CAMPAIGN FINANCE REPORT OF RECEIPTS AND EXPENDITURES

RETAIN A COPY OF THIS REPORT FOR YOUR FILES Neighbors for Cam Gorde (Name of Committee or Fund) Ruth Hvidston rhvidston@gmail.com (Treasurer's Name) (E-mail Address) 2744 41st Ave S, Minnes (Treasurer's Mailing Address for Committee Business) Treasurer's Daytime Phone Number: 612 310 1041 Change in Committee or Officer's Name, Address, Phone. (Attach new "Registration & Statement of Organization") Received by Hennepin County No activity since last Report, (Insert Beginning and Ending Balance at #9 & #12 below) Taxpayer Services 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 \$190, Termination of committee registration, If your committee is a state committee, please contact our office regarding termination. FEB 0 2 2015 a. 2014 ANNUAL REPORT DUE Monday, February 2, 2015 REPORTING PERIOD: (check one) 2014 Candidates on the ballot And Political Funds or Committees: From: 10/22/2014 Through: 12/31/2014 Ø Candidates NOT on the ballot in 2014: From: 1/1/2014 Through: 12/31/2014 5B52627 BEGINNING CASH BALANCE THIS REPORT: _∫570.30 (Insert Ending Cash Balance from (ast report) Activity Reported this year, COLUMN B COLUMN C in previous reporting peri **ACTIVITY IN THIS REPORTING PERIOD** A + B =Total Activity for This Calendar Year ADDITIONS: \$ 0.00 + \$ 845.00 \$_845.00 (Column C, Line 10 from Last Reporting period.) (Insert total of line 10, columns A + B) SUBTRACTIONS: 11. \$ 0.00 <u>-\$</u> 176.98 \$ 176.98 (Column C, Line 11 from Last Reporting period.) (Insert amount from line 34) (Insert lotal of line 11, columns A + B) <u>= \$ [1,238.32</u> 1189-29 OR ENDING CASH BALANCE THIS REPORT: (Line 9 + line 10(column B) - fine 11(column B) SUMMARY OF IN-KIND DONATIONS & OUTSTANDING LOANS RECEIVABLE: COLUMN A COLUMN B COLUMN C ACTIVITY IN THIS REPORTING PERIOD clivity Reported on Last Report A + B =Total Activity for This Calendar Year in-Kind Donations Received: <u>\$</u> 0.00 +\$ 0.00 \$ 0.00 (Column C, Line 13 from Last Reporting period.) (Insert total from line 36) (Insert total of line 13, columns A + B) Goods/Services Given to Others: <u>-s 0.00</u> s 0.00 <u>\$</u>_[0.00 (insert total of line 14, columns A + B) <u>s (</u>0.00 Current Balance of Outstanding Loans Receivable (loaned to others) (Insert total Current Balance from line 45) SUMMARY OF OUTSTANDING DEBT: Current Balance of Outstanding Loans Payable (loaned to you) **5** 188.00 (Amount from Last Report \$ 188.00 (Insert total Current Balance from line 42) Current Balance of Outstanding Unpaid Bills/Advance of Credit **\$** 157.98 \$ 157.98 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 guilty of a gross misdemeanor. I, (Print Name) __ CERTIFY THAT THIS REPORT IS COMPLETE, TRUE AND CORRECT. SIGNATURE OF TREASURER: DATE: FILE THIS REPORT WITH: TAXPAYER SERVICES DEPARTMENT, ELECTIONS DIVISION . PSL 012 GOVERNMENT CENTER, MINNEAPOLIS, MN 55487-0012 . (612)596-7152 RECEIPT AND EXPENDITURES WORKSHEET FOR THIS REPORTING PERIOD ONLY NAME OF COMMITTEE OR FUND: Neighbors for Cam Gordo DATE: 1/28/15 ADDITIONS: (Income) \$ 0.00 19. Total ITEMIZED Contributions: (Insert total from fine 35) 20, Total NON-ITEMIZED Contributions: s 845.00 s_845.00 (Subtotal; lines 19 + 20) 21. <u>\$ [0.00</u> Income from bank dividends, interest, etc:

22.	New Loans Payable (lo (Insert total from line 40)	eaned to you): § 0.0	00				
23.	New Repayments on Lo	_	0.00				
24.	Other: (Subtotel: lines 21+22-	+23+24)	\$_	0.00	<u>\$</u> [0.00		
25.	TOTAL INCOME: (TOTAL lines 19 through 24, Tr	\$ 845.00 ransfer this amount to Line 10,	, Column B				
SUBT	RACTIONS: (Expenditures)		<u></u>				
26,	Total ITEMIZED Contrib (Insert total from line 38)	utlans to Others:	0.00				
27.	Total NON-ITEMIZED C (Subtotal: fines 26 + 27		<u>s 0.0</u>	00	<u>s</u> 0.00		
28.	Total ITEMIZED Operati	ng Expenditures: \$	152.00				
29.	Total NON-ITEMIZED Q (Subtotal: Lines 28 + 25		<u>\$</u> _(0.0	00	<u>s</u> [152.00		
30.	Bank service charges, et	tc., pald by you: <u>\$</u>	24.98				
31.	New Repayments on Loa (loaned to you/repaid to lend-						
32.	New Loans Receivable (Insert total from line 43)	loaned to others):	0.00				
33.	Other: (Subtotal: lines 30+31+5	32+33)	<u>\$</u> _{	0.00	<u>s 24.98</u>		
34.	TOTAL EXPENDITURES		(max B)				
Importa	nt Information: Addresses sub	mitted on Schedule A are nub	lic data nu	rsuent to the Minnesota Government D	ata Practices Act, This form is retained	on file in the Hennepin County Electic	ons
contrib	itors to be displayed on the wel	balte, 🛘 If selected,	le A on the please sub	Hannanin County web site. Places chi	eck the box and initial the form on the li with contributors' addresses and one wil	والرب والمحمود ومسامله ويمروكا المعاملون مو	iress of
	OF COMMITTEE OR FUND:			DATE: 1/28/15			
**in the hat cont	made the monetary commodition i	or Donation in Kind, and the employed, that is, does not derive	ployer of the e earned in	e individual contributor, come as owner, partner, or employee of a	m any contributor, exceeds \$100 *, the ner		
	bmit a typed or computer-generate				additional pages as necessary.	1	Lis
		ALPHABETICAL ORDER				COLUMN A	CO
Date F	Revd.	Contributor Name & Addre	ss	Contributor's Employer**	Description of In-Kind Donation	Previous Total For This Year	\$ R
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Subtotal ITEMIZED	Monetary Contributions received this	period:	\$						
			0.00						
Subtotal ITEMIZED	Monetary Contributions received this	S							
5. TOTAL ITEMIZE	D CONTRIBUTIONS RECEIVED TH	1 (np. 10) S							
		0.00							
Subtotal ITEMIZED	In-Kind Donations received this perio				<u> </u>				
edutoral (1 ENVIZED	in-kina Donalions received this pene	o:		0.00					
Subtotal ITEMIZED	In-Kind Donations received this perior	d fisted on previous page:		\$					
Subtotal NON-ITEM	IZED In-Kind Donations Received Th	s Period:		\$					
. TOTAL IN-KIND	DONATIONS RECEIVED THIS PERI	OD: (Transfer this amount to Line 13	Column B)	\$	J				
		os. (Tonois una amount to kine 10	, committee	0.00					
					······································				
r, and the amount, date and	i specific purpose of the expenditure. ter-generated list, all items must be in	s or committee to whom expenditures/ the same order as they appear on Sci		ade, in an aggreg					
			COLUMN A		List expenditures here for t COLUMN B	he cu			
	ALPHABETICAL ORDER! Vendor or Recipient Committ								
te Paid /13/15	Name and Address	Purpose for Expenditure	Previous Total Fo	r This Year	Operating Expenditures	$\overline{-}$			
13/15	In the Heart of the Be	ast Advertising			152.00				
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Subtotal ITEMIZED O	perating Expenditures this period:		\$						
Subtotal ITEMIZED O	perating Expenditures this period liste	4	152.00		<u> </u>				
annorm HEMINELY O	perating experiolitizes this period liste	\$		ار					
TOTAL ITEMIZED	OPERATING EXPENDITURES THIS	lne \$		4					
			152.00)				
Subtotal ITEMIZED C	ontributions to Others this period:			1 \$	_				
				0.00					
Subtotal ITEMIZED Co	ontributions to Others this period lister	on previous page:		\$					
TATAL									
FOTAL (FEMIZED	CONTRIBUTIONS TO OTHERS THE	S PERIOD: (Transfer this amount to	Line 26)	\$ 0.00					

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SCHEDULES C, D, E,	and F (Attach additional p	ages if necessary	for Sc	ch	edules C, D, E, a	and F)							
NAME OF COMMITTEE OR I	FUND: Neighbors for Ca	m Gord	D	ΙAΊ	re: 1/28/15								
You must disclose the total va	SERVICES GIVEN TO OTHERS alue of goods and services given to same and address of the reciplent	o another committee, as	well as joods o	en or s	y otherwise non-item services given.	izable ca	ash the	d, together with	the goods	and services, is in e	xcess of \$	100 within the year. Ye	'αU
	N-LabetiTOi			Γ	COLUMNIA		Goo			100+ Given in Curre		COLUMN	
Date	Alphabetical Orderi Name & Address of	Description of						Value of Goods &		COLUMN C			
0	Recipient	Goods and Service			TBVOUS TOTAL OF THE	2 1931	Cash Given		$\overline{}$	Value of Goods &	Selvices	Recipient Total Yea	to sar
			=1=										
] (
39. Total Goods and	d Services given in this period: (Tr	ansfer this amount to L	ine 14,	C	olumn B)					\$ (0.00			
SCHEDULE D: NOTES AND	LOANS PAYABLE (Loaned to Y	(ou)											
						Loan	s Give	n to or Repaid b Per		Current Reporting			
	Alphabetical Orderl		COLUMN A1		COLUMN B Add New Loan		COLUMN B1 Subtract Loan			OLUMN C1 Balance Owed by			
Date	Name, Address & Employer of L	ender	Loan	В	alance Last Report	_	\$Re	ceived		\$ Repaid	Yau		
8/31/08	Caro Gordon, 914 E Frank		(188.0	QĐ)			188,00		
				_									
40. Total New Loans	Payable this period. (Transfer th	is amount to Line 22)		_		\$ 0.00							
41, Total Repayment	of Loans Payable this period: (Tr	ansfer this amount to L	ine 31))		(5.05			\$ 0.00				
42. Current Balance	of Outstanding Loans Payable: (T	ransfer this amount to	Line 16	i)					(0.00		5		
											[188.00		
SCHEDULE E: NOTES AND	LOANS RECEIVABLE (Loaned I	by You)											
						Losn		Per	tod	Current Reporting	<u>_</u>		
	Alphabetical Orderi				OLUMN A1		Add No	JMN B w Loan		OLUMN B1 ubtract Loan		Balance Owed to	
Date	Name, Address & Employer of F	Recipient of Loan	Loan	וש	alance Last Report	_	\$ 6	iven		\$ Repaid		You	
			\subseteq	_							=		
				_		(<u></u>		L		
43, Total New Loans	Receivable this period: (Transfer	this amount to Line 32)			\$ 0.00							
44, Total Repayment	of Loans Receivable this period:	(Transfer this amount t	o Line :	23)				0.00				
45. Current Balance	of Outstanding Loans Receivable:	(Transfer this amount	to Line	1	5)						\$ 0.00		
SCHEDULE F: UNPAID BILL	SIADVANCE OF CREDIT (Items	or services received by	ut not p	oai	d)								
Date	Alphabetical Orderi Name & Address of Vendor of G	Spods or Services Recelv	ed But i	No	t Paid For				Current	Balance Owed by You			
1/30/15	Kim Middendorf, 1957 She								157.98	7			
48. Current Balance of Outstanding Unpaid Bilfs/Advance of Credit: (Transfer this amount to Line 17) [157,98]													
	to sign this statement ONLY IF dules B or C where Independent is			ES	WERE MADE,								
INDEPENDENT EXPEN	DITURE: SWORN STATEMENT												
	11 thy a STZ	implied consent of, or	in coof	per								i reported in this report campaign committee	
agent. Signature of Treasurer /	2 Jose Pil Ilica	16)	_										
7	115 1000												