

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Kristine Thompson

Office sought or ballot question Moorhead City Council Ward 1 District \_\_\_\_\_

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

Period of time covered by report:

from 8/1/2020 to 10/9/2020

## 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 \$ 0  
 IN-KIND + \$ 0  
 TOTAL AMOUNT RECEIVED = \$ 0

TOTAL CASH-ON-HAND \$ 0

**RECEIVED**  
 OCT 14 2020

City Clerk's Office

## 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
09/05/2020	Logo Design - Devon Manney	150.00
08/16/2020	Website Domain - GoDaddy	114.18
10/ /2020	Postcards -	661.00
10/ /2020	Mailing List Fee	30.00
TOTAL		955.18

## 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. Kristine Thompson 10/10/2020  
 Signature Date

Printed Name Kristine Thompson Telephone 701 412 3623 Email (if available) Kristine.Thompson.mn@gmail.com

Address 122 10th ST N, Moorhead, MN 56560

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 Kristine Thompson

Office sought or ballot question City Council Ward 1 (Moorhead) District \_\_\_\_\_

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

Period of time covered by report:  
 from 10/10/2020 to 10/28/2020

## 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	\$	<u>0</u>	TOTAL CASH-ON-HAND	\$	<u>0</u>
IN-KIND	+	\$ <u>0</u>			
TOTAL AMOUNT RECEIVED	=	\$ <u>0</u>			

## 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
10/23/2020	Postcards	368.00
10/27/2020	Postage	1001.69
	<b>TOTAL</b>	

## 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
		<b>TOTAL</b>	

I certify that this is a full and true statement. Kristine Thompson 10/28/2020  
 Signature Date

Printed Name Kristine Thompson Telephone 701-412-3623 Email (if available) Kristine.Thompson.mn@gmail.com  
 Address 122 10th St N Moorhead MN 56560

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 Kristine Thompson  
 Office sought or ballot question City Council District Ward 1

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

Period of time covered by report:  
 from \_\_\_\_\_ to \_\_\_\_\_

## CONTRIBUTIONS RECEIVED

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CASH \$ \_\_\_\_\_ TOTAL CASH-ON-HAND \$ 0  
 IN-KIND + \$ \_\_\_\_\_  
 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
<b>TOTAL</b>		<u>0</u>

## 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
<b>TOTAL</b>			

I certify that this is a full and true statement. Kristine Thompson 11/4/2020  
 Signature Date  
 Printed Name Kristine Thompson Telephone 701 412 3623 Email (if available) \_\_\_\_\_  
 Address 122 10th ST N MOOKHEAD MN 56560

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 Kristine Thompson  
Office sought by candidate (if applicable) City Council Ward 1 (MOORHEAD MN)  
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 Kristine Thompson  
Date 11/4/2020