

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation SHERRY ALLENSPACH
 Office sought or ballot question CITY COUNCIL District EAST BETHEL

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

Period of time covered by report:
 from 7/31/2020 to 9/4/2020

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 \$ 975.00 TOTAL CASH-ON-HAND \$ 975.00
 IN-KIND + \$ -
 TOTAL AMOUNT RECEIVED = \$ 975.00

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
7/30/2020	Candidacy filing fee (cash paid by candidate)	5.00
TOTAL		5.00

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. Sherry Allenspach 9/04/2020
 Signature Date

Printed Name SHERRY ALLENSPACH Telephone 6124194596 Email (if available) sherallen@aal.com
 Address 3427 217TH AVE NE, EAST BETHEL MN 55011

Report Office Name For Office Use Only:

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation SHERRY ALLENSPACH
 Office sought or ballot question CITY COUNCIL District EAST BETHEL

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

Period of time covered by report:
 from 09/05/2020 to 11/04/2020

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 \$ 1,025.00 TOTAL CASH-ON-HAND \$ 528.20
 IN-KIND + \$ -
 TOTAL AMOUNT RECEIVED = \$ 1,025.00

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
09/18/2020	FOREST LAKE PRINTING - LAWN SIGNS	468.67
09/24/2020	UPS - PRINTING OF LITERATURE	107.13
10/09/2020	USPS - POST CARD STAMPS	7.00
10/21/2020	USPS - POST CARD STAMPS	14.00
TOTAL		596.80

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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.

Sherry Allenspach
 Signature

Date

Printed Name SHERRY ALLENSPACH Telephone 612 419 4596 Email (if available) sherallen@ad.com
 Address 3427 217TH AVE NE, EAST BETHEL MN 55011

Report

Office

Name

For Office Use Only:

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

Mark Lutcarish

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

11-9-2020

CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING

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Campaign Information

Name of candidate or committee BRIAN MUNDLE

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 to date by Minnesota Statutes 211A.02 have been submitted to the filing officer.

I do swear (or affirm) that campaign contributions or disbursements did not exceed \$750 in the calendar year.

Signature of candidate or committee treasurer B. Mundle

Date Nov 6, 2020

CAMPAIGN FINANCIAL REPORT (Photocopy version)

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation BRIAN MUNDLE

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 9/7 to 10/24

CONTRIBUTIONS RECEIVED

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

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
9/7/2020	SIGNS	\$78.04
9/7/2020	BUTTONS/STICKERS	\$275.85
10/23/2020	PRINTING SERVICE	\$479.51
10/24/2020	MAILING AT POST OFFICE	\$561.54
	TOTAL	\$1,394.94

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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. Brian Mundle Nov 6 2020
 Signature Date

Printed Name BRIAN MUNDLE Telephone 763-227-0120 Email (if available) _____
 Address 24159 PIERCE ST NE, EAST BETHEL, MN 55005

Report

Office

Name

For Office Use Only:

CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING

Instructions

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Campaign Information

Name of candidate or committee
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

Date