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. Volunteers for Elizabeth Glidden (Name of Committee or Fund) danigold@yahoo.com; danigold@gwest.net Daniel S. Goldberg (Treasurer's Name) (E-mail Address) 4007 Blaisdell Avenue South, Minneapolis (Treasurer's Mailing Address for Committee Business) Treasurer's Daytime Phone Number: \_\_(612) 871-5500; (507) 281-4550\_ Change in Committee or Officer's Name, Address, Phone. (Attach new "Registration & Statement of Organization by Hennepin County **Taxpayer Services** No activity since last Report. (Insert Beginning and Ending Balance at #9 & #12 below) No activity with Hennepin County candidates, this reporting period. (Complete lines #9-#12 as applicable) 6a. 🖂 Termination of Committee - All debts must be paid and Ending Balance can be no more than \$100. If your committee is a state committee, please contact our office regarding termination. Log. 2004 ANNUAL REPORT DUE MONDAY, January 31, 2005 DEL. PM. REPORTING PERIOD: (check one) From: 10/19/2004 Through: 12/31/2004 And Political Funds or Committees: Candidates NOT on the ballot in 2004: From: 1/1/2004 Through: 12/31/2004 \$ 0.00 BEGINNING CASH BALANCE THIS REPORT: \_ (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. 10. ADDITIONS: + \$ 400.00 \$ 400.00 \$ 0.00 (Insert total of line 10, columns A + B) (Column C, Line 10 from Last Reporting period.) (Insert amount from line 25) 11. SUBTRACTIONS: -\$ 0.00 \$ 0.00 (Insert total of line 11, columns A + B) (Insert amount from line 34) (Column C, Line 11 from Last Reporting period.) 12. ENDING CASH BALANCE THIS REPORT: = \$ 400.00 (Line 9 + line 10(column B) - line 11(column B) SUMMARY OF IN-KIND DONATIONS & OUTSTANDING LOANS RECEIVABLE: **COLUMN C COLUMN B** COLUMN A A + B =Total Activity for This Calendar Year Activity Reported on Last Report ACTIVITY IN THIS REPORTING PERIOD 13. In-Kind Donations Received: \$ 0.00 +\$ 0.00 (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: \$ 0.00 \$.0.00(Column C, Line 14 from Last Reporting period.) (Insert total of line 14, columns A + B) (Insert total from line 39) 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: \$ 17. Current Balance of Outstanding Unpaid Bills/Advance of Credit......> (Amount from Last Report: \$ (Insert total Amount Owed from line 46) 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. **ERTIFY THAT THIS REPORT IS COMPLETE, TRUE AND** 

I, (Print Name) \_Daniel S. Goldberg

CORRECT.

FILE THIS REPORT WITH:

DATE: 3/28/05

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SIGNATURE OF TREASURER:

# RECEIPT AND EXPENDITURES WORKSHEET FOR THIS REPORTING PERIOD ONLY

NAME C	OF COMMITTEE OR FUND: <u>Volunteer for Eli</u>	zabeth Glidden	DATE: <u>3/28/05</u>
ADDITIO	ONS: (Income)		
19. Tota	al ITEMIZED Contributions:	\$ 400 (Insert total from line 35)	
20. Tota	al NON-ITEMIZED Contributions:	\$ 0.00	\$ 400.00 (Subtotal: lines 19 + 20)
21. Inco	ome from bank dividends, interest, etc:	\$	
22. Nev	w Loans Payable (loaned to you):	\$ (Insert total from line 40)	
	w Repayments on Loans Receivable: aned to others/repaid to you)	\$ (Insert total from line 44)	
24. Oth	er:	\$	\$ (Subtotal: lines 21+22+23+24)
 25. <b>TO</b> ʻ	TAL INCOME:	\$ 400.00 (TOTAL lines 19 through 24.	Transfer this amount to Line 10, Column B.)
SUBTR	ACTIONS: (Expenditures)		
26. Tota	al ITEMIZED Contributions to Others:	\$ 0.00 (Insert total from line 38)	
27. Tota	al NON-ITEMIZED Contributions to Others:	\$ 0.00	\$ 0.00 (Subtotal: lines 26 + 27)
28. Tot	al ITEMIZED Operating Expenditures:	\$ 0.00 (Insert total from line 37)	
29. Tota	al NON-ITEMIZED Operating Expenditures:	\$_0.00	\$ 0.00 (Subtotal: Lines 28 + 29)
30, Bar	nk service charges, etc., paid by you:	\$ 0.00	<del></del>
	v Repayments on Loans Payable: ned to you/repaid to lender)	\$ 0 (Insert total from line 41)	
32. Nev	v Loans Receivable (loaned to others):	\$ 0.00 (Insert total from line 43)	
33. Oth	er:	\$	\$ 0.00 (Subtotal: lines 30+31+32+33)
34. <b>TO</b>	TAL EXPENDITURES:	\$ 0.00	anefor this amount to Line 11. Column R

# SCHEDULE A: INCOME FROM CASH (MONETARY) CONTRIBUTIONS and IN-KIND DONATIONS

NAME OF COMMITTEE OR FUND: Volunteers for Elizabeth Glidden	DATE: 3/28/05
---	---------------

You must disclose the date and amount of each monetary contribution or donation In Kind within the year that, in aggregate from any contributor, exceeds \$100 \*, the name and address of the individual, committee or fund that made the monetary contribution or Donation In Kind, and the employer of the individual contributor.

(\*\*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.

If you submit a typed or computer-generated list, all items must be in the same order as they appear on Schedule A.

Attach additional pages as necessary.

					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
12/27/04	Kimberly Hunter 1451 Edmund Avenue, St. Paul, MN 55104			0.00	100.00	0.00	100.00
12/31/04	Patricia Klover 6804 Paiute Dr., Edina, MN 55439			0.00	100	0.00	100.00
12/28/04	Susan Reaney 2709 Colfax Avenue South, Mpls., MN 55408			0.00	100.00	0.00	100.00
12/27/04	Scott Walters 1451 Edmund Avenue, St. Paul, MN 55104			0.00	100.00	0.00	100.00
<del></del> -							

Subtotal ITEMIZED Monetary Contributions received this period:	\$ 400.00
Subtotal ITEMIZED Monetary Contributions received this period listed on previous page:	\$ 0.00
35. TOTAL ITEMIZED CONTRIBUTIONS RECEIVED THIS PERIOD: (Transfer this amount to Line 19)	\$ 400.00

г		
- 1	Subtotal ITEMIZED In-Kind Donations received this period:	
- 1	Subtotal ITEMIZED In-Kind Donations received this period:	\$ 0.00
- 1	Desired it citizes in this boliston receives the policy.	1 30 0.00
Ų	L	1 7 1

Subtotal ITEMIZED In-Kind Donations received this period listed on previous page:	\$ 0.00
Subtotal NON-ITEMIZED In-Kind Donations Received This Period:	\$ 0
36. TOTAL IN-KIND DONATIONS RECEIVED THIS PERIOD: (Transfer this amount to Line 13, Column B)	\$ 0.00

# SCHEDULE B: OPERATING EXPENDITURES and CONTRIBUTIONS MADE TO OTHER COMMITTEES

NAME OF (	COMMITTEE OR FUND: Volunteers for Elizabeth Glidden			D	ATE: <u>3/28/05</u>	
excess of \$ If you subm	isclose the name and address of each individual, business of 100 within the year, and the amount, date and specific purpolit a typed or computer-generated list, all items must be in thational pages as necessary.	ose of the expenditure.		s have been made	e, in an aggregate	amount in
					res here for the	
<del></del>			COLUMN A	current reporti	ng period 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
				}		
Subtota	al ITEMIZED Operating Expenditures this period:			\$	<u> </u>	
	al ITEMIZED Operating Expenditures this period listed on pr	evious page:		\$	-	
	ITEMIZED OPERATING EXPENDITURES THIS PERIOD:		28)	\$ 0.00		
Subtota	al ITEMIZED Contributions to Others this period:				\$	]
	al ITEMIZED Contributions to Others this period listed on pre	evious page:			\$	1
38. TOTAL	ITEMIZED CONTRIBUTIONS TO OTHERS THIS PERIOD:	(Transfer this amount to Lin	e 26)		\$ 0.00	]

## SCHEDULES C, D, E, and F (Attach additional pages if necessary for Schedules C, D, E, and F)

NAME OF COMMITTEE OR FUND:	Volunteers for Elizabeth Glidden	DATE: 3/28/05

#### SCHEDULE C: GOODS AND SERVICES GIVEN TO OTHERS

You must disclose the total value of goods and services given to another committee, as well as any otherwise non-itemizable cash that, together with the goods and services, is in excess of \$100 within the year. You must also disclose the date, name and address of the recipient and a description of the goods or services given.

					es + Cash = \$100+ urrent Period	
	Alphabetical Order!		COLUMN A	COLUMN B	COLUMN B1	COLUMN C
Date	Name & Address of Recipient	Description of Goods and Services	Previous Total for This Year	Cash Given	Value of Goods & Services	Recipient Total Year to Date
<del></del>						·
39. Total	Goods and Services given i	n this period: (Transfer thi	s amount to Line 1	4, Column B)	\$ 0.00	<u> </u>

#### SCHEDULE D: NOTES AND LOANS PAYABLE (Loaned to You)

				Repaid by You in orting Period	
	Alphabetical Orderl	COLUMN A1	COLUMN B	COLUMN B1	COLUMN C1
Date	Name, Address & Employer of Lender	Loan Balance Last Report	Add New Loan \$ Received	Subtract Loan \$ Repaid	Current Balance Owed by You
40. Total	New Loans Payable this period: (Transfer this am	ount to Line 22)	\$ 0.00	<del>-</del>	
41. Total	Repayment of Loans Payable this period: (Transfe	r this amount to Line	31)	\$ 0.00	
42. Curre	ent Balance of Outstanding Loans Payable: (Transf	er this amount to Line	16)		\$ 0.00

#### SCHEDULE E: NOTES AND LOANS RECEIVABLE (Loaned by You)

				r Repaid to You in orting Period	
	Alphabetical Order!	COLUMN A1	COLUMN B	COLUMN B1	COLUMN C1
Date	Name, Address & Employer of Recipient of Loan	Loan Balance Last Report	Add New Loan \$ Given	Subtract Loan \$ Repaid	Current Balance Owed to You
			1		
43. Total N	lew Loans Receivable this period: (Transfer this amo	unt to Line 32)	\$ 0.00		
44. Total R	tepayment of Loans Receivable this period: (Transfer	this amount to Lir	ne 23)	\$ 0.00	
45. Curren	t Balance of Outstanding Loans Receivable: (Transfer	this amount to Li	ine 15)		\$ 0.00

#### SCHEDULE F: UNPAID BILLS/ADVANCE OF CREDIT (Items or services received but not paid)

Date	Alphabetical Order! Name & Address of Vendor of Goods or Services Received But Not Paid For	Current Balance Owed by You
46. Curr	ent Balance of Outstanding Unpaid Bills/Advance of Credit: (Transfer this amount to Line 17)	\$ 0.00

47.	The Treasurer is to sign this statement ONLY IF INDEPENDENT EXPENDITURES WERE MADE. (Make notations on Schedules B or C where Independent Expenditures are itemized.)
	INDEPENDENT EXPENDITURE: SWORN STATEMENT  I, (Print Name), hereby certify that all 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
	or in concert with, or at the request of suggestion of any fandidate, candidate's campaign committee or agent.
	Signature of Treasurer Plans / Date 3/28/05

# CAMPAIGN FINANCE REPORT OF RECEIPTS AND EXPENDITURES

	nepin County Financial Disclosure Law: Minnesota S	Statutes 383B.041-383B.058  RETAIN A COPY OF THIS REPORT FOR YOUR FILES.
ALL INFORMATION ON THIS REPORT IS PUBLIC.  1. Volunteers for Elizabeth Glidden	TYPE OR PRINT IN BLACK INK.	RETAIN A COPT OF THIS REPORT FOR TOUR FILES.
(Name of Committee or Fund)		-
Daniel S. Goldberg     (Treasurer's Name)		danlgold@yahoo.com; danlgold@qwest.net (E-mail Address)
3. 4007 Blaisdell Avenue South, Minneapolis		(C-111ali Address)
(Treasurer's Mailing Address for Committee Busine	ess)	
4. Treasurer's Daytime Phone Number:(612) 871-		Received by Hennepin County
5. Change in Committee or Officer's Name, Add	ress, Phone. (Attach new "Registration & State	ement of Organization Paxpayer Services
6.	and Ending Balance at #9 & #12 below)	1110 0 7 200E
6a.   No activity with Hennepin County candidate	s, this reporting period. (Complete lines #9-#	MAR 2 1 2005
7. Termination of Committee - All debts must be pour office regarding termination.	paid and Ending Balance can be no more than	\$100. If your committee is a stater committee prease contact
	Y, January 31, 2005	PMDEL
REPORTING PERIOD: (check one)		
2004 Candidates on the ballot		
And Political Funds or Committee:	From: 10/19/2004	Through: 12/31/2004
☐ Candidates NOT on the ballot in 20	<b>04:</b> From: 1/1/2004	Through: 12/31/2004
9. BEGINNING CASH BALANCE THIS REPORT:	\$ 0.00	
	(Insert Ending Cash Balance from last repo	<del>rt)</del>
COLUMN A	COLUMN B	COLUMN C
Activity Reported this year, In previous reporting periods.	ACTIVITY IN THIS REPORTING PERIOD	
10. ADDITIONS:		
\$ 0.00	+ \$ 400.00	\$ 400.00
(Column C, Line 10 from Last Reporting period.)	(Insert amount from line 25)	(Insert total of line 10, columns A + B)
11. SUBTRACTIONS:		
\$ 0.00 (Column C, Line 11 from Last Reporting period.)	- \$ 0.00 (Insert amount from line 34)	\$ 0.00
(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:	= \$ 400.00 (Line 9 + line 10(column B) - line 11(column B)	ma R\
		mit 0)
SUMMARY OF IN-KIND DONATIONS & OUTSTANDING		
COLUMN A  Activity Reported on Last Report	COLUMN B  ACTIVITY IN THIS REPORTING PERIOD	COLUMN C A + B = Total Activity for This Calendar Year
13. In-Kind Donations Received:	AUTITION THIS INTERNATION THE	A. D = TORI ACOVICY IN THIS CHICHOAL TEST
		<b>6</b> 0.00
(Column C, Line 13 from Last Reporting period.)	+ \$ 0.00 (Insert total from line 36)	\$ 0.00 (Insert total of line 13, columns A + B)
14. Goods/Services Given to Others:		
\$_0.00	- \$ 0	\$ 0.00
(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	rable (loaned to others)>	\$ 0.00 (Insert total Current Balance from line 45)
	***************************************	(msert total ourrow balance from the 45)
<ul><li>SUMMARY OF OUTSTANDING DEBT:</li><li>16. Current Balance of Outstanding Loans Payable (In</li></ul>	named to you)	<b>\$</b> 0
(Amount from Last Report: \$)	oalled to you,	(Insert total Current Balance from line 42)
17. Current Balance of Outstanding Unpaid Bills/Adva	ance of Credit>	\$ 0.00
(Amount from Last Report: \$		(Insert total Amount Owed from line 46)
	s to be true a report or statement which the per-	son knows contains false information or who knowingly omits
required information is guilty of a gross misdemeanor.  I, (Print Name) Daniel S. Gelitberg	↑ CERTIFY TH	AT THIS REPORT IS COMPLETE, TRUE AND
CORRECT.	20010	
SIGNATURE OF TREASURER: Name (	DUW /	DATE: 3/18/05

FILE THIS REPORT WITH:

Page 1

## RECEIPT AND EXPENDITURES WORKSHEET FOR THIS REPORTING PERIOD ONLY

NA	ME OF COMMITTEE OR FUND: Volunteer for Eli	zabeth Glidden	DATE: 3/18/05
AD	DITIONS: (Income)		
19.	Total ITEMIZED Contributions:	\$ 400 (Insert total from line 35)	
20.	Total NON-ITEMIZED Contributions:	\$ 0.00	\$ 400.00 (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:	\$ 400.00 (TOTAL lines 19 through 24. <b>T</b>	ransfer this amount to Line 10, Column B.)
su	BTRACTIONS: (Expenditures)	*	
26.	Total ITEMIZED Contributions to Others:	\$ 0.00 (Insert total from line 38)	
27.	Total NON-ITEMIZED Contributions to Others:	\$ 0.00	\$ 0.00 (Subtotal: lines 26 + 27)
28.	Total ITEMIZED Operating Expenditures:	\$ 0.00 (Insert total from line 37)	
29.	Total NON-ITEMIZED Operating Expenditures:	\$_0.00	\$ 0.00 (Subtotal: Lines 28 + 29)
30.	Bank service charges, etc., paid by you:	\$ 0.00	
31.	New Repayments on Loans Payable: (loaned to you/repaid to lender)	\$ 0 (Insert total from line 41)	
32.	New Loans Receivable (loaned to others):	\$ 0.00 (Insert total from line 43)	
33.	Other:	\$	\$ 0.00 (Subtotal: lines 30+31+32+33)
34.	TOTAL EXPENDITURES:	\$ 0.00	

(Total lines 26 through 33. Transfer this amount to Line 11, Column B.)

# SCHEDULE A: INCOME FROM CASH (MONETARY) CONTRIBUTIONS and IN-KIND DONATIONS

NAME OF COMMITTEE OR FUND: Volunteers for Elizabeth Glidden	DATE: 3/18/05

You must disclose the date and amount of each monetary contribution or donation In Kind within the year that, in aggregate from any contributor, exceeds \$100 \*, the name and address of the individual, committee or fund that made the monetary contribution or Donation In Kind, and the employer of the individual contributor.

(\*\*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.

If you submit a typed or computer-generated list, all items must be in the same order as they appear on Schedule A.

Attach additional pages as necessary.

					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
12/27/04	Kimberly Hunter 1451 Edmund Avenue, St. Paul, MN 55104			0.00	200.00	0.00	200.00
12/31/04	Patricia Klover 6804 Paiute Dr., Edina, MN 55439			0.00	100	0.00	100.00
12/28/04	Susan Reaney 2709 Colfax Avenue South, Mpls., MN 55408			0.00	100.00	0.00	100.00
		1					

Subtotal ITEMIZED Monetary Contributions received this period:	\$ 400.00
Subtotal ITEMIZED Monetary Contributions received this period listed on previous page:	\$ 0.00
35. TOTAL ITEMIZED CONTRIBUTIONS RECEIVED THIS PERIOD: (Transfer this amount to Line 19)	\$ 400.00

Subtotal ITEMIZED In-Kind Donations received this period:	\$ 0.00
Subtotal ITEMIZED In-Kind Donations received this period listed on previous page:	\$ 0.00

Subtotal NON-ITEMIZED In-Kind Donations Received This Period:	\$0
36. TOTAL IN-KIND DONATIONS RECEIVED THIS PERIOD: (Transfer this amount to Line 13, Column B)	\$ 0.00

# SCHEDULE B: OPERATING EXPENDITURES and CONTRIBUTIONS MADE TO OTHER COMMITTEES

NAME OF (	COMMITTEE OR FUND: Volunteers for Elizabeth Glidden			D.	ATE: <u>3/18/05</u>	
You must di excess of \$	isclose the name and address of each individual, business of 100 within the year, and the amount, date and specific purpo	or committee to whom expendit ose of the expenditure.	tures/contributions	have been made	e, in an aggregate	amount in
	nit a typed or computer-generated list, all items must be in th tional pages as necessary.	e same order as they appear o	n Schedule B.			
7 ILLOOF AGGI	ional pages as necessary.			List expenditu	res here for the	
			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
					<u> </u>	
Subtota	al ITEMIZED Operating Expenditures this period:			\$	Ï	
Subtota	al ITEMIZED Operating Expenditures this period listed on pr	evious page:		\$	7	
37. TOTAL	ITEMIZED OPERATING EXPENDITURES THIS PERIOD: (	(Transfer this amount to Line	28)	\$ 0.00		
	al ITEMIZED Contributions to Others this period:				\$	
	I ITEMIZED Contributions to Others this period listed on pre				\$	
38. TOTAL	ITEMIZED CONTRIBUTIONS TO OTHERS THIS PERIOD:	(Transfer this amount to Lin	e 26)		\$ 0.00	

# SCHEDULES C, D, E, and F (Attach additional pages if necessary for Schedules C, D, E, and F)

NAME OF COMMITTEE OR FUND:	Volunteers for Elizabeth Glidden	DATE: 3/18/05

#### SCHEDULE C: GOODS AND SERVICES GIVEN TO OTHERS

You must disclose the total value of goods and services given to another committee, as well as any otherwise non-itemizable cash that, together with the goods and services, is in excess of \$100 within the year. You must also disclose the date, name and address of the recipient and a description of the goods or services given.

				Goods & Services + Cash = \$100+ Given in Current 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	Coods and Consises since is	- Alain		  4	<b>(</b> 0 00	
39. TOTAL	Goods and Services given in	n this period: (Transfer thi	s amount to Line	4, Column B)	\$ 0.00	<u> </u>

#### SCHEDULE D: NOTES AND LOANS PAYABLE (Loaned to You)

				Repaid by You in orting Period	
	Alphabetical Order!	COLUMN A1	COLUMN B	COLUMN B1	COLUMN C1
Date	Name, Address & Employer of Lender	Loan Balance Last Report	Add New Loan \$ Received	Subtract Loan \$ Repaid	Current Balance Owed by You
	New Loans Payable this period: (Transfer this am		\$ 0.00		}
41. Total I	Repayment of Loans Payable this period: (Transfe	er this amount to Line	31)	\$ 0.00	
42. Currei	nt Balance of Outstanding Loans Payable: (Transf	er this amount to Line	16)		\$ 0.00

#### SCHEDULE E: NOTES AND LOANS RECEIVABLE (Loaned by You)

				or Repaid to You in porting Period	
	Alphabetical Order!	COLUMN A1	COLUMN B	COLUMN B1	COLUMN C1
Date	Name, Address & Employer of Recipient of Loan	Loan Balance Last Report	Add New Loan \$ Given	Subtract Loan \$ Repaid	Current Balance Owed to You
43. Total	New Loans Receivable this period: (Transfer this amo	unt to Line 32)	\$ 0.00		
44. Total	44. Total Repayment of Loans Receivable this period: (Transfer this amount to Line 23) \$ 0.00				
	ent Balance of Outstanding Loans Receivable: (Transfer			•	\$ 0.00

# SCHEDULE F: UNPAID BILLS/ADVANCE OF CREDIT (Items or services received but not paid)

Date	Alphabetical Order! Name & Address of Vendor of Goods or Services Received But Not Paid For	Current Balance Owed by You
46. Curre	ent Balance of Outstanding Unpaid Bills/Advance of Credit: (Transfer this amount to Line 17)	\$ 0.00

47.	The Treasurer is to sign this statement ONLY IF INDEPENDENT EXPENDITURES WERE MADE.
	(Make notations on Schedules B or C where Independent Expenditures are itemized.)

wake notations on schedules B or C where independent Expenditures are itemized.)
NDEPENDENT EXPENDITURE: SWORN STATEMENT  , (Print Name)