CAMPAIGN FINANCE REPORT OF RECEIPTS AND EXPENDITURES As required by the Hennepin County Financial Disclosure Law: Minnesota Statutes 383B.041-383B.058

Received 1-31-2022

ALL MODARDID ON THE REPORT IF PARLIC. TYEE OR PRINTIN BLACK MSC. RELARA COPY OF THE REPORT FOR YOUR PILEE. 1. Read Committee or Fundi Pamele Transvers Name) (Freasure's Name) (E-mail Address of Committee or Maining Address for Committee Disaness) (Treasure's Adming Address for Committee Disaness) (Treasure's Adming Address for Committee Disaness) pamele Transvers' Name) (E-mail Address) (E-mail Address) 2 Attabular Maining Address for Committee Disaness) (Treasure's Address for Committee or Officer's Name, Address, Phone, (Attach new 'Registration & Statement of Organization') The Statement of Committee or Officer's Name, Address and Exchip Statement of Statement of Committee registration. 3 Change in Committee or Officer's Name, Address, Phone, (Attach new 'Registration & Statement of Committee registration. 4 Termination of Committee or All delts must be paid and Exchip Statement of Statement of Committee registration. 7 Termination of Committee or All delts must be paid and Exchip Statement of Statement of Committee registration. 8 2021 ANNUAL REPORT DUE Monday January 31, 2022 221 ANNUAL REPORT DUE Monday January 31, 2022 221 ANNUAL REPORT Statement from Inte 250 Condumities or Statement from Inte 250 Trough: 12/31/2021 1 DUSTRATIONS: S 0.02 2 S 0.05 (Totest Committee) S 0.02 1 DUST		As required by the Henr	nepin County Financial Disclosure Law: Minnesota Si	tatutes 383B.041-383B.058 CMS
[Name of Committee or Fund) pamil_ichobke [E-mail Address) 2. Pamile 1. uchoke [E-mail Address) [E-mail Address) 3. Met IW. Unp St., Bloomington, MN, 55438. (Treasure's Ataling, Address for Committee Dusiness) [E-mail Address) [E-mail Address) 3. Treasure's Autime, Notices the Dusiness) [E-mail Address) [E-mail Address) 3. Treasure's Autime, Notices the Dusiness, Hair exponding bendo. (Complete lines 49 ±12 as applicable) [E-mail Address) 3. On activity with 333. Bdv1-086 candidates, this reporting bendo. (Complete lines 49 ±12 as applicable) [Emperitude Committee or Stress, Plass candidates and the norme than \$100. Termination of committee registration. If your committee is a state committee is a	ALL	INFORMATION ON THIS REPORT IS PUBLIC.	TYPE OR PRINT IN BLACK INK.	RETAIN A COPY OF THIS REPORT FOR YOUR FILES.
2. Panela Tucholke (Treasure's Name) (Treasure	1.)	
a) def SV-109 ^m St. Bioominaton, MN 5543 (Treasurer's Daytime Phone Number: 612-987-1431 b) Change in Committee or Officier's Name, Address, Phone (Attach new 'Registration & Statement of Organization') b) No activity wine bias Registration and Eding Balance at 98 & 912 below) c) No activity wine bias Registration and Eding Balance at 98 & 912 below) c) No activity wine bias Registration and Eding Balance at 98 & 912 below) c) No activity wine bias Registration and Eding Balance at 98 & 912 below) c) No activity wine bias Registration and Eding Balance at 98 & 912 below) c) No activity wine bias Registration and Eding Balance at 98 & 912 below) c) No activity wine bias Registration and Eding Balance at 98 & 912 below) c) No activity wine bias Registration and Eding Balance at 98 & 912 below) c) No activity wine bias Registration and Eding Balance at 98 & 912 below) c) No activity wine bias Registration and Eding Balance at 98 & 912 below) c) No activity wine bias Registration and Eding Balance at 98 & 912 below) c) No activity wine bias Registration and Edination and Palificial Functions Committee - 1988 38 c) Registration and Registration	2.		q	amtucholke@msn,.com
Treasurer's Mailing Address for Committee Business) 4. Treasurer's Daytime Phone Number: 612-897-1431 Change in Committee or Other's Name, Address, Phone, (Attach new "Registration & Statement of Organization") No activity since lask Report. (Inset Beginning and Ending Balance at #0 & #12 below) 8. No activity since lask Report. (Inset Beginning and Ending Balance and the none than \$100. Termination of committee registration. If your committee is a state committee, please contact our office regarding termination. 7. 2021 ANUAL REPORT DUE Monday January 31, 2022 Image: State Print	2			(E-mail Address)
 Change in Committee or Officer's Name, Address, Phone. (Attach new "Registration & Statement of Organization") No activity since last Report. (Insert Beginning and Ending Balance at 98 #12 below) No activity with 338.44-1.068 candidates. Inits reporting period. (Competite Insert 94=12 as applicable) Termination of Committee - All debts must be paid and Ending Balance and be no more than \$100. Termination of committee registration. If your committee is a state committee, please contact our office regarding termination. If your committee is a state committee, please contact our office regarding termination. 2021 Andidates on the ballot in 2021: From: 10/20/2021 Through: 12/31/2021 BEGINNING CASH BALANCE THIS REPORT: \$ 1.998.38 (Insert Ending Cash Balance from last report) Activity Reported this year. COLUMN A Activity Reported this year. COLUMN B Activity Reported this year. Activity In THIS REPORTING PERIOD A + B Total Activity for Inter Last Reporting period.) Its UBTRACTIONS: S 1.706.50.75 (Insert amount from line 24) (Insert amount from line 34) UBURTACTIONS & OUTSTANDING LOANS RECEIVABLE: COLUMN A Activity Roported on Last Reporting period.) Its UBTRACTIONS & OUTSTANDING LOANS RECEIVABLE: COLUMN A Activity Tin THIS REPORTING PERIOD A + B = Total Activity for This Calendar Year Activity Reported on Last Reporting period.) Its Address Reporting period. Its Address Reporting period. S 0.00 (Insert total of line 13, columns A + B) Column C, Line 13 forn Last Reporting period. S 0.00 (Insert total of line 13, columns A + B) Goods/Services Given to Others: S 0.00 (Insert total of line 13, columns A + B) Column C, Line	э.		ess)	
 No activity since last Report. (Insert Beginning and Ending Balance at #9 & #12 as applicable) No activity with 3380.41-085 candidates, this reporting period. (Complete lines #9-#12 as applicable) Termination of Committee - Ald edets must be paid and Ending Balance can be no more than \$100. Termination of committee registration.	4.	Treasurer's Daytime Phone Number:612-	987-1431	
64. No activity with 3838.041-058 candidates, this reporting period. (Complete lines 49-412 as applicable) 7. Termination of Committee - All deta must be plad and Ending Balance can be no more than \$100. Termination of committee registration. If your committee is a state committee, jease contact our office regarding termination. 8. 2021 Candidates on the ball of And Policial Funds or Committees: DUE Monday January 31, 2022 REPORTING PERIOD: (check one) EPORTING PERIOD: (check one) EPORTING PERIOD: (check one) 9. BEGINNING CASH BALANCE THIS REPORT: \$ 1.998.38 COLUMN A COLUMN B COLUMN B Activity Reported this year. In providues reporting period.) (neert Ending Cash Balance from last report) 10. Activity Reported this year. ACTIVITY IN THIS REPORTING PERIOD A + B = Total Activity for This Calendar Year 10. ApDITIONS: \$ 9.565.13 (insert amount from line 25) (insert total of line 10, columns A + B) 11. SUBTRACTIONS: \$ 9.266.75 (insert amount from line 34) (insert total of line 11, columns A + B) 12. ENDING CASH BALANCE THIS REPORT: \$ 2.9.00 (insert total of line 13, columns A + B) 13. In-Kind Donations Receivable: COLUMIN B COLUMIN A Activity Reporting perio	5.	Change in Committee or Officer's Name, Addr	ess, Phone. (Attach new "Registration & Statem	ent of Organization")
1 Termination of Committee - All dobts 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. 2021 Column 2 (and dotter and bottle can be balled and committee). From: 10/20/2021 Through: 12/31/2021 2021 Candidates on the balled and Political Funds or Committees: From: 10/20/2021 Through: 12/31/2021 2 Column 2 (and dotter and bottle can be balled in 2021): From: 11/2021 Through: 12/31/2021 9. BEGINNING CASH BALANCE THIS REPORT: S 1.998.38 (insert Ending Cash Balance from last report) Column 2 0. Activity Reported this year. COLUMN B COLUMN C 1. In previous reporting periods. ACTIVITY IN THIS REPORTING PERIOD A + B =Total Adrivity for This Calendar Year 10. ADDITIONS: \$ 9.062.15 S 9.265.15 (insert anount from line 25) (insert anount from line 34) 11. SUBTRACTIONS: \$ 1.706.50 \$ 9.273.25 (insert anount from line 34) (insert anount from line 34) 12. ENDING CASH BALANCE THIS REPORT: \$ 2.91.90 (insert total of line 10, columns A + B) 12. ENDING CASH BALANCE THIS REPORT: \$ 9.00 (insert total from line 39) (insert total from l	6.	No activity since last Report. (Insert Beginning	and Ending Balance at #9 & #12 below)	
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(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:	11.		- \$ 1,706,50	\$ 9,273,25
(Line 9 + line 10(column B) - line 11(column B) SUMMARY OF IN-KIND DONATIONS & OUTSTANDING LOANS RECEIVABLE: COLUMN A COLUMN B COLUMN C Activity Reported on Last Report ACTIVITY IN THIS REPORTING PERIOD A + B = Total Activity for This Calendar Year 13. In-Kind Donations Received: \$ 0.00 A + B = Total Activity for This Calendar Year 13. In-Kind Donations Received: \$ 0.00 (Insert total from line 36) \$ 0.00 (Column C, Line 13 from Last Reporting period.) + \$ 0.00 \$ 0.00 (Insert total from line 39) 14. Goods/Services Given to Others: \$ 0.00 \$ 0.00 (Insert total from line 39) \$ 0.00 15. Current Balance of Outstanding Loans Receivable (loaned to others) > \$ 0.00 (Insert total of line 14, columns A + B) 16. Current Balance of Outstanding Loans Receivable (loaned to you) > \$ 0.00 (Insert total Current Balance from line 45) 17. Current Balance of Outstanding Loans Payable (loaned to you) > \$ 0.00 (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) Qarre (a S. Tu Curler), CERTIFY THAT THIS REPOR				
(Line 9 + line 10(column B) - line 11(column B) SUMMARY OF IN-KIND DONATIONS & OUTSTANDING LOANS RECEIVABLE: COLUMN A COLUMN B COLUMN C Activity Reported on Last Report ACTIVITY IN THIS REPORTING PERIOD A + B = Total Activity for This Calendar Year 13. In-Kind Donations Received: \$ 0.00 A + B = Total Activity for This Calendar Year 13. In-Kind Donations Received: \$ 0.00 (Insert total from line 36) \$ 0.00 (Column C, Line 13 from Last Reporting period.) + \$ 0.00 (Insert total from line 39) \$ 0.00 14. Goods/Services Given to Others: \$ 0.00 \$ 0.00 (Insert total from line 39) \$ 0.00 15. Current Balance of Outstanding Loans Receivable (loaned to others) > \$ 0.00 (Insert total Current Balance from line 45) SUMMARY OF OUTSTANDING DEBT: 16. Current Balance of Outstanding Loans Payable (loaned to you) > \$ 0.00 (Insert total Current Balance from line 42) 17. Current Balance of Outstanding Unpaid Bills/Advance of Credit	12.	ENDING CASH BALANCE THIS REPORT:	= \$ 291.90	
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Activity Reported on Last Report ACTIVITY IN THIS REPORTING PERIOD A + B = Total Activity for This Calendar Year 13. In-Kind Donations Received: \$ 0.00 \$ 0.00 (Insert total of line 13 from Last Reporting period.) 14. Goods/Services Given to Others: \$ 0.00 \$ 0.00 (Insert total of line 13, columns A + B) 15. Current Balance of Outstanding Loans Receivable (Ioaned to others) \$ 0.00 (Insert total of line 14, columns A + B) 16. Current Balance of Outstanding Loans Receivable (Ioaned to others) \$ 0.00 (Insert total Current Balance from line 45) 17. Current Balance of Outstanding Loans Payable (Ioaned to you) \$ 0.00 (Insert total Current Balance from line 42) 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) Pamel(a S. Tu Current Hat THIS REPORT IS COMPLETE, TRUE AND CORRECT. SIGNATURE OF TREASURER:	SUI	MARY OF IN-KIND DONATIONS & OUTSTANDING	G LOANS RECEIVABLE:	
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(Column C, Line 13 from Last Reporting period.) (Insert total from line 36) (Insert total of line 13, columns A + B) 14. Goods/Services Given to Others: \$ 0.00 (Insert total from line 39) (Insert total of line 14, columns A + B) 15. Current Balance of Outstanding Loans Receivable (loaned to others) -\$ 0.00 (Insert total of line 14, columns A + B) 15. Current Balance of Outstanding Loans Receivable (loaned to others) \$ 0.00 (Insert total Current Balance from line 45) SUMMARY OF OUTSTANDING DEBT: 16. Current Balance of Outstanding Loans Payable (loaned to you) > \$ 0.00 16. Current Balance of Outstanding Loans Payable (loaned to you) > \$ 0.00 (Insert total Current Balance from line 42) 17. Current Balance of Outstanding Unpaid Bills/Advance of Credit > \$ 0.00 (Insert total Amount Owed from line 42) 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) Pamela S. Tuchol Ke, CERTIFY THAT THIS REPORT IS COMPLETE, TRUE AND CORRECT. SIGNATURE OF TREASURER DATE: I - 30-2022 DATE: I - 30-2022	13.			
14. Goods/Services Given to Others: \$ 0.00 (Column C, Line 14 from Last Reporting period.) -\$ 0.00 (Insert total from line 39) \$ 0.00 (Insert total of line 14, columns A + B) 15. Current Balance of Outstanding Loans Receivable (loaned to others) \$ 0.00 (Insert total Current Balance from line 45) SUMMARY OF OUTSTANDING DEBT: \$ 0.00 (Insert total Current Balance of Outstanding Loans Payable (loaned to you) \$ 0.00 (Insert total Current Balance from line 45) 16. Current Balance of Outstanding Unpaid Bills/Advance of Credit		1		
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16. Current Balance of Outstanding Loans Payable (loaned to you) > \$ 0.00 (Insert total Current Balance from line 42) 17. Current Balance of Outstanding Unpaid Bills/Advance of Credit				(filsen total Current Balance from file 45)
(Amount from Last Report: \$ 0.00) (Insert total Current Balance from line 42) 17. Current Balance of Outstanding Unpaid Bills/Advance of Credit			oaned to you)>	\$ 0.00
(Amount from Last Report: \$ 0) (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) Pamela S. Tuckolke, CERTIFY THAT THIS REPORT IS COMPLETE, TRUE AND CORRECT. SIGNATURE OF TREASURER: DATE: 1-30-2022				
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) <u>Parnela S. Tucholke</u> , CERTIFY THAT THIS REPORT IS COMPLETE, TRUE AND CORRECT. SIGNATURE OF TREASURER: <u>Jan</u> , <u>Jan</u>	17.		ance of Credit>	
required information is guilty of a gross misdemeanor. I, (Print Name) <u>Parnela S. Tucholke</u> , CERTIFY THAT THIS REPORT IS COMPLETE, TRUE AND CORRECT. SIGNATURE OF TREASURER: Jun, June DATE: 1-30-2022				
	18.	required information is guilty of a gross misdemeanpr.		
	0101			
FILE THIS BEDORT WITH	SIG	VATURE OF TREASURER.	FILE THIS REPORT WITH:	DATE: 1-20-2022

HENNEPIN COUNTY ELECTIONS DIVISION • MC 012 GOVERNMENT CENTER, MINNEAPOLIS, MN 55487-0012 • (612)596-7152

DECEIDE AND EXDENDITUDES WORKSHEET FOR THIS DEDORTING DEDIOD ONLY

RE	CEIPT AND EXPENDITURES WORKSHEE	I FOR THIS REPORTING	PERIOD ONLY	
NAI	ME OF COMMITTEE OR FUND: <u>Ricardo Oliva P</u>	rincipal Campaign Committee		DATE: <u>1/30/2022</u>
AD	DITIONS: (Income)			
19.	Total ITEMIZED Contributions:	\$ 0.00 (Insert total from line 35)		
20.	Total NON-ITEMIZED Contributions:	<u>\$ 0.00</u>	\$ 0.00 (Subtotal: lines 19 + 20)	
21.	Income from bank dividends, interest, etc:	\$ 0.02		
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: <u>0</u>	<u>\$ 0.00</u>	<u>\$.02</u> (Subtotal: lines 21+22+23+24)	
25.	TOTAL INCOME:	<u>\$.02</u> (TOTAL lines 19 through 24.	Transfer this amount to Line 10, Column B.)
SUI	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 (Subtotal: lines 26 + 27)	
28.	Total ITEMIZED Operating Expenditures:	\$ 1,694.50 (Insert total from line 37)		
29.	Total NON-ITEMIZED Operating Expenditures:	\$ 12.00	\$ 1,706.50 (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)	\$ 0.00 (Insert total from line 41)		
32.	New Loans Receivable (loaned to others):	\$ 0.00 (Insert total from line 43)		
33.	Other: <u>0</u>	\$ 0.00	\$ 0.00 (Subtotal: lines 30+31+32+33)	

34. TOTAL EXPENDITURES:

\$ 1,706.50 (Total lines 26 through 33. Transfer this amount to Line 11, Column B.)

Important information: Addresses submitted on Schedule A are public data pursuant to the Minnesota Government Data Practices Act. This form is retained on file in the Hennepin County Elections Division. As a convenience, Hennepin County also displays Schedule A on the Hennepin County web site. Please check the box and initial the form on the line provided if you do not want the address of contributors to be displayed on the website. \Box If selected, please submit two versions of Schedule A, one with contributors' addresses and one without.

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

NAME OF COMMITTEE OR FUND: Ricardo Oliva Principal Campaign Committee

DATE: 1/30/2022

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 contribution current reporting			
				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

	Subtotal ITEMIZED Monetary Contributions received this period:	\$ 0.00
	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)	\$ 0.00

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:	\$ 0.00
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: Ricardo Oliva Principal Campaign Committee

DATE: 1/30/2022

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.

				List expenditures here for the current reporting period		
			COLUMN A	COLUMN B	COLUMN B1	COLUMN C
	ALPHABETICAL ORDER!		Previous Total	Operating	Contributions	Total to Source
Date Paid	Vendor or Recipient Committee Name and Address	Purpose for Expenditure	For This Year	Expenditures	to Others	Year to Date
10/22/21	Facebook, 1601 Willow Road, Menlo Park, CA 94025-1452	Advertisement	500.00	250.00		750.00
10/25/21	Facebook, 1601 Willow Road, Menlo Park, CA 94025-1452	Advertisement		250.00		1,000.00
10/29/21	Facebook, 1601 Willow Road, Menlo Park, CA 94025-1452	Advertisement		400.00		1,400.00
11/1/21	Facebook, 1601 Willow Road, Menlo Park, CA 94025-1452	Advertisement		341.12		1,741.12
12/1/21	Facebook, 1601 Willow Road, Menlo Park, CA 94025-1452	Advertisement		258.88		2,000.00
11/2/21	NationBuilder, PO Box 811428, Los Angeles, CA 90081	Web Fees	592.00	191.00		783.00
12/2/21	NationBuilder, PO Box 811428, Los Angeles, CA 90081	Web Fees		3.50		786.50

Subtotal ITEMIZED Operating Expenditures this period:	\$ 1,694.50
Subtotal ITEMIZED Operating Expenditures this period listed on previous page:	\$ 0.00
37. TOTAL ITEMIZED OPERATING EXPENDITURES THIS PERIOD: (Transfer this amount to Line 28)	\$ 1,694.50

	Subtotal ITEMIZED Contributions to Others this period:	\$ 0.00
	Subtotal ITEMIZED Contributions to Others this period listed on previous page:	\$ 0.00
38.	TOTAL ITEMIZED CONTRIBUTIONS TO OTHERS THIS PERIOD: (Transfer this amount to Line 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: Ricardo Oliva Principal Campaign Committee

DATE: 1/30/2022

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 & Service	es + Cash = \$100+	
				Given in Cu	urrent 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	Goods and Services given i	n this period: (Transfer this	s amount to Line 1	4, Column B)	\$ 0.00	

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

				r 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
40. Total I	New Loans Payable this period: (Transfer this am	nount to Line 22)	\$ 0.00		
41. Total I	Repayment of Loans Payable this period: (Transfe	er this amount to Line	31)	\$ 0.00	
42. Currer	nt Balance of Outstanding Loans Payable: (Transt	er this amount to Line	16)		\$ 0.00

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

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

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

	Alphabetical Order!	Current Balance
Date	Name & Address of Vendor of Goods or Services Received But Not Paid For	Owed by You
46. Curre	nt 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 or suggestion of any candidate, candidate's campaign committee or agent.

Signature of Treasurer

Date