

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Shannon Bryant For Mayor Committee

Office sought or ballot question City of Grant Mayor District _____

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

Period of time covered by report:

8/15/16 to 10/31/16

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	\$2135.26	TOTAL CASH-ON-HAND	\$ 38.16
IN-KIND	+ \$ _____		
TOTAL AMOUNT RECEIVED	= \$2135.26		

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
10/29/16	Signs	\$823.50
10/29/16	Mailer	\$1019.14
10/5/16	Flyers	\$242.10
10/4/16	Office Supplies	\$12.96
	TOTAL	\$2097.10

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.  10/31/16
 Signature Date

Printed Name Shannon Bryant Telephone 6514260328 Email (if available) _____

Address 10170 Jody Avenue Court North, Grant, MN 55082

Rose Pohl, 6636 Indian Wells Trail, Grant, MN 55110 - Retired - \$200.00

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 Keep Grant -- Grant Committee

Office sought or ballot question _____ District _____

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

Period of time covered by report:
 from 10-14-16 to 10-30-16

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 \$ 1810.00 TOTAL CASH-ON-HAND \$ 0
 IN-KIND + \$ 0
 TOTAL AMOUNT RECEIVED = \$ 1810.00

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>10-14-16</u>	<u>Dawn INK LLC for Post card mailing</u>	<u>1810.00</u>
TOTAL		<u>1810.00</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
TOTAL			

I certify that this is a full and true statement.

Robert J. Tuft
 Signature

Date

Printed Name Robert Tuft Telephone 651-770-9634 Email (if available) rtwheez@aol.com
 Address 6365 Jasmine Ave N Grant MN 55042

Report

Office

For Office Use Only: Name

Dawn INK LLC

4900 North Highway 169

Suite 105

New Hope, MN 55428



Invoice

Date	Invoice #
10/14/2016	4062

Bill To
Coldwell Banker Burnet - White Bear Lake Thomas R Carr

P.O. No.	Terms	Project
	CC on File	

Quantity	Description	U/M	Rate	Amount
1	Grant Postcard	ea	50.00	50.00
1,408	Grant Postcard	ea	1.25	1,760.00
	Sales Tax		7.125%	0.00

<i>We appreciate your business!</i>		Total	\$1,810.00
Phone #	763-550-3826	Payments/Credits	-\$1,810.00
dawn@gotodawn.com www.gotodawn.com		Balance Due	\$0.00

NAME	Address	Occupations	Amount	DATE
Sue Ebertz	6365 Jasmine Ave N Grant MN 55082	Retired	200.00	
Robert Tuft	6365 Jasmine Ave N Grant MN 55082	Retired	300.00	
Jeff Huber	9570 Joliet Ave N Grant MN 55082	Realtor	400.00	
Dennis Kaup	9045 Justen Tr N Grant MN 55082	Shipping	400.00	
Tom Carr	9550 Joliet Ave N Grant MN 55082	Realtor	510.00	
			1810.00	

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 Tom Carr

Office sought by candidate (if applicable) City Council of Grant

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 campaign contributions or disbursements did not exceed \$750 in the calendar year.

Signature of candidate or committee treasurer 

Date 10-31-16