

# Campaign Finance and Public Disclosure Board



Suite 190 . Centennial Office Building . 658 Cedar Street . St. Paul MN 55155-1603 . www.cfb.mn.gov  
Email: cf.board@state.mn.us.

## Report of Receipts and Expenditures for Candidate Committees Principal Campaign Committees Period Covered: January 1 through December 31, 2020 REPORT DUE DATE IS FEBRUARY 1, 2021

### FILING INSTRUCTIONS

- This report may be emailed to cf.board@state.mn.us or faxed to 651-539-1196 or 800-357-4114
- All information on this report is public information and may be published on the Board's website at www.cfb.mn.gov
- It is unlawful to use this information for commercial purposes.
- Board staff may be reached by phone at 651-539-1180 or 800-657-3889 or by email at cf.board@state.mn.us

### COMMITTEE INFORMATION

Committee name		Registration number
Candidate name	Candidate email address	
Treasurer name	Treasurer email address	
Treasurer address		
Treasurer city, state, zip		Treasurer telephone (daytime)

### REPORT OPTION

Check one of the report option boxes below *only if applicable* and provide the requested information.

**No change statement**

Check this box only if your committee received *no* contributions and made *no* expenditures since your last reporting period. Do not use this statement if there was any monetary change. If there was no change:

Provide the current cash balance: \$ \_\_\_\_\_, and sign here

\_\_\_\_\_  
I, the  treasurer  deputy treasurer,  or candidate (check one) \_\_\_\_\_ Date  
certify there has been no change and that this report is complete, true and correct.

**Amendment**

Check this box if your committee is filing this report to amend a report previously filed report.

Provide date of the report being amended: \_\_\_\_\_

**Termination**

Check this box if your committee has dissolved. Do not check this box unless the committee has settled all its debts and disposed all its assets in excess of \$100.

This document is available in alternative formats to individuals with disabilities by calling 651-539-1180 or 800-657-3889; or through the Minnesota Relay Service at 800-627-3529.

For office use only		
<input type="checkbox"/> Checked in	<input type="checkbox"/> Scanned	<input type="checkbox"/> Data entered

## INSTRUCTIONS FOR COMMITTEE TRANSACTION SUMMARY

- Line 1** Beginning cash balance at January 1st. This should be the same ending cash balance as the prior year.
- Line 2** Contributions from individuals other than registered lobbyists.
- Line 3** Contributions from registered lobbyists.
- Line 4** Contributions from registered political committees and political funds.
- Line 5** Contributions from political party units and terminating principal campaign committees.
- Line 6** Contributions from other sources including committees registered in Hennepin County and unregistered associations.
- Line 7** Receipts of public subsidy payments from the State Elections Campaign Fund.
- Line 8** Receipts from an individual, financial institution, or other entity received as a loan.
- Line 9** Income received by your committee that is not a contribution or loan (i.e. repayment of a loan made by your committee, interest from an interest bearing account, return of a deposit).
- Line 10** The total amount of cash or in-kind contributions received during the reporting period – **sum of lines 2 through 9.**
- Line 11** Money spent for goods or services for the purpose of influencing the election of the candidate.
- Line 12** Noncampaign disbursements - see attached definition sheet (page 28).
- Line 13** Cash or in-kind contributions given by your committee to another registered principal campaign committee.
- Line 14** Cash or in-kind contributions given by your committee to a registered political party unit.
- Line 15** Cash or in-kind contributions given by your committee to a registered political committee or political fund.
- Line 16** All other disbursements made by your committee that are not included on other schedules including charitable contributions.
- Line 17** Total cash and in-kind expenditures and disbursements during the reporting period – **sum of lines 11 through 16.**
- Line 18** Ending cash balance includes money on deposit in banks and other depositories. Reported ending cash balance must be reconcilable with balance stated by the depositories. **Line 1 + Line 10 - Line 17.**

## COMMITTEE TRANSACTION SUMMARY

1	Beginning cash balance 1/1/2020 <b>(Should be the same as the 12/31/2019 ending cash balance)</b>		\$				
<b>A RECEIPTS:</b>			Cash (Col. 1)	Blank (Col. 2)	In-kind (Col. 3)	Total (Col. 4)	
2	Individual contributions	Sch. A1 - IND	\$		\$	\$	
3	Lobbyist contributions	Sch. A1 - LOB	\$		\$	\$	
4	Political committee and political fund contributions	Sch. A1 - PAC	\$		\$	\$	
5	Political party & terminating principal campaign committee contributions	Sch. A1 - PTY/TERM PCC	\$		\$	\$	
6	Other contributions	Sch. A1 - OTH	\$		\$	\$	
7	Public Subsidy Payment	Sch. A2 - PS	\$			\$	
8	Receipts from loans payable	Sch. A2 - LP	\$			\$	
9	Miscellaneous income	Sch. A2 - MISC	\$			\$	
<b>10</b>	<b>TOTAL RECEIPTS</b>	Sum #2 thru #9	\$			\$	\$
<b>B DISBURSEMENTS:</b>			Cash (Col.1)		Unpaid bills (Col. 2)	In-kind (Col. 3)	Total Col. 4)
11	Campaign expenditures	Sch. B1 - CE	\$	\$	\$	\$	
12	Noncampaign disbursements	Sch. B1 - NCD	\$	\$	\$	\$	
13	Contributions to other principal campaign committees	Sch. B2 - PCC	\$		\$	\$	
14	Contributions to political parties	Sch. B2 - PTY	\$		\$	\$	
15	Contributions to political committees and political funds	Sch. B2 -PCF	\$	\$	\$	\$	
16	Other disbursements	Sch. B3	\$	\$	\$	\$	
17	<b>TOTAL EXPENDITURES AND DISBURSEMENTS</b>	Sum #11 thru #16	\$	\$	\$	\$	
18	<b>Ending cash balance at 12/31/2020</b>	#1 + #10 - #17	\$				

## INSTRUCTIONS for NOTES, LOANS, and UNPAID BILLS SUMMARY

**Report on this page all outstanding notes, loans, and unpaid bills owed by your committee as of December 31, 2020, including all previous years.**

**Line 1** Outstanding notes or loans payable (owed by your committee to an individual, financial institution, or other entity received as a loan) as reported on Schedule C, Column 1, page 27.

**Line 2** Unpaid bills owed by your committee for goods or services for campaign expenditures as reported on Schedule D, Column 1, page 27.

***Campaign expenditures are made for the purpose of influencing the nomination or election of the candidate. Campaign expenditures apply toward the spending limits of candidates who sign a Public Subsidy Agreement.***

**Line 3** Unpaid bills owed by your committee for goods or services for noncampaign disbursements as reported on Schedule D, Column 2, page 27.

***See definition of noncampaign disbursements on page 28.***

## CERTIFICATION

This report must be signed and dated by the candidate or by the current treasurer or deputy treasurer of record. The original signature of the person responsible for preparation or filing of this report is required to make the report complete\*. Only signed reports may be filed with the Board.

*\*A document filed by facsimile transmission meets this requirement if the original document being transmitted bears the required signature.*

**NOTES, LOANS, and UNPAID BILLS SUMMARY**

1	Notes or loans payable	Sch. C - Col. 1	\$
2	Unpaid bills for campaign expenditures	Sch. D - Col. 1	\$
3	Unpaid bills for noncampaign disbursements	Sch. D – Col 2	\$
4	<b>TOTAL AMOUNT OUTSTANDING</b>	Sum #1 thru #3	\$

**CERTIFICATION**

I, \_\_\_\_\_, **certify that this report is complete, true, and correct.**  
 (Print or type name)

Signature of     candidate     treasurer     deputy treasurer (check one)

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Registration #

**Any person who signs and certifies to be true a report or statement which the person knows contains false information, or who knowingly omits required information, is subject to a civil penalty imposed by the Board of up to \$3,000 and is subject to criminal prosecution for a gross misdemeanor.**

## INSTRUCTIONS FOR SCHEDULE A1 - IND

Use this schedule to itemize contributions and receipts from *individuals who are not lobbyists*.

You must itemize contributions that in aggregate total more than \$200 from an individual. When multiple contributions are received from the same individual, show the contributor's name once and list all contributions from that contributor separately under the contributor's name, with the date and amount for each contribution.

Contributions from individuals, made on a joint checking account, are considered to be a contribution in equal proportions by the person(s) who sign the check unless the candidate or treasurer has personal knowledge or ascertains from the account holder who did not sign the check that the person is a joint contributor. If more than \$200 in aggregate is received from each contributor, disclose each contributor on a separate line with all the required information.

Entries must be in alphabetical order by last name.

### **For itemized transactions you must disclose the:**

- date the contribution was RECEIVED by your committee,
- name of contributor,
- name of contributor's employer (if self-employed, list "self" and disclose the individual's occupation),
- contributor's full address (street, city, state, and zip code), and
- amount of contribution(s).

### **Non-itemized transactions:**

Do not itemize contributions that total \$200 or less from any one individual.

Disclose the total of all contributions of \$200 or less from individuals on the "Non-itemized receipts" line at the bottom of the schedule.

## SCHEDULE A1 - IND - CONTRIBUTIONS FROM INDIVIDUALS

Make photocopies of this page if additional space is needed.

Page \_\_\_\_ of \_\_\_\_

Date received	Name and full address of contributor Name of employer (if self-employed, list "self" & disclose the occupation)	Col. 1 Cash	Col. 2 In-kind (list item and fair market value)	Col. 3 Total (cash & in-kind)
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
<b>Total of non-itemized receipts</b>		\$	\$	\$
<b>TOTALS</b>		\$	\$	\$
		To pg. 3, line 2, col. 1	To pg. 3, line 2, col. 3	To pg. 3, line 2, col. 4

It is unlawful to use this information for commercial purposes.

## INSTRUCTIONS FOR SCHEDULE A1 - LOB

Use this schedule to itemize contributions and receipts from *registered lobbyists*.

You must itemize contributions that in aggregate total more than \$200 from a lobbyist. When multiple contributions are received from the same lobbyist, show the lobbyist's name once and list all contributions from that lobbyist separately under the lobbyist's name, with the date and amount for each contribution.

Entries must be in alphabetical order by last name.

### **For itemized transactions you must disclose the:**

- date the contribution was RECEIVED by your committee,
- lobbyist registration number,
- name of lobbyist, and
- amount of contribution(s).
- lobbyist's full address (street, city, state, and zip code)\* , and
- name of lobbyist's employer (if self-employed, list "self" and disclose the lobbyist's occupation other than lobbying).

\* If you disclose the lobbyist registration number, you may omit the lobbyist's address.

### **Non-itemized transactions:**

Do not itemize contributions that total \$200 or less from any one lobbyist.

Disclose the total of all contributions of \$200 or less from lobbyists on the "Non-itemized receipts" line at the bottom of the schedule.



## SCHEDULE A1 - LOB - CONTRIBUTIONS FROM LOBBYISTS

Make photocopies of this page if additional space is needed.

Page \_\_\_\_ of \_\_\_\_

Date received	Lobbyist registration number	Name and full address of lobbyist Name of employer (if self-employed, list "self" & disclose the occupation)	Col. 1 Cash	Col. 2 In-kind (list item and fair market value)	Col. 3 Total (cash & in-kind)
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
<b>Total of non-itemized receipts</b>			\$	\$	\$
<b>TOTALS</b>			\$	\$	\$
			To pg. 3, line 3, col. 1	To pg. 3, line 3, col. 3	To pg. 3, line 3, col. 4

It is unlawful to use this information for commercial purposes.

## INSTRUCTIONS FOR SCHEDULE A1 – PAC

Use this schedule to itemize contributions and receipts from political committees and political funds registered with the Board.

You must itemize contributions that in aggregate total more than \$200 from a political committee or political fund. When multiple contributions are received from the same political committee or political fund, show the political committee or political fund's name once and list all contributions from that committee or fund separately under the committee or fund's name, with the date and amount of each contribution.

Do not use this schedule to report receipts from federal or local committees not registered with the Board or from other unregistered organizations.

Entries must be in alphabetical order.

### **For itemized transactions you must disclose the:**

- date the contribution was RECEIVED by your committee,
- political committee or political fund registration number (REQUIRED),
- name of political committee or political fund, and full address (street, city, state, and zip code)
- amount of contribution(s).

### **COMPLIANCE ALERT!**

If you do not have the contributor's Board registration number it may be that the contributor is not registered and the contribution may be prohibited. If you cannot identify the status of a contributor, contact the Board office.

### **Non-itemized transactions:**

Do not itemize contributions that total \$200 or less from any one political committee or political fund.

Disclose the total of all contributions of \$200 or less from political committee or political funds on the "Non-itemized receipts" line at the bottom of the schedule.

## SCHEDULE A1 - PAC - Contributions from Political Committees and Political Funds

Make photocopies of this page if additional space is needed.

Page \_\_\_\_ of \_\_\_\_

Date received	Comm./fund registration number <b>REQUIRED</b>	Name and full address of political committee or political fund	Col. 1 <b>Cash</b>	Col. 2 <b>In-kind</b> (list item and fair market value)	Col. 3 <b>Total</b> (cash & in-kind)
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
<b>Total of non-itemized receipts</b>			\$	\$	\$
<b>TOTALS</b>			\$	\$	\$
			To pg. 3, line 4, col. 1	To pg. 3, line 4, col. 3	To pg. 3, line 4, col. 4

It is unlawful to use this information for commercial purposes.

## INSTRUCTIONS FOR SCHEDULE A1 – PTY/TERM PCC

Use this schedule to itemize contributions and receipts from political parties and terminating principal campaign committees.

You must itemize contributions that in aggregate total more than \$200 from a contributor. When multiple contributions are received from the same party unit or principal campaign committee, show the committee's name once and list all contributions from that committee separately under the committee's name, with the date and amount of each contribution.

### **For itemized transactions you must disclose the:**

- date the contribution was RECEIVED by your committee,
- political party or principal campaign committee registration number (REQUIRED),
- name of principal campaign committee or political party unit, and full address (street, city, state, and zip code)
- amount of contribution(s).

### **COMPLIANCE ALERT!**

If you do not have the contributor's Board registration number it may be that the contributor is not registered and the contribution may be prohibited. If you cannot identify the status of a contributor, contact the Board office.

### **Non-itemized transactions:**

Do not itemize transactions that total \$200 or less from any one source.

Disclose the total of all contributions of \$200 or less from all political party units and terminating principal campaign committees on the "Non-itemized receipts" line at the bottom of the schedule.

**SCHEDULE A1 – PTY/TERM PCC**  
**Contributions from Political Party Units and Terminating Principal Campaign Committees**

Make photocopies of this page if additional space is needed.

Page \_\_\_\_ of \_\_\_\_

Date received	Party unit/candidate committee registration number <b>REQUIRED</b>	Name and full address of political party unit or terminating principal campaign committee	Col. 1 Cash	Col. 2 In-kind (list item and fair market value)	Col. 3 Total (cash & in-kind)
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
<b>Total of non-itemized receipts</b>			\$	\$	\$
<b>TOTALS</b>			\$	\$	\$
			To pg. 3, line 5, col. 1	To pg. 3, line 5, col. 3	To pg. 3, line 5, col. 4

It is unlawful to use this information for commercial purposes.

## INSTRUCTIONS FOR SCHEDULE A1 – OTH

Use this schedule to itemize contributions from other sources including committees registered in Hennepin County and contributions from associations not registered with the Board that provided the required disclosure at the time the contribution was made. A copy of the disclosure provided by the unregistered association must be included with this report.

### **COMPLIANCE ALERT!**

Contributions from associations not registered with the Board are strictly limited. A contribution reported on this schedule **MUST** meet one of the following requirements or it is prohibited and may result in the imposition of civil penalties against both the donor and the recipient:

1. The contribution is from a political committee registered with the Hennepin County Elections Division; or
2. When you received the contribution, it was accompanied by a disclosure report disclosing all of the information required in a Report of Receipts and Expenditures filed with the Board and covering the period from January 1, 2020, through the date the contribution was received by your committee; or
3. The contribution is \$200 or less.

If a contribution to be reported on this schedule does not meet one of these requirements, return it immediately or contact the Board office for more information.

### **Itemization requirement**

You must itemize contributions that in aggregate total more than \$200 from each other source. When multiple contributions are received from the same source, show the source's name once and list all contributions from that source separately under the source's name, with the date and amount of each contribution.

### **For itemized transactions you must disclose the:**

- date the contribution was RECEIVED by your committee,
- name of the source making the contribution (indicate if the source is registered with Hennepin County),
- source's full address (street, city, state, and zip code), and
- amount of contribution(s).

### **Non-itemized transactions:**

Do not itemize transactions that total \$200 or less from any one source.

Disclose the total of all contributions of \$200 or less from all sources on the "Non-itemized receipts" line at the bottom of the schedule.

## INSTRUCTIONS FOR SCHEDULE A2 - PS

Use this schedule to itemize all receipts from public subsidy received by this committee from the State Elections Campaign Fund.

## SCHEDULE A1 – OTH – Contributions from Other Sources

Make photocopies of this page if additional space is needed.

Page \_\_\_\_ of \_\_\_\_

Date received	Name and full address of source	Col. 1 Cash	Col. 2 In-kind (list item and fair market value)	Col. 3 Total (cash & in-kind)
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
<b>Total of non-itemized receipts</b>		\$	\$	\$
<b>TOTALS</b>		\$	\$	\$
		To pg. 3, line 6, col. 1	To pg. 3, line 6, col. 3	To pg. 3, line 6, col. 4

## SCHEDULE A2 - PS - Receipts from Public Subsidy Payment

Date	Amount received	Amount received
August	Public subsidy payment from State of Minnesota	\$
December	Public subsidy payment from State of Minnesota	\$
<b>TOTALS</b>		\$
		To pg. 3, line 7, cols. 1 & 4

It is unlawful to use this information for commercial purposes.

## INSTRUCTIONS FOR SCHEDULE A2 - LP

Use this schedule to itemize loans that in aggregate total more than \$200 owed to any one financial institution, individual, or other entity.

### For itemized transactions you must disclose the:

- date the loan was originally made,
- name of the lender and any endorsers\*,
- full address (street, city, state, and zip code) of the lender and any endorsers, and
- amount of the loan.

\* For individuals who are lenders or endorsers, you must disclose the individual's occupation and employer (if self-employed, list "self" and disclose the individual's occupation). These loans apply to the candidate's contribution limit.

### Non-itemized transactions:

Do not itemize loans that total \$200 or less from any one entity.

Disclose the total of all loans of \$200 or less on the "Non-itemized receipts" line at the bottom of the schedule.

## INSTRUCTIONS FOR SCHEDULE A2 - MISC

Use this schedule to itemize all receipts from miscellaneous income that in aggregate total more than \$200 from any one source including repayment of loans made by your committee to an individual or other entity.

### **COMPLIANCE ALERT!**

Proceeds from sales of tickets to a fundraising event are not miscellaneous income; they are contributions from the purchaser and should be reported on the A1 series of schedules.

### For itemized transactions you must disclose the:

- date the receipt was originally received,
- name of the source\*
- full address (street, city, state, and zip code) of the source of the receipt,
- description of purpose or type of miscellaneous income, and
- amount of the receipt(s).

\* For receipts from an individual, you must disclose the individual's occupation and employer (if self-employed, list "self" and disclose the individual's occupation).

### Non-itemized transactions:

Do not itemize receipts that total \$200 or less.

Disclose the total of all receipts from miscellaneous income of \$200 or less on the "Non-itemized receipts" line at the bottom of the schedule.



**SCHEDULE A2 - LP - Receipts from Loans Payable (Owed by Committee) received in current year**

Make photocopies of this page if additional space is needed.

Page \_\_\_\_ of \_\_\_\_

Date received	Name and full address of lender If the lender is an individual, list employer (if self-employed, list "self" & disclose the occupation)	Receipts from loans payable
		\$
		\$
		\$
		\$
<b>Total of non-itemized receipts</b>		\$
<b>TOTALS</b>		\$
		To pg. 3, line 8, col. 1 & 4

**SCHEDULE A2 - MISC - Receipts from Miscellaneous Income**

Date received	Name and full address of source If the source is an individual, list employer (if self-employed, list "self" & disclose the occupation)	Description of purpose or type of miscellaneous income	Total
			\$
			\$
			\$
			\$
<b>Total of non-itemized receipts</b>			\$
<b>TOTALS</b>			\$
			To pg. 3, line 9, col. 1 & 4

It is unlawful to use this information for commercial purposes.

## INSTRUCTIONS FOR SCHEDULE B1 - CE

Use this schedule to itemize campaign expenditures.

You must itemize expenditures that in aggregate total more than \$200 to any one payee. When multiple transactions occur with one payee, show payee's name once and list all transactions with that payee separately under the payee's name.

Entries must be in alphabetical order.

### **For itemized transactions you must disclose the:**

- date your committee made each expenditure,
- name of payee\*,
- payee's full address (street, city, state, and zip code),
- specific purpose of the expenditure, and
- amount of expenditure(s).

### **COMPLIANCE ALERT!**

Reporting reimbursements to people who purchased items on behalf of your committee or payments to credit card companies requires you to provide some extra information.

To report a reimbursement or credit card payment:

- 1) List the name and complete address of the payee (the person being reimbursed or the credit card company being paid).
- 2) In the "specific purpose" column include:
  - a) The name of each vendor of goods or services being reimbursed or that is being paid for through the credit card company;
  - b) If the total of the reimbursement or credit card payment attributable to a vendor is more than \$200, include the vendor's complete address.
  - c) A description of the item or services for which reimbursement is being made;
  - d) The date of the payment;
  - e) The amount of the payment.

Alternatively, a committee may report each underlying expenditure being reimbursed as a separate expenditure to the underlying vendor.

### **Non-itemized transactions:**

Disclose the total of all campaign expenditures of \$200 or less on the "Non-itemized receipts" line at the bottom of the schedule.

**SCHEDULE B1 - CE - Campaign Expenditures**

Make photocopies of this page if additional space is needed.

Page \_\_\_\_ of \_\_\_\_

Date	Name and full address of payee	Specific purpose of expenditure (e.g. flyers for fund raiser)	Col. 1 Cash	Col. 2 Unpaid bills	Col. 3 In-kind (list item & fair market value)	Col. 4 Total
			\$	\$	\$	\$
			\$	\$	\$	\$
			\$	\$	\$	\$
			\$	\$	\$	\$
			\$	\$	\$	\$
			\$	\$	\$	\$
			\$	\$	\$	\$
			\$	\$	\$	\$
<b>Total of non-itemized expenditures/disbursements</b>			\$	\$	\$	\$
<b>TOTALS</b>			\$	\$	\$	\$
			To pg. 3, line 11, col. 1	To pg. 3, line 11, col. 2	To pg. 3, line 11, col. 3	To pg. 3, line 11, col. 4

It is unlawful to use this information for commercial purposes.

## SCHEDULE B1 - NCD – Noncampaign Disbursements

Use this schedule to itemize noncampaign disbursements. See page 28 for the definition of noncampaign disbursement.

You must itemize disbursements that in aggregate total more than \$200 to any one payee. When multiple transactions occur with one payee, show payee's name once and list all transactions with that payee separately under the payee's name.

Entries must be in alphabetical order.

### **For itemized transactions you must disclose the:**

- date your committee made each noncampaign disbursement,
- name of payee\*,
- payee's full address, (street, city, state, and zip code),
- specific purpose of the disbursement, and
- amount of disbursement(s).

### **COMPLIANCE ALERT!**

Reporting reimbursements to people who purchased items on behalf of your committee or payments to credit card companies requires you to provide some extra information.

To report a reimbursement or credit card payment:

- 1) List the name and complete address of the payee (the person being reimbursed or the credit card company being paid).
- 2) In the "specific purpose" column include:
  - a) The name of each vendor of goods or services being reimbursed or that is being paid for through the credit card company;
  - b) If the total of the reimbursement or credit card payment attributable to a vendor is more than \$200, include the vendor's complete address.
  - b) A description of the item or services for which reimbursement is being made;
  - c) The date of the payment;
  - d) The amount of the payment.

### **Non-itemized transactions:**

Disclose the total of all expenditures made of \$200 or less on the "Non-itemized expenditures/disbursements" line at the bottom of the schedule.

## SCHEDULE B1 - NCD – Noncampaign Disbursements

Make photocopies of this page if additional space is needed.

Page \_\_\_\_ of \_\_\_\_

Date	Name and full address of payee	Specific purpose and number of disbursement (definition list, page 28)	Col. 1 Cash	Col. 2 Unpaid bills	Col. 3 In-kind (list item & fair market value)	Col. 4 Total
			\$	\$	\$	\$
			\$	\$	\$	\$
			\$	\$	\$	\$
			\$	\$	\$	\$
			\$	\$	\$	\$
			\$	\$	\$	\$
			\$	\$	\$	\$
			\$	\$	\$	\$
<b>Total of non-itemized expenditures/disbursements</b>			\$	\$	\$	\$
<b>TOTALS</b>			\$	\$	\$	\$
			To pg. 3, line 12, col. 1	To pg. 3, line 12, col. 2	To pg. 3, line 12, col. 3	To pg. 3, line 12 col. 4

It is unlawful to use this information for commercial purposes.

## INSTRUCTIONS FOR SCHEDULE B2 – PCC Contributions to Other Principal Campaign Committees

Use this schedule to itemize contributions given by your committee to *other principal campaign committees* (registration number begins with 1).

### **COMPLIANCE ALERT!**

Contributions to other principal campaign committees may be given only when your committee will be terminating within 12 months from the date the contribution was given. If your committee will not be terminating its registration within 12 months, there should be no transactions listed on this schedule.

### **Itemized contributions made:**

You must itemize contributions that in aggregate total more than \$200, to other principal campaign committees. When multiple contributions are given to the same committee, show the receiving committee's name once and list all transactions with that party unit under the committee's name, with the date and amount of each contribution.

### **For itemized contributions you must disclose the:**

- date the contribution was given by your committee,
- recipient committee's registration number (REQUIRED),
- name of recipient,
- recipient's full address (street, city, state, and zip code), and
- amount of contribution(s).

### **Non-itemized transactions:**

Do not itemize contributions that in aggregate total \$200 or less.

Disclose the total of all contributions of \$200 or less given to party units on the "Non-itemized expenditures/disbursements" line at the bottom of the schedule.

## INSTRUCTIONS FOR SCHEDULE B2 – PTY Contributions to Political Party Units

Use this schedule to itemize contributions given by your committee to *political party units* (registration number begins with 2).

You must itemize contributions that in aggregate total more than \$200 to each political party. When multiple contributions are given to the same party unit, show the receiving committee's name once and list all transactions with that party unit under the party unit's name.

### **For itemized contributions you must disclose the:**

- date the contribution was given by your committee,
- recipient committee's registration number (REQUIRED),
- name of recipient,
- recipient's full address (street, city, state, and zip code), and
- amount of contribution(s).

### **Non-itemized transactions:**

Do not itemize contributions that in aggregate total \$200 or less.

Disclose the total of all contributions of \$200 or less given to party units on the "Non-itemized expenditures/disbursements" line at the bottom of the schedule.

## SCHEDULE B2 – PCC – Contributions to Other Principal Campaign Committees

Make photocopies of this page if additional space is needed.

Page \_\_\_\_ of \_\_\_\_

Date	Committee registration number <b>REQUIRED</b>	Name and full address recipient (for approved expenditure; also list name and full address of vendor paid)	Col. 1 Cash	Col. 2 In-kind (list item & fair market value)	Col. 3 Total
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
<b>Total of non-itemized expenditures/disbursements</b>			\$	\$	\$
<b>TOTALS</b>			\$	\$	\$
			To pg. 3, line 13, col. 1	To pg. 3, line 13, col. 3	To pg. 3, line 13, col. 4

## SCHEDULE B2 – PTY – Contributions to Political Party Units

Date	Committee registration number <b>REQUIRED</b>	Name and full address recipient (for approved expenditure; also list name and full address of vendor paid)	Col. 1 Cash	Col. 2 In-kind (list item & fair market value)	Col. 3 Total
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
<b>Total of non-itemized Expenditures/disbursements</b>			\$	\$	\$
<b>TOTALS</b>			\$	\$	\$
			To pg. 3, line 14, col. 1	To pg. 3, line 14, col. 3	To pg. 3, line 14, col. 4

It is unlawful to use this information for commercial purposes.

## INSTRUCTIONS FOR SCHEDULE B2 – PCF Contributions to Political Committees and Political Funds

Use this schedule to itemize contributions given by your committee to *political committees and political funds* (registration numbers begin with 3, 4, 5, 6, 7, or 8).

You must itemize contributions that in aggregate total more than \$200. When multiple contributions are given to the same committee or fund, show the receiving committee or fund's name once and list all transactions with that committee or fund under the committee or fund's name.

Entries must be in alphabetical order.

### **For itemized contributions you must disclose the:**

- date the contribution was given by your committee,
- recipient committee's registration number (REQUIRED),
- name of recipient,
- recipient's full address (street, city, state, and zip code), and
- amount of contribution(s).

### **Non-itemized transactions:**

Do not itemize contributions that in aggregate total \$200 or less.

Disclose the total of all contributions of \$200 or less given to political committees and political funds on the "Non-itemized expenditures/disbursements" line at the bottom of the schedule.

## INSTRUCTIONS FOR SCHEDULE B3 – Other Disbursements

Use this schedule to itemize other disbursements made by your committee including any return of public subsidy and charitable contributions.

You must itemize disbursements that in aggregate total more than \$200. When multiple disbursements are made to the same entity, show the entities name once and list all transactions with that entity separately under the entities name, with the date and amount of each disbursement.

### **COMPLIANCE ALERT! Other Disbursements**

This schedule is not regularly used, other than for return of public subsidy payments, payment of security deposits, and charitable contributions. Transactions in other categories reported on this schedule may signify incorrect reporting or transactions that are not permitted with campaign funds. If this situation arises, contact the Board office for advice.

### **Itemized Disbursements:**

Entries must be in alphabetical order.

### **For itemized disbursements you must disclose the:**

- date the disbursement was made by your committee,
- name of recipient,
- recipient's full address (street, city, state, and zip code),
- purpose of the disbursement, and
- amount of disbursement(s).

### **For Non-itemized transactions:**

Do not itemize disbursements that in aggregate total \$200 or less.

Disclose the total of all disbursements of \$200 or less on the "Non-itemized disbursements" line at the bottom of the schedule.



## SCHEDULE B2 – PCF - Contributions to Political Committees and Political Funds

Make photocopies of this page if additional space is needed.

Page \_\_\_\_ of \_\_\_\_

Date	Committee registration number <b>REQUIRED</b>	Name and full address recipient (for approved expenditure; also list name and full address of vendor paid)	Col. 1 Cash	Col. 2 In-kind (list item & fair market value)	Col. 3 Total
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
<b>Total of non-itemized expenditures/disbursements</b>			\$	\$	\$
<b>TOTALS</b>			\$	\$	\$
			To pg. 3, line 15, col. 1	To pg. 3, line 15, col. 3	To pg. 3, line 15, col. 4

## SCHEDULE B3 – Other Disbursements

Date	Name and full address of recipient	Specific purpose disbursement	Col. 1 Cash	Col. 2 Unpaid bills	Col. 3 In-kind (list item & fair market value)	Col. 4 Total
			\$	\$	\$	\$
			\$	\$	\$	\$
			\$	\$	\$	\$
			\$	\$	\$	\$
<b>Total of non-itemized expenditures/disbursements</b>			\$	\$	\$	\$
<b>TOTALS</b>			\$	\$	\$	\$
			To pg. 3, line 16, col. 1	To pg. 3, line 16, col. 2	To pg. 3, line 16, col. 3	To pg. 3, line 16, col. 4

It is unlawful to use this information for commercial purposes.

## INSTRUCTIONS FOR SCHEDULE C - Loans

Use this schedule to itemize any note or loan with an outstanding balance payable or receivable as of the period you are purporting for, including all unpaid notes and loans from previous years.

### You must disclose the:

- date the loan was originally made,
- name of the lender or endorser\*,
- full address of lender or endorser (street, city, state, and zip code), and
- amount of the outstanding balance.

\* For receipts from an individual, you must disclose the individual's occupation and employer (if self-employed, list "self" and disclose the individual's occupation).

## INSTRUCTIONS FOR SCHEDULE D – Unpaid Obligations

Use this schedule to itemize all unpaid obligations as of December 31, including any unpaid obligations from previous years.

Include on this schedule the unpaid portion of any item listed on Schedules B1 – Campaign Expenditures or B1 – Noncampaign Disbursements as well as any unpaid bills carried forward from a prior year.

### You must disclose the:

- month, day, year the obligation to pay was incurred,
- name of the creditor or individual owed,
- full address (street, city, state, and zip code) of the creditor or individual owed,
- purpose of the credit extension, and
- amount of the obligation.

**SCHEDULE C – Loans Payable and Receivable** include prior years

Make photocopies of this page if additional space is needed.

Page \_\_\_\_ of \_\_\_\_

Date of original loan	Name, full address, employer, and occupation for each lender, endorser, or borrower	Col. 1 PAYABLES (owed by committee)	Col. 2 RECEIVABLES (owed to the committee)
		\$	\$
		\$	\$
		\$	\$
		\$	\$
<b>TOTALS</b>		\$	\$
		To pg. 5, line 1	

**SCHEDULE D - Unpaid Obligations** include prior years

Date	Name and full address of each creditor	Purpose of credit extension	Col. 1 Outstanding Amount – Campaign expenditures	Col. 2 Outstanding Amount – Noncampaign disbursements
			\$	
			\$	
			\$	
			\$	
<b>TOTALS</b>			\$	
			To pg. 5, line 2	To pg. 5, line 3

It is unlawful to use this information for commercial purposes.

## DEFINITIONS

### Noncampaign disbursements

1. payment for accounting and legal services;
2. return of a contribution to the source;
3. repayment of a loan;
4. payment for food, beverages, utensils, supplies, entertainment, and facility rental for a fund-raising event;
5. cost of services for a constituent performed by a member of the legislature or a constitutional officer as provided in Minnesota Statutes section 10A.173, subdivision 1, including the full cost if services are performed from the beginning of the term of office to adjournment sine die of the legislature in the election year for the office held, half of the cost if performed from adjournment sine die to 60 days after adjournment sine die of that year, and none of the cost if performed during any other period;
6. payment for food and beverages consumed by a candidate or volunteers while engaged in campaign activities;
7. payment for food or a beverage consumed while attending a reception or meeting directly related to legislative duties;
8. payment of expenses incurred by elected or appointed leaders of a legislative caucus in carrying out their leadership responsibilities;
9. payment of the candidate's expenses for serving in public office, other than for personal uses;
10. costs of child care for the candidate's children when campaigning;
11. fees, transportation, meals, and lodging paid to attend a campaign school;
12. transportation, meals, and lodging paid to attend a campaign school;
13. costs of a postelection party during the election year when a candidate's name will no longer appear on a ballot or the general election is concluded, whichever occurs first;
14. payment of interest on loans;
15. filing fees;
16. post-general election holiday or seasonal cards, thank-you notes, or advertisements in the news media mailed or published prior to the end of the election cycle;
17. cost of campaign material purchased to replace defective campaign material, if the defective material is destroyed without being used;
18. payments for funeral gifts or memorials;
19. cost of a magnet distributed to constituents less than 6 inches in diameter containing legislator contact information;
20. costs associated with a candidate attending a political party state or national convention in Minnesota;
21. costs paid to a third party for processing contributions made by a credit card, debit card, or electronic check;
22. contribution to a candidate's ballot recount fund;
23. costs for a single reception in honor of the candidate's retirement from public office after the filing period for affidavits of candidacy for that office has closed;
24. donation from a terminating principal campaign committee to the state general fund;
25. donation from a terminating principal campaign committee to a county obligated to incur special election expenses due to that candidate's resignation from state office;
26. costs of campaigning incurred by a person with a disability, as defined in Minnesota Statutes section 363A.03, subdivision 12, made necessary by the disability;
27. costs to an incumbent or a winning candidate of providing services to residents in the district after the general election in an election year for the office held; and
28. payment of advances of credit (unpaid bills) in a year after the year the advance was reported as an expenditure;
29. payment of fines assessed by the Board; and
30. costs of running a transition office for a winning gubernatorial candidate during the first 6 months after election.

### Miscellaneous income

Money received that is not a contribution, loan, or public subsidy payment (e.g., interest from an interest bearing account).

### Unpaid bills

Advance of credit for goods or services for which payment has not been made. An advance of credit is an unpaid bill from the time it is incurred, regardless of when an invoice is received.