CAMPAIGN FINANCIAL REPORT

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

	r ballot question	CITY COUNCIL	District WE	ST
Type of report	INITIAL	Candidate report Campaign committee report	Period of time	e covered by report:
		Association or corporation report Final report	from <u>01/01</u>	/22 to 07/18/22
		CONTRIBUTIONS RECEIV		
money or in-kind contributions fro	d) rather than con m a single source	received during the period of time covered by tributor. See note on contribution limits on the that exceeded \$100 during the calendar year. The ount and date for these contributions.	back of this form. Us	e a separate sheet to itemize a
CASH		2522.00	CASH-ON-HAND	s 891.76
IN-KIND		+ e	and the three	¥
TOTAL AMOUN	TRECEIVED	= _{\$} 2532.00		
		DISBURSEMENTS		
Include the amo Attach addition	ount, date and p al sheets if neces	urpose for all disbursements made during t ssary.	he period of time co	vered by report.
Date		Purpose		Amount
7/04/2022	PRINTING	FLYERS		\$140.24
/07/2022	COORDINA	ATED CAMPAIGN		\$1500.00
Reference of the Artificial Section and the Arti	PA-STATE STATE STA		TOTAL	
Corporations m more than \$200 Project title or d Date	. Submit a sepa	CORPORATE PROJECT EXPENDED In a project or corporate message project for rate report for each project. Attach addition and a project of the p	DITURES or which contribution all sheets if necessary Address	en(s) or expenditure(s) total ery. Expenditure or Contribution Amount
roject title or d	. Submit a sepa	lia project or corporate message project for rate report for each project. Attach addition Purpose Name and	DITURES or which contribution all sheets if necessary Address	Expenditure or Contribution
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nore than \$200 Project title or d Date	. Submit a sepa	lia project or corporate message project for rate report for each project. Attach addition Purpose Name and of Recip	DITURES or which contribution of the contribu	Expenditure or Contribution
nore than \$200 Project title or d Date	escription	Purpose Restatement. Signature	DITURES or which contributional sheets if necessary Address poient TOTAL	Expenditure or Contribution Amount 7-28-2022 Date
Project title or d Date certify that this	escription	Purpose Restatement.	DITURES or which contribution of the contribu	Expenditure or Contribution Amount 7-28-2022 Date

DATE	ADDRESS	EMPLOYER	Occupation	AMOUNT	Occupation AMOUNT CASH OR CHECK
7/1/2022 Samuel Ogoro	5910 65th Ave. #233. Brooklyn Park, MN 55429	Self Employed		\$ 100.00	CASEL
7/2/2022 Poter Ocera		10.0101		TO0.00	CASH
// c/ cocc reter Osora	8441 Kentucky Ct N. Brooklyn Park, MN 55445	Self Employed		\$ 150.00 CASH	CASH
7/2/2022 Isaiah Mogaka	9131 James Ave N. Brooklyn Park, MN 55444	Self Employed		\$ 100.00	CASIL
7/2/2022 Ezra Kerage Omosa	5517 Brookdale Dr. N. # 313 Brookling Back MAN FEAA3	C-ICT III CO		TOO.00	CASH
7/2/2022 5-1-01:-	The state of the s	Jeli Filibioken		> IUU.UU CASH	CASH
1/2/2022 Sarah Okindo	3309 83rd Ave N. Brooklyn Park, MN 55443	Allina Hospital	Nurse	\$ 100.00	CASH
7/2/2022 Tackling Openshi	2000			100.00	50-
1/2/2022 Jackille Oligectii	10358 Orchard Ir N. Brooklyn Park, MN 55443	Arise Homecare	Director	\$ 300.00 CASH	CASH
7/7/2022 Caroline Nyamwaya	5928 Bryant Ave N. Brooklyn Center, MN 55430	Lodges of Brooklyn Park	Can	\$ 100 00 CASH	CASH
			-	TOO.00	CASII
7/18/2022 Itemized Contributions				¢ 1 500 00	
				A T, JOC. 00	