

Report

Office

Name: _____

For Office Use Only:

Period of time covered by report:

from 8/18 to 11/18

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.

TOTAL CASH-ON-HAND \$ 0

+ \$ 0

= \$ ~~0~~

Include the amount, date and purpose for all disbursements made during the period of time covered by report. Attach additional sheets if necessary.

<i>Date</i>	<i>Purpose</i>	<i>Amount</i>
	TOTAL	

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 _____

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

Signature

Signature

Date _____

Address 45395 20th Ave

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 AJ LINNELL
Office sought by candidate (if applicable) SCHOOL BOARD
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.

of ☒ 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 *AJ Linnell*

Date 11/14/18