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. ALL INFORMATION ON THIS REPORT IS PUBLIC MCLAUGHLIN FOR MAYOR (Name of Committee or Fund) DEBRA N. EVANS, TREASURER (E-mail Address) (Treasurer's Name) 3807 ZENITH AVENUE S MINNEAPOLIS MN 55410 (Treasurer's Mailing Address for Committee Business) Treasurer's Daytime Phone Number: _ (612) 860-2526 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. Received by Hennepin County 2008 ANNUAL REPORT **DUE Monday, February 2, 2009** REPORTING RERIOD: (check one) 2008 Candidates on the ballot And Political Funds or Committees: Candidates NOT on the ballot in 2008 **BEGINNING CASH BALANCE THIS REPORT:** 1.130.64 (Insert Ending Cash Balance from last report) **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 **ADDITIONS:** 4070.0C 4070.00 (insert total of line 10, columns A + B) (Insert amount from line 25) (Column C, Line 10 from Last Reporting period.) 11. SUBTRACTIONS: (Column C, Line 11 from Last Reporting period.) 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 B **COLUMN A** ACTIVITY IN THIS REPORTING PERIOD A + B =Total Activity for This Calendar Year Activity Reported on Last Report 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.) 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: \$ 33,000.00)

17. Current Balance of Outstanding Unpaid Bills/Advance of Credit..... (Insert total Amount Owed from line 46) (Amount from Last Report: \$.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 guilty of a gross misdemeanor. CERTIFY THAT THIS REPORT IS COMPLETE, TRUE AND I, (Print Name) DEBRA N. EVANS, TREASURER

CORRECT.

DATE:

SIGNATURE OF TREASURER:

FILE THIS REPORT WITH:

TAXPAYER SERVICES DEPARTMENT, ELECTIONS DIVISION • A-600 GOVERNMENT CENTER, MINNEAPOLIS, MN 55487-0060 • (612)596-7152

RECEIPT AND EXPENDITURES WORKSHEE		IOD ONLY
NAME OF COMMITTEE OR FUND: Mcaughlin	n-for Mayor	DATE: 1 30 09
ADDITIONS: (Income)	•	·
19. Total ITEMIZED Contributions:	\$ (Insert total from line 35)	
20. Total NON-ITEMIZED Contributions:	\$ 4070.00	\$ 4070.00 (Subtotal: lines 19 + 20)
21. Income from bank dividends, interest, etc:	ş 0	
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:	s 0	\$ (Subtotal: lines 21+22+23+24)
25. TOTAL INCOME:	\$ 4070.00 (TOTAL lines 19 through 24. Trans	fer this amount to Line 10, Column B.)
SUBTRACTIONS: (Expenditures)		
26. Total ITEMIZED Contributions to Others:	(Insert total from line 38)	
27. Total NON-ITEMIZED Contributions to Others:	<u>\$</u>	\$ (Subtotal: lines 26 + 27)
28. Total ITEMIZED Operating Expenditures:	\$ (Insert total from line 37)	
29. Total NON-ITEMIZED Operating Expenditures:	s 0	\$ (Subtotal: Lines 28 + 29)
30. Bank service charges, etc., paid by you:	s 5.50	
31. New Repayments on Loans Payable: (loaned to you/repaid to lender)	\$4500.00 (Insert total from line 41)	
32. New Loans Receivable (loaned to others):	(Insert total from line 43)	
33. Other:	<u>\$</u>	\$ 4505,50 (Subtotal: lines 30+31+32+33)
34. TOTAL EXPENDITURES:	\$ 4505.50 (Total lines 26 through 33. Transfe	r this amount to Line 11, Column B.)

Hennepin Co the line provi contributors'	ortant information: Addresses submunty Elections Division. As a convertided if you do not want the address of addresses and one without.	nience, Hennepin County al f contributors to be display	so displays Schedule A on the red on the website. ———————————————————————————————————	Hennepin County to the selected, please	web site. Please to submit two version	check the box and ini	uai tii e ioim oii
SCHEDUI	LE A: INCOME FROM CASH	I (MONETARY) CON	ITRIBUTIONS and IN-	KIND DONATIO)NS	1	1 _
NAME OF C	COMMITTEE OR FUND: MC	ughlin for M	ayor		D	ATE: 130	09
individual, cor (**In the case government, y *Political Fund	close the date and amount of each mone mmittee or fund that made the monetary of a contributor who is self-employed, to you must list that contributor's occupation ds must itemize contributions of membe a typed or computer-generated list, all it	contribution or Donation In K hat is, does not derive earned in.) rs that, in aggregate in the ye	kind, and the employer of the ind d income as owner, partner, or e ear, exceed \$50.	ividual contributor. mployee of a corpora		r other entity, including	
					List contribut	ions 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
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Subtotal ITEMIZED Monetary Contributions received this period: Subtotal ITEMIZED Monetary Contributions received this period listed on previous page: \$ \text{\texi{\text{\texi{\text{\text{\text{\text{\text{\text{\texi}\t					-		
Subtotal ITEMIZED Monetary Contributions received this period listed on previous page: \$ \text{\titte{\text{\texict{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\texit{\text{\texi{\tex{\texit{\texi{\texi{\texi{\texi{\texi{\texi{\texi{\texi{\texi{\te					┪		
							٦
Subtotal ITEMIZED In-Kind Donations received this period:					\$ 0		
	al ITEMIZED In-Kind Donations reco		previous page:			\$ 	1
Subtotal NON-ITEMIZED In-Kind Donations Received This Period: 36. TOTAL IN-KIND DONATIONS RECEIVED THIS PERIOD: (Transfer this amount to Line 13, Column B) \$ \(\frac{1}{2} \)					1		
							_

SCHEDULE B: OPERATING EXPENDITURES and CONTRIBUTIONS MADE TO OTHER COMMITTEES

	committee or fund: ughlin for Mayor			. 0/	ATE: 130	09
You must di	isclose the name and address of each individual, business or 100 within the year, and the amount, date and specific purpos it a typed or computer-generated list, all items must be in the	se of the expenditure.		have been made,	in an aggregate a	mount in
•	itional pages as necessary.					
Allacii addi	adonal pages de Nosesser,			List expenditures here for the current reporting period		
Date Paid	ALPHABETICAL ORDER! Vendor or Recipient Committee Name and Address	Purpose for Expenditure	Previous Total For This Year	Operating Expenditures	COLUMN B1 Contributions to Others	Total to Source Year to Date
Date Faiu	VEHIOL OF RECIPION COMMISSION PROPERTY.					
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Subto	otal ITEMIZED Operating Expenditures this period:			\$ -		
	otal ITEMIZED Operating Expenditures this period listed on pro			5-0-	_	
37. TOTA	AL ITEMIZED OPERATING EXPENDITURES THIS PERIOD:	(Transfer this amount to Un	9 28)	\$ -{-}	_} .	
C1-1-4	otal ITEMIZED Contributions to Others this period:	<u> </u>			S A	<u> </u>
Subtotal ITEMIZED Contributions to Others this period listed on previous page:					\$	7
38. TOTAL ITEMIZED CONTRIBUTIONS TO OTHERS THIS PERIOD: (Transfer this amount to Line 26)						1

SCHED	ULES C, D, E, and F (At	tach additional pages	if necessary fo	r Schedules C,	D, E, and F)		
NAME OF	COMMITTEE OR FUND:	Mclaughlin-fox	Mouor	_ DATE: _	1130 09	-	
SCHEDU You must	LE C: GOODS AND SERVIC disclose the total value of go with the goods and services, i scription of the goods or servi	ES GIVEN TO OTHERS ods and services given to a is in excess of \$100 within the services.		as well as any other also disclose the da	wise non-itemizabl ate, name and addr	e cash that, ess of the reciplent	
				Goods & Services	+ Cash = \$100+		
				Given in Cur	rent Period	COLUMN C	
	Alphabetical Order		COLUMN A	COLUMN B	COLUMN B1 Value of Goods	Recipient Total	
	Name & Address of	Description of Goods and Services	Previous Total for This Year	Cash Given	& Services	Year to Date	
Date	Recipient	Coods and Control				•	
<u> </u>							
39. Total	Goods and Services given in	n this period: (Transfer this	amount to Line 14	4, Column B)	\$	_ 0	
	LE D: NOTES AND LOANS				•		
				Loans Given to or			
			00141243144	Current Rep	COLUMN B1	COLUMN C1	
	Alphabetical Orderl		COLUMN A1 Loan Balance	Add New Loan	Subtract Loan	Current Balance	
	Name, Address & Emplo	wor of Lender	Last Report	\$ Received	\$ Repaid	Owed by You	
Date	Name, Address & Emple	Jyer di Lender		\rightarrow			
	. Peter McLaughli	n-Hennepin County	93,000.00				
	4458-35th Ave.	5. Mals 55406		• ()-			
40. Tota	Literation of Developing this par	ind (Transfer this Amount	to Line 22)	\$ 0	\$ 4500.00		
1	Repayment of Loans Payable trils per Repayment of Loans Payab ent Balance of Outstanding L	his parion: (I canster this	g amouil to Fine s	16)	<u> </u>	\$28,500.00	
42. Curr	ent Balance of Outstanding L	oans Payable. (Transfer di	13 MINOUNT TO MINO				
SCHEDU	LE E: NOTES AND LOANS	RECEIVABLE (Loaned by	You)				
				Loans Given by o	r Repaid to You in		
				Current Rep	orting Period		
	Alphabetical Orderl		COLUMN A1	COLUMN B	COLUMN B1	COLUMN C1	
<u> </u>			Loan Balance	Add New Loan	Subtract Loan	Current Balance Owed to You	
Date	Name, Address & Emplo	oyer of Recipient of Loan	Last Report_	\$ Given	\$ Repaid	CWed to Tod	
						1	
		(/ / of on Abla arma	unt to Line 32\	\$ -() -			
43. Tota	New Loans Receivable this Repayment of Loans Receivable	period: (Transfer this aino	this amount to Lir		\$ -0-		
44. Tota	ent Balance of Outstanding L	oans Receivable: (Transfer	this amount to Li	ne 15)		<u> </u>	
	JLE F: UNPAID BILLS/ADVA						
	Alphabetical Orderi					Current Balance	
Date	Name & Address of Ver	ndor of Goods or Services R	eceived But Not Pa	ild For		Owed by You	
			_ -			Ţ	
}			dik. /Turnefer èhle e	mount to 1 ing 17)		\$ +0-	
	rent Balance of Outstanding L						
47. The	Treasurer is to sign this st ke notations on Schedules B	atement ONLY IF INDEPER or C where independent Ex	NDENT EXPENDIT penditures are item	URES WERE MAD ized.)	E.		
INDEPENDENT EXPENDITURE: SWORN STATEMENT I, (Print Name) Independent expenditures made on behalf of other candidates and reported in this report were made WITHOUT the authorization or expressed or implied consent of, or in cooperation candidates and reported in this report were made WITHOUT the authorization or expressed or implied consent of, or in cooperation candidates and reported in this report were made without the authorization or expressed or implied consent of, or in cooperation candidates and reported in this report were made without the authorization or expressed or implied consent of, or in cooperation candidates and reported in this report were made without the authorization or expressed or implied consent of, or in cooperation candidates and reported in this report were made without the authorization or expressed or implied consent of, or in cooperation candidates and reported in this report were made without the authorization or expressed or implied consent of, or in cooperation candidates and reported in this report were made without the authorization or expressed or implied consent of, or in cooperation candidates and reported in this report were made without the authorization or expressed or implied consent of the cooperation candidates are consent or cooperation.							
can or i	candidates and reported in this report were made WITHOUT the authorization of expressed or implied to the request or suggestion of any candidate, candidate's campaign committee or agent.						
	Signature of Treasurer Date						
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