ž
٠.
5
õ
Use
Office
For

	ite, committee or corporation <u>Kav</u>			
Office sought or	ballot question <u>School Board</u>	1-Moorhead	District 152	
Type of report	Candidate report Campaign committ	ee report	riod of time covered by report:	
	Association or corp	poration report fr	om <u>10-26-17</u> to <u>11-16-17</u>	1
	CONTRI	BUTIONS RECEIVED	ethiothration has been completed included advantage of the the transfer of the transfer of the transfer of the	
(money or in-kind) contributions from	all contributions received during the peri- rather than contributor. See note on con a single source that exceeded \$100 durin If-employed, amount and date for these co	tribution limits on the back of g the calendar year. This itemiz	his form. Use a separate sheet to i	itemize a
CASH	\$	TOTAL CASH-ON	-HAND \$ \$ 304	
IN-KIND	+ \$ 150.00			
TOTAL AMOUNT				
			entre de la companya	
	DIS unt, date and purpose for all disbursen I sheets if necessary.	BURSEMENTS nents made during the perio	d of time covered by report.	
Date	P	'urpose	Amount	
11-7-2017	Sir Speedy - GOTV MC	üler	# 1945.46	
11-15-2017	Sir Speedy - GOTV MC Neils Christofferson - Volum	iteer Dinner	d 140.00	
11-15-2017	Heather Wesemeier - Fur	draiser Event Suppl	ies \$50.00	
			TOTAL 2, 135.46	
		PROJECT EXPENDITURE		
corporations mu more than \$200.	st list any media project or corporate Submit a separate report for each pro	e message project for which piect. Attach additional shee	n contribution(s) or expenditur ets if necessary.	e(s) tot
	escription		, , , , , , , , , , , , , , , , , , ,	
Date	Purpose	Name and Addres of Recipient	Expenditure or Contribution Amount	
			TOTAL	
			Ball A Land Co. Co.	**************************************
I certify that this	is a full and true statement.	ale.L	11-16-17	

# Kara Gloe Moorhead School Board Candidate Financial Report

## Donors

Adjustment Entry

# Donors Name/Address Donation Type Amount Donated

1 Clay County DFL In Kind \$150 (access to VAN)

PO Box 161

Moorhead MN 56560

# Finance Summary

Total Cash on Hand

\$3.04

Dispursements:			
Organization	Amount	Reason	Date
Sir Speedy	\$1,945.46	\$1,945.46 GOTV Mailer	11-7-2017
Neils Christoffersen	\$140	\$140 Dinner for volunteers	11-15-17
Heather Nesemeier	\$50	\$50 Fundraising event Supplies	11-15-17

CAMPAIGN FINANCIAL REPORT (All of the information in this report is public information) Name of candidate, committee or corporation + CVC Report Pre Special Election R Office sought or ballot question Markened District Type of Candidate report Period of time covered by report: report Campaign committee report Association or corporation report from 8-23-17 to 10-26-17 Final report **CONTRIBUTIONS RECEIVED** Give the total for all contributions received during the period of time covered by this report. Contributions should be listed by type (money or in-kind) rather than contributor. See note on contribution limits on the back of this form. Use a separate sheet to itemize all contributions from a single source that exceeded \$100 during the calendar year. This itemization must include name, address, employer or occupation if self-employed, amount and date for these contributions. CASH TOTAL CASH-ON-HAND \$ <u>400</u>2,209 IN-KIND **TOTAL AMOUNT RECEIVED** DISBURSEMENTS include the amount, date and purpose for all disbursements made during the period of time covered by report. Attach additional sheets if necessary. Date Purpose See spreadshut CORPORATE PROJECT EXPENDITURES Corporations must list any media project or corporate message project for which contribution(s) or expenditure(s) total more than \$200. Submit a separate report for each project. Attach additional sheets if necessary. Project title or description Date Purpose Name and Address of Recipient TOTAL I certify that this is a full and true statement. Signature

Maghead MN 56560

Expenditure or

Contribution **Amount** 

Telephone 218-790-13785 Email (If available) Kovasjae tu conhead Committee of the conhead Commit

ž
Only:
Se
Office
For

				••••	
	Donors			Finance Summary	lary
#	Donors Name/Address	Employer	Amount Donated		
	2 Tyrone Grandstrand	City of Fargo	\$400	Total Cash on Hand	
	zzo 10til 3t in Apt 3313 Fargo, ND 58102			Disbursements:	
	4 Charlotte Trevino	Retired	\$300	CopyKat Printing	
	2042 W. Riviera Dr Tempe, AZ 85285			Harland Clark Minnesota DFL	
		-	0000	Dirt Cheap Signs	
	o Mariene Stewart 455 Apple Ct	Addeco	oocc	First Ave Promo	
	Eaton, CO 80615			Jed Limke	
	6 womenwinning	Political Organization	\$600	CopyKat Printing	
	2610 University Avenue West, Suite 325 St. Paul, MN 55114			Sir Speedy	

\$2,202.09		
	a de la constança de la consta	
Amount	Reason	Date
\$534.38	\$534.38 Campaign Literature	8/17/2017
\$19.30	\$19.30 Campaign Check Order	8/23/2017
\$150	\$150 VAN Access	8/23/2017
\$588.33	\$588.33 Yard Signs	8/24/2017
\$60.00	\$60.00 Park Shelter Reservation	9/7/2017
\$190.00	\$190.00 Campaign Shirt/Banner	9/8/2017
\$200.00	) Campaign Supplies (chalk/stencils)/Wages	9/21/2017
\$37.81	. Event Supplies	9/22/2017
\$408.04	Campaign Literature	10/8/2017
\$923.42	: Campaing Mailer	10/21/2017

	mor doestion 7-7CONVEC	ad School Board	District 1	5.3
Type of report 		committee report n or corporation report		ne covered by report: -17 to 8-23-17
		CONTRIBUTIONS RECEIVE	ED	100.File Philippin and work for a Proposition of the State of Carlot Manager State (1975).
(money or in-kind) ra contributions from a	ther than contributor. See no	g the period of time covered by the on contribution limits on the 100 during the calendar year. Th or these contributions,	back of this form. U	Ise a separate sheet to iter
CASH	\$ <u> </u>	1.25 TOTAL C	ASH-ON-HAND	\$ 1726.87
IN-KIND	÷ \$			
TOTAL AMOUNT R	* <u>33</u> 6	1, 25		
Include the amoun	t date and nurnece for all c	DISBURSEMENTS disbursements made during the	ne period of time	covered by report.
		dispursements made during tr		, .
Attach additional s	heets if necessary.			
	heets if necessary.	Purpose		Amount 534.38
Attach additional s Date		Purpose		Amount
Attach additional s Date	heets if necessary.	Purpose		Amount 534.38
Attach additional s  Date  P-17-17	heets if necessary.  Copy Kat Printin	Purpose  S - Postcards for the state of the	TOTA	Amount 534.38
Attach additional s  Date  P-17-17  Corporations must more than \$200. S	CORPORTS TO SEPARATE TO SEPARA	Purpose  9 - Postcards for t	TOTA  DITURES  or which contribu	Amount 534.38
Attach additional s  Date	CORP Kart Printing  CORP  list any media project or submit a separate report for cription	Purpose  S - Postcards for h  ORATE PROJECT EXPENDE  corporate message project for each project. Attach addition	TOTA  DITURES  or which contribution all sheets if necessions.	Amount 534.38  L  Ition(s) or expenditure(sssary.
Attach additional s  Date  P-17-17  Corporations must more than \$200. S	CORPORTS TO SEPARATE TO SEPARA	Purpose  S - Postcards for the second of the	TOTA  TOTA  OITURES  or which contribute the contri	Amount 534.38
Corporations must more than \$200. S	CORP Kart Printing  CORP  list any media project or submit a separate report for cription	Purpose  S - Postcards for h  ORATE PROJECT EXPENDE  corporate message project for each project. Attach addition	TOTA  TOTA  OITURES  or which contribute the contri	Amount 534.38  Ition(s) or expenditure(sessary.  Expenditure or Contribution Amount
Corporations must more than \$200. S	CORP Kart Printing  CORP  list any media project or submit a separate report for cription	Purpose  S - Postcards for h  ORATE PROJECT EXPENDE  corporate message project for each project. Attach addition	TOTA  TOTA  DITURES  or which contribution all sheets if necessions and the second contribution and the second con	Amount 534.38  Ition(s) or expenditure(sessary.  Expenditure or Contribution Amount

### Kara Gloe Moorhead School Board Candidate Financial Report

#	Donors Name/Address	Employer	Amount Donated
1	Mary Granlund	Fraser, LTD	\$150
	949 44th Ave NE		
	Columbia Heights		
2	Tyrone Grandstrand	City of Fargo	\$200
	220 10th St N Apt 3315	:	
	Fargo, ND 58102		
3	Richard Gloe	Retired	\$500
	905 N. Marion St.		
	Fort Pierre, SD 57532		

### CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING

### Instructions

Campaign Information
Name of candidate or committee Amy C Arel
Office sought by candidate (if applicable) MICCINETIC SCHOOL BOATA
Identification of ballot question (if applicable) NA
Certification
Select the appropriate choice below, and sign.
I do swear (or affirm) that all campaign financial reports required by Minnesota Statutes 211A.02 have been
submitted to the filing officer.
I do swear (or affirm) that all campaign contributions or disbursements did not exceed \$750 in the calendar
year.
Signature of candidate or committee treasurer WWW VVV
Date_11/11a/11

### CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING

### **Instructions**

<u>Campaign Information</u>
Name of candidate or committee NULL JOHN SW
Office sought by candidate (if applicable) School Board District (5) (10) (14)
Identification of ballot question (if applicable)
Certification
Select the appropriate choice below, and sign.
O I do swear (or affirm) that all campaign financial reports required by Minnesota Statutes 211A.02 have been
submitted to the filing officer.
or affirm) that all campaign contributions or disbursements did not exceed \$750 in the calendar
year.
Signature of candidate or committee treasurer KWW
Date 11-17-17

### Office of the Minnesota Secretary of State

### **CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING**

### **Instructions**

<u>Campaign Information</u>
Name of candidate or committee LISA Holder
Office sought by candidate (if applicable) 1007 here School Doord School
Identification of ballot question (if applicable)
Certification
Select the appropriate choice below, and sign.
I do swear (or affirm) that all campaign financial reports required by Minnesota Statutes 211A.02 have been
submitted to the filing officer.
I do swear (or affirm) that all campaign contributions or disbursements did not exceed \$750 in the calendar
year.
Signature of candidate or committee treasurer 24 404 4
Date 1/27/17

	CAMPAIGN	FINANCIAL REPORT	
	(All of the informat	ion in this report is public information)	
Name of candidate	, committee or corporation	isa Holter	
Office sought or ba	llot question ////////////////////////////////////	A SChOUL BOBistrict_	Modhead
Type of	Candidate report		e covered by report:
report	Campaign comm		2 11/-
_	Association of co	from <u>O8 //</u>	to
Mark Commission of the Commiss	*****	RIBUTIONS RECEIVED	
(money or in-kind) ra contributions from a	ther than contributor. See note on co	eriod of time covered by this report. Contrib contribution limits on the back of this form. Using the calendar year. This itemization must in contributions.	e a separate sheet to itemize a
CASH	\$	TOTAL CASH-ON-HAND	\$
IN-KIND	* <b>\$</b>		<b>)</b>
TOTAL AMOUNT RE	ECEIVED =		
Attach additional s Date	heets if necessary.	Purpose	Amount
Date		Purpose	Amount
		· TOTAL	
Corporations must more than \$200. S	list any media project or corpora	E PROJECT EXPENDITURES  ate message project for which contribution of the contribution	on(s) or expenditure(s) tot ary.
Project title or desc	cription A		
Date	Purpose	Name and Address of Recipient	Expenditure or Contribution Amount
		TOTAL	
		and the second s	
I certify that this is	a full and true statement.	Jose Hall	11/27/17
Printed Name	in Halter -	Signatufe / ephone <u>218 79   44/3</u> Email (if ava	Date ' '
0 50	BCANGARA DI NA	machen d MAS SICTION	/ manet
Address 3-115	DIVUMUME RO 1.	WII runch jalle 3030	<u> </u>

### **CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING**

### **Instructions**

Campaign Information
Name of candidate or committee David Hallman For School Bos-d
Office sought by candidate (if applicable) Moorhead School Board
Identification of ballot question (if applicable)
Certification
Select the appropriate choice below, and sign.
O I do swear (or affirm) that all campaign financial reports required by Minnesota Statutes 211A.02 have been
submitted to the filing officer.
I do swear (or affirm) that all campaign contributions or disbursements did not exceed \$750 in the calendar
year.
Signature of candidate or committee treasurer That I want of the committee the committee that I want of the committee the committee that I want of the committee the committee that I want of the committe
Date 7000 2017

### Office of the Minnesota Secretary of State

### CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING

### **Instructions**

anaiga Information

Campaign mornation
Name of candidate or committee BRIAN MANCINI
Office sought by candidate (if applicable) Most head School Board
Identification of ballot question (if applicable)
Certification
Select the appropriate choice below, and sign.
1 do swear (or affirm) that all campaign financial reports required by Minnesota Statutes 211A.02 have been
submitted to the filing officer.
1 do swear (or affirm) that all campaign contributions or disbursements did not exceed \$750 in the calendar
year.
Signature of candidate or committee treasurer
Date 11 -28 - 17

(All of the information in this report is public information) BRIAN MANCINI Name of candidate, committee or corporation 152 Office sought or ballot question Moor kead District Period of time covered by report: Type of Candidate report Campaign committee report report from 8/9/17 to 11/28/17 Association or corporation report Final report **CONTRIBUTIONS RECEIVED** Give the total for all contributions received during the period of time covered by this report. Contributions should be listed by type (money or in-kind) rather than contributor. See note on contribution limits on the back of this form. Use a separate sheet to itemize all contributions from a single source that exceeded \$100 during the calendar year. This itemization must include name, address, employer or occupation if self-employed, amount and date for these contributions. CASH. **TOTAL CASH-ON-HAND** IN-KIND TOTAL AMOUNT RECEIVED DISBURSEMENTS include the amount, date and purpose for all disbursements made during the period of time covered by report. Attach additional sheets if necessary. Date Purpose **Amount** TOTAL CORPORATE PROJECT EXPENDITURES Corporations must list any media project or corporate message project for which contribution(s) or expenditure(s) total more than \$200. Submit a separate report for each project. Attach additional sheets if necessary. Project title or description Date Name and Address Expenditure or Purpose of Recipient Contribution Amount I certify that this is a full and true statement. Signature Telephone 701-261-4991 Email (if available) Brian - MANCINI 6