and Services	for This Year	Cash Given	& Services	Year to Date
39. Total G	oods and Services given in	this period: (Transfer this	amount to Line 1	4, Column B)	\$	8
	D: NOTES AND LOANS F					
 					Repaid by You in orting Period	
	Alphabetical Order!		COLUMN A1	COLUMN B	COLUMN B1	COLUMN C1
			Loan Balance	Add New Loan	Subtract Loan	Current Balance
Date	Name, Address & Employ	yer of Lender	Last Report	\$ Received	\$ Repaid	Owed by You
	GARY SCHIFF	3215 23'd Anies Mpls Mu 55407	1853.97	260.27	1,000.00	1114,66
40 Total No	Loans Payable this perio	od: /Transfor this amount	to Line 22)	\$		260.27
40. Total Re	epayment of Loans Payable	this period: (Transfer this	amount to Line 3		\$	1000.00
42 Current	Balance of Outstanding Lo	ans Pavable: (Transfer thi	s amount to Line	16)		\$ 1114.66
	E: NOTES AND LOANS R					
	Loans Given by or Repaid to You in Current Reporting Period		orting Period			
	Alphabetical Order!		COLUMN A1	COLUMN B	COLUMN B1	COLUMN C1
Date	Name, Address & Employ	er of Recipient of Loan	Loan Balance Last Report	Add New Loan \$ Given	Subtract Loan \$ Repaid	Current Balance Owed to You
	Torn Nord		300.00	0	30000	D
,	Rue lane	-1 whospor my	Ì		1	
	w Loans Receivable this p			\$		B
	payment of Loans Receiva				\$	300
45. Current	Balance of Outstanding Lo	ans Receivable: (Transfer	this amount to Lir	ne 15)		\$
SCHEDULE	F: UNPAID BILLS/ADVAN	ICE OF CREDIT (Items or	services received	I but not paid)		
Date	Alphabetical Order! Name & Address of Vendor of Goods or Services Received But Not Paid For			Current Balance Owed by You		
1-3-08 (atour Emailer 2009 Janelle Way, Sandpoint			H IO 8386	<u> </u>	59.95	
46. Current Balance of Outstanding Unpaid Bills/Advance of Credit: (Transfer this amount to Line 17)						\$ 57,75
7. The Tre	asurer is to sign this state otations on Schedules B or	ement ONLY IF INDEPEN	DENT EXPENDITU	JRES WERE MAD	Ε.	
INDEPENDENT EXPENDITURE: SWORN STATEMENT I, (Print Name)						
Signatur	e of Treasurer	y shift	,)	Date	Jan 31	08