

CAMPAIGN FINANCIAL REPORT

(All of the information in this report is public information)

Name of candidate, committee or corporation STEVEN FELDMAN

Office sought or ballot question MAYOR District 56950

Type of report _____ Candidate report
 _____ Campaign committee report
 _____ Association or corporation report
X _____ Final report

Period of time covered by report:
 from 5/17/16 to 11/8/16

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 \$ 500.00 TOTAL CASH-ON-HAND \$ 61.32
 IN-KIND + \$ _____
 TOTAL AMOUNT RECEIVED = \$ 500.00

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
9/9/16	CARDS (2,000) + FLYERS (1,000)	\$192.83
9/9/16	20-18" X 24" SIGNS	\$245.85
	TOTAL	\$438.68

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	Expenditure or Contribution Amount
		TOTAL	

I certify that this is a full and true statement. [Signature] 11/14/16
 Signature Date

Printed Name STEVEN D. FELDMAN Telephone (763) 670-6389 Email (if available) _____

Address 22766 POPPY ST. NW, ST. FRANCIS, MN 55070

Report

Office

Name

For Office Use Only:



STEVE'S
✓ AIC

BANK OF THE WEST

Ramsey
14125 ST FRANCIS BLVD
RAMSEY MN 55303

Please retain receipt for your records.
Transaction is subject to verification.

DEPOSITDDA
Account# 86734 11:32:09 09/09/2016
00977-03 96
Posting Date 09/2016

AMOUNT 500.00 USD

AVAILABLE BALANCE 1,470.54 USD
CURRENT BALANCE 1,870.54 USD

2016
CAMPAIGN CONTRIBUTION

1-800-488-BANK 2265)

Office DEPOT OfficeMax

Office Max 6215
3400 124th ave nw
Coon Rapids, Mn 55433
763-323-9750

09/09/2016 16.4.2 12:07 PM
STR 6215 REG 4 TRN 8809 EMP 281902

SALE

Product ID	Description	Total
167060	BW SS Letter	
1,000 @ 0.14		140.00
Bulk @0.08		-60.00
	You Pay	80.00SS
	Subtotal:	80.00
	Sales Tax:	5.70

Order Management Invoice # 8634574810014
Approval Code: 084924

114318 JDA GMILL ORDE 107.13 E
Total: **192.83**
Debit Card 4331: 192.83

TDS Chip Read
AID A0000000042203 424F5720444542495420
TVR 0000048000
CVS PIN Verified

Total Savings:
\$60.00

Office of the Minnesota Secretary of State

CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING

Instructions

Each county, municipal or school district candidate or treasurer of a committee formed to promote or defeat a ballot question shall certify to the filing officer that all reports required by *Minnesota Statutes 211A.02* have been submitted to the filing officer or that the candidate or committee has not received contributions or made disbursements exceeding \$750 in the calendar year. The certification shall be submitted to the filing officer not later than seven days after the general or special election. (*Minnesota Statutes 211A.05, subdivision 1*)

Campaign Information

Name of candidate or committee: Jerry Tveit
Office sought by candidate (if applicable): Mayor
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: [Handwritten Signature]

Date: 11-21-16

CAMPAIGN FINANCIAL REPORT

(All of the information in this report is public information)

Name of candidate, committee or corporation Robert A Bauer
 Office sought or ballot question City Council District _____

Type of report _____ Candidate report
 _____ Campaign committee report
 _____ Association or corporation report
X Final report
 Period of time covered by report: from 5/23/16 to 11/8/16

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 \$ 150.00 TOTAL CASH-ON-HAND \$ 0
 IN-KIND + \$ 0
 TOTAL AMOUNT RECEIVED = \$ 150.00

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
<i>See attached</i>		
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	Purpose	Name and Address of Recipient	Expenditure or Contribution Amount
TOTAL			

I certify that this is a full and true statement. _____
 Signature [Signature] Date 11/10/16

Printed Name Robert Bauer Telephone 7634390694 Email (if available) rbauer2002@gmail.com
 Address 23246 Kerry St NW St Francis, mn 55070

Report

Office

For Office Use Only: Name

Contributions

9/14/16 Marty LaBrie(Retired) 21799 Tyler St. NE East Bethel, MN 55011 \$150

Disbursements

Signs (primary)	\$245.85
Cards & Flyers	\$132.27
T-shirt	\$127.40
Newspaper Ad (x2)	\$102.00
<u>Signs (General)</u>	<u>\$232.46</u>
Total	\$839.98

Office of the Minnesota Secretary of State

CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING

Instructions

Each county, municipal or school district candidate or treasurer of a committee formed to promote or defeat a ballot question shall certify to the filing officer that all reports required by *Minnesota Statutes* 211A.02 have been submitted to the filing officer or that the candidate or committee has not received contributions or made disbursements exceeding \$750 in the calendar year. The certification shall be submitted to the filing officer not later than seven days after the general or special election. (*Minnesota Statutes* 211A.05, subdivision 1)

Campaign Information

Name of candidate or committee: Robert Bauer
Office sought by candidate (if applicable): City Council
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: 
Date: 11/10/16

Office of the Minnesota Secretary of State

CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING

Instructions

Each county, municipal or school district candidate or treasurer of a committee formed to promote or defeat a ballot question shall certify to the filing officer that all reports required by *Minnesota Statutes 211A.02* have been submitted to the filing officer or that the candidate or committee has not received contributions or made disbursements exceeding \$750 in the calendar year. The certification shall be submitted to the filing officer not later than seven days after the general or special election. (*Minnesota Statutes 211A.05*, subdivision 1)

Campaign Information

Name of candidate or committee: TIM BROWN
Office sought by candidate (if applicable): COUNCIL
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: 

Date: 11/14/10

CAMPAIGN FINANCIAL REPORT

(All of the information in this report is public information)

Name of candidate, committee or corporation Joseph L Muehlbauer

Office sought or ballot question Council member District _____

Type of report _____ Candidate report
 _____ Campaign committee report
 _____ Association or corporation report
X Final report

Period of time covered by report:
 from _____ to _____

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.

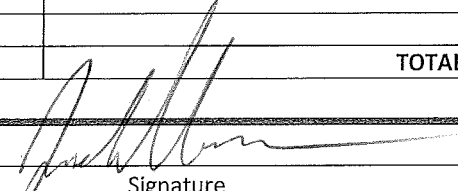
Date	Purpose	Amount
7/27/16	Election signs for council campaign	245.85
	TOTAL	

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	Purpose	Name and Address of Recipient	Expenditure or Contribution Amount
		TOTAL	

I certify that this is a full and true statement.  11/14/16
 Signature Date

Printed Name: Joseph Muehlbauer Telephone: 763-398-9533 Email (if available): joe.muehl@msn.com

Address: 3459 228th Ave NW St. Francis, MN 55070

Report
Office
Name
For Office Use Only:

Office of the Minnesota Secretary of State

CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING

Instructions

Each county, municipal or school district candidate or treasurer of a committee formed to promote or defeat a ballot question shall certify to the filing officer that all reports required by *Minnesota Statutes 211A.02* have been submitted to the filing officer or that the candidate or committee has not received contributions or made disbursements exceeding \$750 in the calendar year. The certification shall be submitted to the filing officer not later than seven days after the general or special election. (*Minnesota Statutes 211A.05*, subdivision 1)

Campaign Information

Name of candidate or committee Garbage Haulers for Citizen Choice

Office sought by candidate (if applicable)

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 John M. Kysylyczyn, treasurer

Date 12/5/16



