

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. Neighbors for Hodges
(Name of Committee or Fund)
2. Andrew O'Leary ajoleary1@gmail.com
(Treasurer's Name) (E-mail Address)
3. 4240 30th Avenue South, Minneapolis, MN 55406
(Treasurer's Mailing Address for Committee Business)
4. Treasurer's Daytime Phone Number: 651-357-5234

5. ☐ Change in Committee or Officer's Name, Address, Phone. (Attach new "Registration & Statement of Organization")
6. ☐ 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)
7. ☐ 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.

8. **2014 ANNUAL REPORT DUE Monday, February 2, 2015**

Received by Hennepin County
Taxpayer Services

REPORTING PERIOD: (check one)

☐ 2014 Candidates on the ballot

And Political Funds or Committees:

From: 10/22/2014

Through: 12/31/2014

☒ Candidates NOT on the ballot in 2014:

From: 1/1/2014

Through: 12/31/2014

DB

DEL 2-2-15

9. BEGINNING CASH BALANCE THIS REPORT: \$ 2421.06
(Insert Ending Cash Balance from last report)

COLUMN A

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:
<u>\$ 0.00</u>
(Column C, Line 10 from Last Reporting period.) | + <u>\$ 0.00</u>
(Insert amount from line 25) | \$ <u>0.00</u>
(Insert total of line 10, columns A + B) |
| 11. SUBTRACTIONS:
<u>\$ 0.00</u>
(Column C, Line 11 from Last Reporting period.) | - <u>\$ 35.40</u>
(Insert amount from line 34) | \$ <u>35.40</u>
(Insert total of line 11, columns A + B) |
| 12. ENDING CASH BALANCE THIS REPORT: | = <u>\$ 2,385.66</u>
(Line 9 + line 10(column B) - line 11(column B)) | |

SUMMARY OF IN-KIND DONATIONS & OUTSTANDING LOANS RECEIVABLE:

- | | | |
|--|--|--|
| 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:
<u>\$ 0.00</u>
(Column C, Line 13 from Last Reporting period.) | + <u>\$ 0.00</u>
(Insert total from line 36) | \$ <u>0.00</u>
(Insert total of line 13, columns A + B) |
| 14. Goods/Services Given to Others:
<u>\$ 0.00</u>
(Column C, Line 14 from Last Reporting period.) | - <u>\$ 0.00</u>
(Insert total from line 39) | \$ <u>0.00</u>
(Insert total of line 14, columns A + B) |
| 15. Current Balance of Outstanding Loans Receivable (loaned to others)..... > | | \$ <u>0.00</u>
(Insert total Current Balance from line 45) |

SUMMARY OF OUTSTANDING DEBT:

- | | |
|---|---|
| 16. Current Balance of Outstanding Loans Payable (loaned to you) >
(Amount from Last Report: \$ 4,662.66) | \$ <u>4,662.66</u>
(Insert total Current Balance from line 42) |
| 17. Current Balance of Outstanding Unpaid Bills/Advance of Credit >
(Amount from Last Report: \$ 0.00) | \$ <u>0.00</u>
(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.

I, (Print Name) Andrew O'Leary, CERTIFY THAT THIS REPORT IS COMPLETE, TRUE AND CORRECT.

SIGNATURE OF TREASURER: Andrew O'Leary

DATE: 2/1/2015

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 ONLYNAME OF COMMITTEE OR FUND: Neighbors for HodgesDATE: 2/1/2015**ADDITIONS: (Income)**

19. Total ITEMIZED Contributions: \$ 0.00
(Insert total from line 35)

20. Total NON-ITEMIZED Contributions: \$ 0.00 \$ 0.00
(Subtotal: lines 19 + 20)

21. Income from bank dividends, interest, etc: \$ 0.00

22. New Loans Payable (loaned to you): \$ 0.00
(Insert total from line 40)

23. New Repayments on Loans Receivable:
(loaned to others/repaid to you) \$ 0.00
(Insert total from line 44)

24. Other: \$ 0.00 \$ 0.00
(Subtotal: lines 21+22+23+24)

25. TOTAL INCOME: \$ 0.00
(TOTAL lines 19 through 24. Transfer this amount to Line 10, Column B.)

SUBTRACTIONS: (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: \$ 35.40

31. New Repayments on Loans Payable:
(loaned to you/repaid to lender) \$ 0.00
(Insert total from line 41)

32. New Loans Receivable (loaned to others): \$ 0.00
(Insert total from line 43)

33. Other: 0 \$ 0.00 \$ 35.40
(Subtotal: lines 30+31+32+33)

34. TOTAL EXPENDITURES: \$ 35.40
(Total lines 26 through 33. Transfer this amount to Line 11, Column B.)

NAME OF COMMITTEE OR FUND: Neighbors for Hodges DATE: 2/1/2015

You must disclose the name and address of each individual, business or committee to whom expenditures/contributions have been made, in an aggregate amount in excess of \$100 within the year, and the amount, date and specific purpose of the expenditure.

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

Attach additional pages as necessary.

[illegible]

SCHEDULES C, D, E, and F (Attach additional pages if necessary for Schedules C, D, E, and F)NAME OF COMMITTEE OR FUND: Neighbors for HodgesDATE: 2/1/2015**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
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
39. Total Goods and Services given in this period: (Transfer this amount to Line 14, Column B)					\$ 0.00	

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

			Loans Given to or Repaid by You in Current Reporting 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
	Betsy Hodges, 350 S. 5 th Street, Minneapolis, MN 55415	4,662.66			4,662.66
40. Total New Loans Payable this period: (Transfer this amount to Line 22)			\$		
41. Total Repayment of Loans Payable this period: (Transfer this amount to Line 31)				\$	
42. Current Balance of Outstanding Loans Payable: (Transfer this amount to Line 16)					\$ 4,662.66

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

			Loans Given by or Repaid to You in Current Reporting 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 amount to Line 32)			\$		
44. Total Repayment of Loans Receivable this period: (Transfer this amount to Line 23)				\$	
45. Current Balance of Outstanding Loans Receivable: (Transfer this amount to Line 15)					\$

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

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

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 or suggestion of any candidate, candidate's campaign committee or agent.