

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Kari Rehrauer

Office sought or ballot question Coon Rapids City Council District Ward 2

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

Period of time covered by report:  
 from 6/2/20 to 8/18/20

## 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 \$ 830.00 TOTAL CASH-ON-HAND \$ 274.35  
 IN-KIND + \$ 0  
 TOTAL AMOUNT RECEIVED = \$ 830.00

## 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>6/30/20</u>	<u>Bank statement Fee</u>	<u>2.00</u>
<u>8/5/20</u>	<u>Act Blue Fee</u>	<u>3.31</u>
<u>8/5/20</u>	<u>Impact Printing - Signs</u>	<u>541.47</u>
<u>8/11/20</u>	<u>Act Blue Fee</u>	<u>8.87</u>
<b>TOTAL</b>		<b><u>555.65</u></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. [Signature] 8/18/2020  
 Signature Date

Printed Name Kari Rehrauer Telephone 763-767-5099 Email (if available) Krehrauer@gmail.com  
 Address 12257 Larch Cir NW Coon Rapids, MN 55448

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: Kari Rehauer  
Office sought by candidate (if applicable): Coon Rapids City Council Ward 2  
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: 

Date: 8/18/2020