

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Vote Yes! EPS
 Office sought or ballot question Vote Yes to renew referendum District 273

Type of report _____ Candidate report
 _____ Campaign committee report
 _____ Association or corporation report
 _____ Final report
 Period of time covered by report: from 9/22/17 to 10/23/17

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 \$ 4515.00 TOTAL CASH-ON-HAND \$ 6022.21
 IN-KIND + \$ _____
 TOTAL AMOUNT RECEIVED = \$ 4515.00

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
9/26/17	Campaign button	371.51
10/11 & 10/17	Credit Card fees (Paypal)	47.79
9/28/17	Lawn signs	173.38
9/28/17	office supplies (checks, envelopes, stamps)	84.24
	From 2nd page	1961.77
	TOTAL	4196.69

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. _____
 Signature _____ Date 11/1/17

Printed Name Stephanie Zahrbach Telephone 952-913-7831 Email (if available) sz2zhrback@yahoo.com
 Address 4517 Laguna Dr. Edina, MN 55435

Report Office Name For Office Use Only:

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Office sought or ballot question _____ District _____

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

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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
9/26/17	outreach	83.08
9/26/17 & 10/4/17	printing	455.84
10/4/17 & 10/15/17	Social Media	88.60
10/6/17 & 10/17/17	Sun Current Advertising	1334.25
TOTAL		1961.77

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Signature _____ Date _____

Printed Name _____ Telephone _____ Email (if available) _____

Address _____

Pre-general Report Page 2

Report

Office

Name

For Office Use Only: