

Campaign Finance & Public Disclosure Board

190 Centennial Office Building, 658 Cedar St, St Paul, MN 55155

cfb.mn.gov



Statement of Economic Interest

Candidate for local official position in a metropolitan governmental unit
under Minn. Stat. § 10A.01, subd. 22; and 10A.09, subd. 6a

Filing instructions

(General instructions for completing the form are on page 2)

- Your statement is due at the governing body of the metropolitan governmental unit within 14 days after signing an affidavit of candidacy.
- This form may be filed by mail or fax sent to the metropolitan governmental unit.
- Address questions to the governing body of the metropolitan governmental unit.

Individual information	Employment information
Name <i>Kari Rehrauer</i>	Occupation <i>Field Staff</i>
Address at which you wish to receive mail from the metropolitan governmental unit (You may use either a home or business address.) <i>12257 Larch Cir NW</i>	Name of employer - indicate if self-employed or not employed (include employer as a source of compensation on page 3) <i>Education Minnesota</i>
City, state, zip <i>Coon Rapids, MN 55448</i>	Business address <i>41 Sherburne Ave.</i>
Telephone (daytime) <i>763-767-5099</i>	City, state, zip of business <i>St. Paul, MN 55103</i>
Name of office <i>City Council Ward 2</i>	Email Address <i>Krehrauer@gmail.com</i>

Period covered

Original statement

6/2, 2020
date filed for office

Certification

I, *Kari Rehrauer*, certify that the information contained on this form, including
(print or type name) information on the schedules on page 3, is complete, true, and correct.

[Signature]

Signature of candidate or elected local official

6/7/2020

Date

Notice: Any person who signs and certifies to be true a statement which the person knows contains false information or omits required information is subject to a civil penalty imposed by the Board of up to \$3,000 and is subject to criminal prosecution for a gross misdemeanor.

Attach additional pages if necessary to complete any of these schedules.

Sources of compensation

----- Check each applicable box -----

Name of source	Director	Officer	Owner	Member	Partner	Employer	Employee	Honorarium
Education Minnesota						<input checked="" type="checkbox"/>		

Business or professional activity categories

----- Check the applicable box -----

Business or professional activity category (See page 4)	Employee: \$250 in income in month and owns 25% or more of business	Independent contractor: More than \$2,500 in compensation

Securities

Name of business in which security is held	Name of business in which security is held

Real property

----- Check one -----

County	Street address and city; or section, township, and range	Own	Mortgage (Held as seller)	Contract for deed (As buyer or seller)	Option to buy - option worth more than \$2,500	Option to buy - property worth more than \$50,000	Acreage (If applicable)

Pari-mutuel horse racing

----- Check one -----

	Partial interest	Full interest	Description of interest (horse, stable, etc.)
Official direct interest			
Official indirect interest			
Family interest			