

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Valley Parent & Community Network  
 Office sought or ballot question \_\_\_\_\_ District ISO 834

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

Period of time covered by report:  
 from 1-30-14 to 1-30-15

## 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 \$ \_\_\_\_\_ TOTAL CASH-ON-HAND \$ 1,543.78  
 IN-KIND + \$ \_\_\_\_\_  
 TOTAL AMOUNT RECEIVED = \$ 0

## 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
Dec 28 2014	P.O. Box Rental	92.00
Dec 28 2014	Software Licence	267.81
Dec 28 2014	MN Sec of State - Ammend Assumed name	30.00
Dec 31 2014	BANK fees (monthly @ \$3.00)	36.00
Jan 28 2015	checks	10.71
<b>TOTAL:</b>		<b>\$ 436.52</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.

Andrew Kubiak  
Signature

1-30-15  
Date

Printed Name Andrew KUBIAK Telephone 651-647-9400 Email (if available) \_\_\_\_\_

Address P.O. Box 251 Lakeland, MN 55043

Report

Office

Name

For Office Use Only: