# **CAMPAIGN FINANCIAL REPORT**

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

Name of candida	ate, committee or corporation Mile Lewe	e for City Council
Office sought or		District Ward Z
Type of	Candidate report	Period of time covered by report:
report	Campaign committee report	

CONTRIBUTIONS RECEIVED

Association or corporation report

Final report

from 5/1/18 to 6/30/18

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  $\frac{3206.67}{10.67}$  total cash-on-hand  $\frac{2397.99}{10.67}$ in-kind  $\frac{1}{5}$ total amount received  $= \frac{3206.67}{10.67}$ 

### 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 00 67 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		
		$1 \square I$		
I certify that this is a	full and true statement.	Min Lulu	7-3-18	
Printed Name M(	chael lende To	Signature elephone <u>979-0331</u> Email (if avail	Date able) Mike Jemke 7	11 @
Address- 1805	2355TS. UC	ahead MN Staste		nail. con

Report

Office

For Office Use Only: Name

## 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	Mike Lemke for City Council	
Office sought by candidate (if app		
Identification of ballot question (if		

## **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 fluct Culta Date 6/28/2018

MIKE LEMKE FOR CITY COUNCIL Itemized Contributions May 1, 2018 to June 30, 2018

Employeer/Occupation Date: Address: Name: Amount 6/28/2018 Lemke Michael 2141 38th ST S Moorhead Lemke Home Imp. 2000 Loan to Candidate for expenses 6/4/2018 Lemke Michael 2141 38th ST S Moorhead Lemke Home Imp. 606.67 Loan to Candidate for expenses

# **CAMPAIGN FINANCIAL REPORT**

		ation in this report is public info		C 1
Name of candidate	e, committee or corporation	lichael lenik	For Cit	y Council
Office sought or b			District N	and 2
Type of report	Candidate repo Campaign com Association or Final report		Period of time	covered by report: 8  to  8(3)8
(money or in-kind) r contributions from a	I contributions received during the ather than contributor. See note on single source that exceeded \$100 d employed, amount and date for thes \$\$ + \$\$	contribution limits on the back uring the calendar year. This ite	of this form. Use mization must in	a separate sheet to itemize all
	it, date and purpose for all disbur sheets if necessary. Information Re Reinbursemen	DISBURSEMENTS rements made during the per Purpose Aust Leante Cane		Amount 90, 3 500, 0 1700, -
		0	TOTAL	2290.®
Corporations must more than \$200. S Project title or desc	list any media project or corpo ubmit a separate report for each	TE PROJECT EXPENDITU rate message project for wh project. Attach additional sh	nich contributio	n(s) or expenditure(s) total ry.
Date	Purpose	Name and Addr of Recipient		Expenditure or Contribution Amount
			TOTAL	
certify that this is Printed Name $M(a)$ Address $1805$	a full and true statement. <u>A</u> Chael Lepuke Tel 2379 ST S:	ephone 979-035 Morria d	LEmail (if availa	Date Date able) <u>Mikelemki</u> 71 0 gmail. ((

Report

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Office

For Office Use Only: Name

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## **Campaign Information**

Name of candidate or committee Michael	Lenike -	for City	Council
Office sought by candidate (if applicable)	the second s	-	
Identification of ballot question (if applicable)			

## Certification

Date

Select the appropriate choice below, and sign.

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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 Mule Studie