

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Julie Trude

Office sought or ballot question Mayor District City of Andover

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

Period of time covered by report:
 from Jan 1 2020 to Oct 5, 2020

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 \$ 2030 TOTAL CASH-ON-HAND \$ 0
 IN-KIND + \$ —
 TOTAL AMOUNT RECEIVED = \$ 2030

DISBURSEMENTS

Include the amount, date and purpose for all disbursements made during the period of time covered by report. Attach additional sheets if necessary.

2020 Date	Purpose	Amount
<u>Filing fee 8/3</u>	<u>Filing fee</u>	<u>5.</u>
<u>8/20</u>	<u>Sec. of State</u>	<u>30.</u>
<u>10/2 & 10/5</u>	<u>Printing</u>	<u>2249.</u>
<u>Jan-Oct 2020</u>	<u>Website hosting</u>	<u>114.</u>
<u>10/2/2020</u>	<u>Misc supplies</u>	<u>15.</u>
TOTAL		<u>2413.</u>

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. Julie Trude 10/5/2020
 Signature Date

Printed Name Julie Trude Telephone 7638622499 Email (if available) jtrude@comcast.
 Address 13862 Holly St NW Andover MN 55304

Report Office Name For Office Use Only:

Financial Statement Supplement

Mayor Candidate: Julie Trude

Contributions over \$100: Sept. 21, 2020

Mark Smith, 2120 Otter Lake Dr., Lino Lakes, MN, business owner, developer, \$600

Nathan Fair, 13432 Hanson Blvd., Andover, MN, business owner, developer, \$600

Tony Peterson, 1189 162nd Ave NW, Andover, MN, business owner, general contractor, \$500

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Julie Trude
 Office sought or ballot question Mayor District City of Andover

Type of report X Candidate report
 _____ Campaign committee report
 _____ Association or corporation report
 _____ Final report

Period of time covered by report:
 from Oct 6, 2020 to Oct 24, 2020

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 Loan to self covering previous expenses \$ 383 TOTAL CASH-ON-HAND \$ 0
 IN-KIND + \$ _____
 TOTAL AMOUNT RECEIVED = \$ _____

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
<u>Oct 6 - Oct 24</u>		<u>0</u>
	TOTAL	<u>0</u>

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. Julie Trude 10/24/2020
 Signature Date
 Printed Name Julie Trude Telephone 763-862-2499 Email (if available) jtrude@comcast.net
 Address 13802 Holly 65 NW Andover MN 55304

Report Office Name For Office Use Only:

Office of the Minnesota Secretary of State

CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING

Instructions

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*)

Campaign Information

Name of candidate or committee

Julie Trude

Office sought by candidate (if applicable)

Mayor

Identification of ballot question (if applicable)

Certification

Select the appropriate choice below, and sign.

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 all campaign contributions or disbursements did not exceed \$750 in the calendar year.

Signature of candidate or committee treasurer

Date

Julie Trude 11/28/2020

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Julie Trude

Office sought or ballot question Mayor District _____

Type of report _____ Candidate report
 _____ Campaign committee report
 _____ Association or corporation report
X Final report

Period of time covered by report:
 from Oct 21 to Nov 28
2020

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 \$ 1500 TOTAL CASH-ON-HAND \$ 0
 IN-KIND + \$ _____ (Deficit pd by candidate.)
 TOTAL AMOUNT RECEIVED = \$ 1500

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
AA 11/18/20	Mailing expense (Postage, sorting)	2050
11/5/20	Ads	19
11/28/20	Website (Nov.)	21
TOTAL		2090

CORPORATE PROJECT EXPENDITURES

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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. Julie Trude 11/28/2020
 Signature Date

Printed Name Julie Trude Telephone 7638622499 Email (if available) jtrude@comcast.net

Address 13862 Holly St NW Andover MN 55304

Report

Office

Name

For Office Use Only:

Campaign Finance Statement

Julie Trude – Mayor

Contribution:

11/09/20 \$300 Anita Thomas 2825 Marystone Blvd., Andover MN, retired