

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Mare Hecluncl
 Office sought or ballot question City Council District 4
 Type of report: Candidate report Campaign committee report Association or corporation report Final report
 Period of time covered by report: from 9/1/18 to 10/15/18

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 \$ 3,223 TOTAL CASH-ON-HAND \$ 1,440.38
 IN-KIND + \$ _____
 TOTAL AMOUNT RECEIVED = \$ 3,223

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
	<u>See Attached</u>	
TOTAL		

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.

Jennifer Beron
Signature

10/23/18
Date

Printed Name Jennifer Beron Telephone 612 501 7025 Email (if available) Beronsbaskets@gmail.com
 Address 230 W AVE W SABIN MN 55080

Report

Office

Name

For Office Use Only:

Marc Hedlund Campaign
Disbursements
9/1/18-10-15-18

<u>Date</u>	<u>Purpose</u>	<u>Amount</u>
9/10/2018	Facebook cover & profile	\$137.50
	Yard sign design & coordination	\$82.50
	Yard Sign Production	\$762.00
	Lit Piece #1 Design & Coordination	\$151.25
	Lit Piece #1 Production	\$525.00
	Taxes	\$124.37
	Total:	<u>\$1,782.62</u>

Marc Hedlund Campaign
Itemized contributions

9/1/18=10/15/18

Date	Donor Name	Address	City	State	Zip	Occupation	Amount
9/15/2018	Carson Hedlund	201 17th ave ne	Roseau	mn	56751	retired	599
9/15/2018	Peggy Hedlund	201 17th ave ne	Roseau	mn	56751	retired	599
9/21/2018	erik hatch	807 Harwood Dr S	Fargo	nd	58104	realtor	250
10/15/2018	Steve Scheel	3900 River Oak Cir	Moorhead	mn	56560	business owner	600
10/15/2018	Emily Scheel	3900 River Oak Cir	Moorhead	mn	56560		600
Total:							2648

Marc Hedlund Campaign
Itemized contributions
9/1/18=10/15/18

Total:

5296

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Marc Hedlund
 Office sought or ballot question City Council District 4

Type of report: Candidate report Period of time covered by report:
 Campaign committee report from 9/1/18 to 11/13/18
 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.

CASH \$ 4423 TOTAL CASH-ON-HAND \$ 132.57
 IN-KIND + \$ _____
 TOTAL AMOUNT RECEIVED = \$ 4423

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
	<i>See Attached</i>	
	TOTAL	

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. Jennifer Benesh
 Signature _____ Date _____
 Printed Name Jennifer Benesh Telephone 612.501.7025 Email (if available) Beneshbasic@gmail.com
 Address 230 W AVE W STAIRW MN 55500

Report Office Name For Office Use Only: