CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING

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) Name of candidate or committee Office sought by candidate (if applicable) Or Identification of ballot question Check the appropriate box below: 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)

Report

	(All of the information in this rep	<i>*/</i>	ion)		
Name of candidate	, committee, or corporation	Kevin Hi	//2 L		
Office sought or ballot question		District			
Type of report	Candidate report Campaign commit Association or cor Final report	Period of time covered by reperent soration report from SAN to MAR		,	
	CONTRIBU	TIONS			
by type (money or i sheet to itemize all	I contributions received during the pe in-kind) rather than contributor. See r contributions from a single source th ress, employer or occupation if self-e	ote on contribution limi at exceed \$100 during	ts on the back of t the calendar year.	this form. Use a separat . This itemization must	
CASH	\$	TOTAL CASH ON	N HAND \$		
IN-KIND	+ \$				
TOTAL AMOUNT R	PECEIVED \$				
TOTAL AMOUNT I	·	.			
	EXPENDI	TURES			
Include the amount, date, and purpose for all expenditures made during the period of time covered by this report. Attach additional sheets if necessary.					
Date	P	urpose		Amount	
<u> 3/3</u>	51913		<u></u>	100	
	0				
			TOTAL	100-	
	CORPORATE PRO	OJECT EXPENDITU	RES		
Corporations must I more than \$200. Su	ist any media project or corporate m ubmit a separate report for each proje	essage project for which	ch contribution(s) neets if necessary	or expenditure(s) total	
Project title or descr	iption				
				•	
Date	Purpose	Name and Ad of Recipie		Expenditure or Contribution Amount	
		Total			
Location that this is a	full and true statement				
Printed Name Levin Hills. Telephone 763 856 745 Email (if available) Address 10785 2615 Ave Zivimerman					
Address /U	785 2612 4	The Zin	UMPKMAL	7	
Addiess/ U	101 00' 1	V			