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. TROY PARKER FOR 4TH WARD CITY COUNCIL (Name of Committee or Fund) ARDIS GARDNER (Treasurer's Name)
4933 PENN AVE N MINNEAPOLIS MN 55430 13005 A 58th AVE NO Plymond (Treasurer's Mailing Address for Committee Business) Treasurer's Daytime Phone Number: (612) 522-9448 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. 2014 ANNUAL REPORT DUE Monday, February 2, 2015 REPORTING PERIOD: (check one) 2014 Candidates on the ballot Through: 12/31/2014 ceived by Hennepin County And Political Funds or Committees: From: 10/22/2014 Taxpayer Services Through: 12/31/2014 Candidates NOT on the ballot in 2014: From: 1/1/2014 BEGINNING CASH BALANCE THIS REPORT: 14.94 (Insert Ending Cash Balance from last report) **COLUMN A** Activity Reported this year, **COLUMN B ACTIVITY IN THIS REPORTING PERIOD** In previous reporting periods 10. ADDITIONS: (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 A COLUMN B **COLUMN C** Activity Reported on Last Report ACTIVITY IN THIS REPORTING PERIOD + B =Total Activity for This Calendar Year 13. In-Kind Donations Rec∉ived: (Column C, Line 13 from Last Reporting period.) (Insert total of line 13, columns A + B) (Insert total from line 36) 14. Goods/Services Given/to Others: (Column C, Line 14 from Last Reporting period.) (Insert total of 14, columns A + B) 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: \$6,784.45 ) 17. Current Balance of Outstanding Unpaid Bills/Advance of Credit...... (Amount from Last Report: \$838.08 (Insert total Amount 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 misdemea

FILE THIS REPORT WITH:

SIGNATURE OF TREASURER:

I, (Print Name) \_\_ARDIS GARDNER1

CERTIFY THAT THIS REPORT IS COMPLETE, TRUE AND CORRECT.

DATE

R	ECEIPT AND EXPENDITURES WORKSHE	ET FOR THIS REPORTING PER	HOP PINLY ( LOCAL)
N/	AME OF COMMITTEE OR FUND: Ira) d	Ykorfor4th Ward	CHY COUNCII 3/2/15
ΑC	DDITIONS: (Income)		
19	. Total ITEMIZED Contributions:	\$ (Insert total from line, 35)	
20	. Total NON-ITEMIZED Contributions:	s 4, 184,46	\$ (Subtotal: lines 19 + 20)
21.	. Income from bank dividends, interest, etc:	\$ 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:	\$	\$ (Subtotal: lines 21+22+23+24)
25.	TOTAL INCOME:	s 4, 784,45 (TOTAL lines 19 through 24. Transfe	er this amount to Line 10, Column B.)
SU	BTRACTIONS: (Expenditures)	d	
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:	\$	(Subtotal: Lines 28 + 29)
30.	Bank service charges, etc., paid by you:	\$ 0	
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:	\$	\$ U 184 45 (Subtotal: lines 30+31+32+33)
34.	TOTAL EXPENDITURES:	\$ USU SUSU SUSU SUSU SUSU SUSU SUSU SUS	this amount to Line 11, Column B.)

	and the same of th		NTRIBUTIONS and IN-I	KIND DONATION	ONS )	11-	1
NAME OF	COMMITTEE OR FUND:	of farker	70 711) NOV (1)	City Cou		DATE: 3/2	115
You must dis ndividual, co	sclose the date and amount of each mo ommittee or fund that made the moneta	netary contribution or donati ry contribution or Donation I	on In Kind within the year that, in a n Kind, and the employer of the ind	ggregate from any co	ontributor, exceeds	\$100 *, the name and	address of the
(**In the case of a contributor who is self-employed, that is, does not derive earned income as owner, partner, or employee of a corporation, partnership, or other entity, including a branch of government, you must list that contributor's occupation.)  *Political Funds must itemize contributions of members that, in aggregate in the year, exceed \$50.							
		. 55 5					
ir you submi	t a typed or computer-generated list, all	items must be in the same (	order as they appear on Schedule	A. Attach additio	nal pages as neces		T
					List contributions here for the current reporting period		
				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
					· · · · · · · · · · · · · · · · · · ·		
		*		•		<u> </u>	
Subtot	al ITEMIZED Monetary Contributio	ns received this period:		-	\$ 6	7	
<u> </u>	al ITEMIZED Monetary Contributio		sted on previous page:		\$ 6	-	
	L ITEMIZED CONTRIBUTIONS RE			e 19)	\$		
Subto	ubtotal ITEMIZED In-Kind Donations received this period:						j
	tal ITEMIZED In-Kind Donations re	<del></del>	n previous page:			\$ 62	1
	total NON-ITEMIZED In-Kind Donations Received This Period:					\$ 8	
36. TOTAL IN-KIND DONATIONS RECEIVED THIS PERIOD: (Transfer this amount to Line 13, Column B)						s 08	

SCHEDULE B: OPERATING EXPENDITURES and CONTRIBUTIONS MADE TO OTHER COMMITTEES								
NAME OF	COMMITTEE OR FUND: Traj Parker for	4th Ward CH	y cour	رم الا	ATE:_ 3/2/	15		
You must d excess of \$	isclose the name and address of each individual, business of 100 within the year, and the amount, date and specific purp	or committee to whom expenditions of the expenditure.	ures/contributions	have been made,	in an aggregate a	mount in		
if you subm	it a typed or computer-generated list, all items must be in th	e same order as they appear or	n Schedule B.					
Attach addi	tional pages as necessary.				· .			
				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		
						-		
					100			
					-			
			<u> </u>			<del> </del>		
					***************************************			
	al ITEMIZED Operating Expenditures this period:			\$				
	ai ITEMIZED Operating Expenditures this period listed on p		- 201	\$6,784.4	5			
37. TOTAL	ITEMIZED OPERATING EXPENDITURES THIS PERIOD	(I ransfer this amount to Line	e 28)	18.6				
Subtot	al ITEMIZED Contributions to Others this period:				\$ 0	<b>]</b> .		
Subtot	al ITEMIZED Contributions to Others this period listed on pr	evious page:		./	\$ 0			

38. TOTAL ITEMIZED CONTRIBUTIONS TO OTHERS THIS PERIOD: (Transfer this amount to Line 26)

SCHEDU	ILES C, D, E, and F (A)	ttach additional pages	s it necessary to	r Schedules C	ハルーマノっ	1
NAME OF	COMMITTEE OR FUND:	a farker for	4th Wava	CHY PATE	5/2	115
You must o together wi	E C: GOODS AND SERVIO disclose the total value of go ith the goods and services, cription of the goods or servi	oods and services given to is in excess of \$100 within	another committee, the year. You must	as well as any other	erwise non-itemizab late, name and add	le cash that, ress of the recipier
					s + Cash = \$100+ urrent 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
					)	<u> </u>
39. Total (	Goods and Services given in	n this period: (Transfer this	s amount to Line 1	4, Column B)	\$	
SCHEDUL	E D: NOTES AND LOANS	PAYABLE (Loaned to Yo	u)			
		<del>-</del>			r Repaid by You in porting Period	
	Alphabetical Order!		COLUMN A1	COLUMN B	COLUMN B1	COLUMN C1
Date	Name, Address & Emplo	over of Lender	Loan Balance Last Report	Add New Loan \$ Received	Subtract Loan \$ Repaid	Current Balance Owed by You
			10 784 4	0	10.78445	Ø
		<u></u>		7-	W/ 10 /· 10	7
0. Total N	 New Loans Payable this per	iod: (Transfer this amoun	t to Line 22)	\$		
1. Total F	Repayment of Loans Payab	le this period: (Transfer th	is amount to Line	31)	\$	_/
<ol><li>Currer</li></ol>	nt Balance of Outstanding L	oans Payable: (Transfer th	nis amount to Line	16)		\$ <i>Q</i>
	E E: NOTES AND LOANS	TEOLITABLE (MOUTHER B)	Loans Given by or Repaid to You in Current Reporting Period			
	Alphabetical Order!	1	COLUMN A1	COLUMN B	COLUMN B1	COLUMN C1
			Loan Balance	Add New Loan	Subtract Loan	Current Balance
Date	Name, Address & Emplo	oyer of Recipient of Loan	Last Report	\$ Given	\$ Repaid	Owed to You
12 Tetal N	New Leans Resolvable this	notice! (Transfer this ame	ount to Line 32)	\$		
	New Loans Receivable this Repayment of Loans Receiv				\$	
	nt Balance of Outstanding L					\$
CHEDULI	E F: UNPAID BILLS/ADVA	NCE OF CREDIT (Items of	or services receive	d but not paid)		
	Alphabetical Order!			·		Current Balance
Date	Name & Address of Ven	dor of Goods or Services F	Received But Not Pa	aid For		Owed by You
4141	f roy to	WKET -			·	838:08
6. Currer	nt Balance of Outstanding U	Inpaid Bills/Advance of Cre	dit: (Transfer this a	amount to Line 17	)	\$ 838.08
	reasurer is to sign this standard notations on Schedules B				DE.	
l, (Print candid	PENDENT EXPENDITURE: t Name)	port were made WITHOUT	the authorization	or expressed or i	expenditures made mplied consent of	or in cooperatio
	_	ueat or auggestion or ally	, vandidate, candit	•		•
<u>Signat</u>	ture of Treasurer			Da	ite	