## CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING

Each county, municipal or school district level 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 no later than seven days after the general or special election. (Minnesota Statutes 211A.05, subdivision 1).

Name of candidate or committee Lini BEA #7352	
Office sought by candidate	_(if applicable)
or	
Identification of ballot question	_(if applicable)
Check appropriate box below:	
I certify that all campaign financial reports required by Minnesota Stat 211A.02 have been submitted to the filing officer.	utes
I certify that campaign contributions or disbursements did not exceed the calendar year.	\$750 in
Sherin fluorel 4/20/1 (signature of candidate or committee treasurer) (Date)	8.

Type of

report

**CASH** 

IN-KIND

TOTAL AMOUNT RECEIVED

Date

## CAMPAIGN FINANCIAL REPORT (All of the information in this report is public information) Name of candidate, committee or corporation Education Minnesota BRAIN ERD Office sought or ballot question Candidate report Period of time covered by report: Campaign committee report from 1/31/2018 to 4/12/2018 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. TOTAL CASH-ON-HAND **DISBURSEMENTS** Include the amount, date and purpose for all disbursements made during the period of time covered by report. Attach additional sheets if necessary. **Purpose** Amount TOTAL CORPORATE PROJECT EXPENDITURES Project title or description \_\_\_\_\_

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.

Date	Purpose	Name and Address of Recipient	Expenditure or Contribution Amount
		TOTAL	

I certify that this is a full and true statement.	Tem Edenie	4/12/2018
	Signature	Date
Printed Name Im Edinger	Telephone 218-839-785	Email (if available) + im edinger @ 15d 18
Address Ch Education Munesta	BRAINFRD 804	Oak St Brainerd, MN
		56401

## (All of the information in this report is public information) or corporation Education Minnes of a

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contributions from a	single source that exceeded \$100 c employed, amount and date for the	luring the calendar year. This itemizatio	n must include name, address, en
CASH	\$	TOTAL CASH-ON-HA	ND \$
IN-KIND	+ <		
TOTAL AMOUNT R	ECEIVED =		
	\$		
Attach additional s	t, date and purpose for all disburneets if necessary.	rsements made during the period of  Purpose	
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, ,	regarding by	send postcaro ond referend le voters in	Um
	15D 1810		TOTAL \$2,197.97
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