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.
1.	TUTHILL FOR LOT WAR	D	,
2.	(Name of Committee or Fund) FLANCES GLASS NEW	IMAN L	AJFOREMAN DOMAIL COM (E-mail Address)
2	2107 (Tenneon Ave #	=2. MPLSMN 55408	(E-mail Address)
J.	(Treasurer's Mailing Address for Committee Busine	ess)	
4.	Treasurer's Daytime Phone Number: 612-	870-1246	. شاهی
5.	☐ Change in Committee or Officer's Name, Address	ess, Phone. (Attach new "Registration & Statemen	t of Organization") OFC 3.1
6.	☐ No activity since last Report. (Insert Beginning	and Ending Balance at #9 & #12 below)	Øp.
6a.	No activity with 383B.041058 candidates, the	is reporting period. (Complete lines #9-#12 as app	olicable)
7.	The state of the s	aid and Ending Balance can be no more than \$100	Termination of committee registration.
•	If your committee is a state committee, please co		Received by
8.		February 2, 2015	Taxna Hennepin a
	REPORTING PERIOD: (check one) 2014 Candidates on the ballot And Political Funds or Committees Candidates NOT on the ballot in 201	: From: 10/22/2014 TI <u>4</u> : From: 1/1/2014 TI	Received by Hennepin Courexpayer Services hrough: 12/31/2014 DEC 3 1 2014
9.	BEGINNING CASH BALANCE THIS REPORT:	\$ 7 9, 00 (Insert Ending Cash Balance from last report)	PM DB DEL
	COLUMN A		The state of the s
	Activity Reported this year, In previous reporting periods.	COLUMN B ACTIVITY IN THIS REPORTING PERIOD	COLUMN C A + B =Total Activity for This Calendar Year
10.	ADDITIONS:	-/	
	\$	+\$ 9	\$
	(Column C, Line 10 from Last Reporting period.)	(Insert amount from line 25)	(Insert total of line 10, columns A + B)
11.	SUBTRACTIONS:	× 79.00	\$
	(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:	=s Ø	
_		(Line # + line 10(column B) - line 11(column B))
SU	MMARY OF IN-KIND DONATIONS & OUTSTANDING	LOANS RECEIVABLE:	
	COLUMN A	COLUMN B	COLUMN C
_	Activity Reported on Last Report	ACTIVITY IN THIS REPORTING PERIOD	A + B =Total Activity for This Calendar Year
13.	In-Kind Donations Received:	· 18	
	(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:	p	
	\$ -	\$ \$ \$	\$
	(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 Received	able (loaned to others)>	\$ (Insert total Current Balance from line 45)
	WALEY OF CUITATANDING DEDT.		0
	WMARY OF OUTSTANDING DEBT: Current Balance of Outstanding Loans Payable (Ic	paned to you)>	s
	(Amount from Last Report: \$)		(Insert total Current Balance from line 42)
17.	Current Balance of Outstanding Unpaid Bills/Adva (Amount from Last Report: \$)	nce of Credit>	(Insert total Amount Owed from line 46)
18.	CERTIFICATION: Any person who signs and certifies required information is guilty of a gross misdemeanor. I, (Print Name) FRANCES GLASS NEWM		
SIG	NATURE OF TREASURER: Nauch	lass hewman	-DATE: 12/30/2014

FILE THIS REPORT WITH:

TAXPAYER SERVICES DEPARTMENT, ELECTIONS DIVISION • PSL 012 GOVERNMENT CENTER, MINNEAPOLIS, MN 55487-0012 • (612)596-7152

RE	CEIPT AND EXPENDITURES WORKSHEE		
NA	ME OF COMMITTEE OR FUND: TUTHIL	L FOR 10th WA	HRDDATE: 12/30/2014
AD	DITIONS: (Income)	/	
19.	Total ITEMIZED Contributions:	\$ (Insert total from line 35)	
20.	Total NON-ITEMIZED Contributions:	<u>\$</u>	(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. Tr	ransfer this amount to Line 10, Column B.)
SUI	3TRACTIONS: (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:	\$ (Insert total from line 37)	
29.	Total NON-ITEMIZED Operating Expenditures:	s 79.50_	\$ 79 ———————————————————————————————————
30.	Bank service charges, etc., paid by you:	\$ Ø	
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:	\$	\$ (Subtotal: Ines 30+31+32+33)
34.	TOTAL EXPENDITURES:	\$ 79.00 (Total lines 26 through 33. Tran	nsfer this amount to Line 11, Column B.)

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Chart.	
3K 2	

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Division. A	nformation: Addresses submitted on As a convenience, Hennepin County also contributors to be displayed on the w	so displays Schedule A on	the Hennepin County web site	. Please check the	box and initial the	form on the line pro	vided if you do not	
SCHED	JLE A: INCOME FROM CASI	H (MONETARY) CON	ITRIBUTIONS and IN-	CIND DONATIO	NS	i	, ,	
NAME OF	COMMITTEE OR FUND: TUT	HILL FOR 101	4 WARD		D	ATE: 12/30/	2014	
	isclose the date and amount of each mon or fund that made the monetary contributi				ontributor, exceeds	\$100 *, the name and	d address of the indi	vidual,
	se of a contributor who is self-employed, tributor's occupation.)	that is, does not derive earne	d income as owner, partner, or e	employee of a corpora	ation, partnership, o	or other entity, includir	ig a branch of gover	nment, you must
	inds must itemize contributions of membe it a typed or computer-generated list, all i			A Attach addition	onal pages as nece	ssarv		
	it a typed of compater gonerated net, and		and the property of the contract	The state of the s		ions here for the]
				COLUMN A	COLUMN B	COLUMN B1	COLUMN C	1
Date	ALPHABETICAL ORDER!	Contributor's	Description of In-Kind	Previous Total	\$ Received	\$ Value of In-	Total from Source	-
Rcvd.	Contributor Name & Address	Employer**	Donation	For This Year	This Period	Kind Donation	Year to Date	
							•	1
		_						_
								-
								-
								_
-								1
								†
								-
								1
Cubto	tal ITEMIZED Monetary Contribution	es received this period			\$			-
		·····	ad on previous page:		+			
Subtotal ITEMIZED Monetary Contributions received this period listed on previous page: \$ 55. TOTAL ITEMIZED CONTRIBUTIONS RECEIVED THIS PERIOD: (Transfer this amount to Line 19) \$ 65. TOTAL ITEMIZED CONTRIBUTIONS RECEIVED THIS PERIOD: (Transfer this amount to Line 19)						_		
							_	
Subto	tal ITEMIZED In-Kind Donations rec	eived this period:				\$]	
	tal ITEMIZED In-Kind Donations rec		previous page:			\$		
	tal NON-ITEMIZED In-Kind Donation					\$		
36 TOTA	I. IN-KIND DONATIONS RECEIVED	THIS PERIOD: (Transfer	r this amount to Line 13. Co	olumn B)		\$ 6		

AME OF C	COMMITTEE OR FUND: TUTHILL FOR	10- WARD		D.	ATE: 12/30	1011
ne year, an	sclose the name and address of each individual, business of the amount, date and specific purpose of the expenditure.			have been made	e, in an aggregate	amount in excess o
-	it a typed or computer-generated list, all items must be in the ional pages as necessary.	e same order as they app	pear on Schedule B.			
maor addit	orial pages as ricoessary.				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
Subtots	I ITEMIZED Operating Expenditures this period:	******		S		
	ITEMIZED Operating Expenditures this period listed on pr	evious page:		\$.		
	ITEMIZED OPERATING EXPENDITURES THIS PERIOD:		o Line 28)	\$ 6]	
Subtota	al ITEMIZED Contributions to Others this period:				\$	7
	I ITEMIZED Contributions to Others this period listed on pre	evious page:			\$	
38. TOTAL	AL ITEMIZED CONTRIBUTIONS TO OTHERS THIS PERIOD: (Transfer this amount to Line 26)				\$ 0	

SCHEDULI You must d goods and	COMMITTEE OR FUND:	ES GIVEN TO OTHERS ods and services given to a	another committee,	as well as any othe	erwise non-itemizab	e cash that, togethe		
		1	<u> </u>	Goods & Sorrigo	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		
00 T-1-1-0	 Boods and Services given in	this social (Too of a this		4 Column B)	\$			
	E D: NOTES AND LOANS	·				7		
				Current Rep	r Repaid by You in porting Period			
	Alphabetical Order!		COLUMN A1	COLUMN B	COLUMN B1	COLUMN C1		
Date	Name, Address & Emplo	yer of Lender	Loan Balance Last Report	Add New Loan \$ Received	Subtract Loan \$ Repaid	Current Balance Owed by You		
41. Total F	lew Loans Payable this peri	e this period: (Transfer thi	s amount to Line		\$			
12. Curren	t Balance of Outstanding Lo	pans Payable: (Transfer th	is amount to Line	16)	_ 	\$ 0		
SCHEDIII I	E E: NOTES AND LOANS I	RECEIVABLE (Loaned by	You)			i.		
COLLEGE	E. NOTES AND ESANS I	teocitytee (coulde by						
				Loans Given by or Repaid to You in Current Reporting Period				
	Alphabetical Order!		COLUMN A1	COLUMN B	COLUMN B1	COLUMN C1		
Date	Name, Address & Emplo	yer of Recipient of Loan	Loan Balance Last Report	Add New Loan \$ Given	Subtract Loan \$ Repaid	Owed to You		
		· •			-			
43. Total N	lew Loans Receivable this p	period: (Transfer this amo	unt to Line 32)	\$				
	tepayment of Loans Receiv				\$			
15. Curren	t Balance of Outstanding Lo	oans Receivable: (Transfe	r this amount to L	ne 15)		\$ \$		
SCHEDUL	F: UNPAID BILLS/ADVA	NCE OF CREDIT (Items o	r services receive	d but not paid)		(
Date	Alphabetical Order! Name & Address of Vene	dor of Goods or Services F	Received But Not Pa	aid For		Current Balance Owed by You		
46. Curren	t Balance of Outstanding U	npaid Bills/Advance of Cre	dit: (Transfer this a	imount to Line 17	}	\$ 5		
	reasurer is to sign this statement ONLY IF INDEPENDENT EXPENDITURES WERE MADE. e notations on Schedules B or C where Independent Expenditures are itemized.)							
I, (Print and rej	ENDENT EXPENDITURE: Name) ported in this report were made request or suggestion	ade WITHOUT the author	ization or express	ed or implied con	expenditures made sent of, or in coop			
	ure of Treasurer	oi any candidat e , candida	ace a campaign CO	Da	te			
	atule of Headure!							