CAMPAIGN FINANCIAL REPORT

Name of candidate, committee or corporation: Robert White
Office sought or ballot question: Mayor
district: Spring Lake Park

Type of report: Candidate report
Period of time covered by report: from 9/8/2020 to 10/1/2020

CONTRIBUTIONS RECEIVED: None

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: $____________

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.

<table>
<thead>
<tr>
<th>Date</th>
<th>Purpose</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>9/8/2020</td>
<td>Signs/Banners/Decals</td>
<td>$1457.97</td>
</tr>
<tr>
<td>9/21/2020</td>
<td>Letters</td>
<td>$107.54</td>
</tr>
<tr>
<td>9/24/2020</td>
<td>Letters/Masks/Sanitizers/Water/Street</td>
<td>$530.98</td>
</tr>
<tr>
<td>9/30/2020</td>
<td>Letters</td>
<td>$15.50</td>
</tr>
<tr>
<td>TOTAL:</td>
<td></td>
<td>$1834.39</td>
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</tbody>
</table>

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:

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<td>TOTAL:</td>
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</tbody>
</table>

I certify that this is a full and true statement. __________________________ 10/1/2020

Signature Date

Printed Name: Robert White Telephone: 612-867-5312 Email (if available): robwhite100@gmail.com
Address: 12121 Harshy Circle, Spring Lake Park MN 55432
CAMPAIGN FINANCIAL REPORT

Name of candidate, committee or corporation: Robert White
Office sought or ballot question: Mayor
District: Spring Lake Park
Type of report: Candidate report
Period of time covered by report: from 9/16/2020 to 10/4/2020

CONTRIBUTIONS RECEIVED
None

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
$ 5
TOTAL CASH-ON-HAND $ 5

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.

<table>
<thead>
<tr>
<th>Date</th>
<th>Purpose</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>10/15/2020</td>
<td>Snacks/Water</td>
<td>58.28</td>
</tr>
<tr>
<td>10/14/2020</td>
<td>Letters</td>
<td>234.95</td>
</tr>
<tr>
<td></td>
<td>TOTAL</td>
<td>289.23</td>
</tr>
</tbody>
</table>

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

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<th>Name and Address of Recipient</th>
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</tr>
</thead>
</table>

TOTAL

I certify that this is a full and true statement.

Signature: Robert White
Date: 10/4/2020

Printed Name: Robert White
Telephone: 612-286-7532
Email (if available): behatik@springlakepark.mn
Address: 120 Harty Circle, Spring Lake Park, MN 55432

Office of the Minnesota Secretary of State
2020 Campaign Manual
65
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 ____________________________

Office sought by candidate (if applicable) __________________

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 to date by Minnesota Statutes 211A.02 have been submitted to the filing officer.

☐ I do swear (or affirm) that campaign contributions or disbursements did not exceed $750 in the calendar year.

Signature of candidate or committee treasurer ____________________________

Date 10/4/2020
SAH'S CLUB
Self Checkout
CLUB MANAGER LISAHU HEBERIA
(763) 784-4102
550 UNIVERSITY AVE. FRIDLEY, MN
5/20/20 00:13 1675 05610 994 9094

980118332 HSQ WIC CDFE
980042490 UTZ PREZEL
980010669 WADGOUT10OCEF
980042196 UTZ CACKDLEF

SUBTOTAL: 56.06
TAX 1 7.125 % 1 142
TOTAL: 58.28

DEBIT CARD: **** **** **** **** 9837 12

CREDIT DUE: 0.00

YOU PAY: 142.50 SS

JTH CODE 144825
3S Chip Read
ID 0000000042203 BOW DEBIT CARD
VR 00000088000
/S No Signature Required

# ITEMS SOLD 4

TCH 3031 2995 2406 6742 1570

*** MEMBER COPY ***

Total Savings: $1.00

WE WANT TO HEAR FROM YOU!
Visit survey.officedepot.com
and enter the survey code below:
15RC P91J S671

---

Office DEPOT
OfficeMax
BLAINE - (763) 783-8033
09/30/2020 2:47 PM

6181-1-8791-903145-20.9.2

61838 CUT MACH PER C
0.75 SS

Subtotal: 14.75
Sales Tax: 1.05
Total: 15.80

MasterCard 9837: 15.80

YOU PAY: 14.00 SS

61838 CUT MACH PER C
0.75 SS

Subtotal: 14.75
Sales Tax: 1.05
Total: 15.80

MasterCard 9837: 15.80

YOU PAY: 142.50 SS

BJ SS Letter
0.15
0.13

YOU PAY: 33.75 SS

110lb Index
0.12

YOU PAY: 33.66 SS

110lb Index
-0.04

YOU PAY: 0.08 SS

coupon number - 170H8TW5SCTUWX

Subtotal: 215.59
Sales Tax: 15.36
Total: 230.95

MasterCard 9837: 230.95

AUTH CODE 141446
TDS Chip Read
AID 0000000042203 BOW DEBIT CARD
TVR 0000088000
/CVS No Signature Required

Total Savings: $160.00

WE WANT TO HEAR FROM YOU!
Visit survey.officedepot.com
and enter the survey code below:
15RD V84H X0UX

---
Office DEPOT
OfficeMax
BLAINE - (763) 783-8033
09/21/2020 2:17 PM

SALE 6181-4-6150-967180-20.7.2
856297 RBBNDS, #32,17 4.19
  Coupon - 16331879 -1.04
  You Pay 3.15SS
166962 Color SS Lette 106.50
  150 @ 0.71
  Bulk 80.64
  Coupon - 16331879 -24.00
  You Pay 72.00SS
167060 BW SS Letter 18.90
  126 @ 0.15
  Bulk @0.14
  Coupon - 16331879 -5.04
  You Pay 12.60SS
167228 110lb Index 6.00
  50 @ 0.12
  Coupon - 16331879 -1.00
  You Pay 5.00SS
746882 White, 28#, Te 5.00
  100 @ 0.05
  Coupon - 16331879 -5.00
  You Pay 5.00SS
167060 BW SS Letter 3.60
  24 @ 0.15
  Bulk 80.14
  Coupon - 16331879 -0.72
  You Pay 2.64SS

Coupon Number - 14HISJCBB3DNJ

Subtotal: 100.39
  Sales Tax: 7.15
  Total: 107.54
  Debit Card 0608: 107.54

TDS Chip Read
AID AO000000980840 US DEBIT
TVR 8000048000
CVS PIN Verified

Total Savings: $43.80

WE WANT TO HEAR FROM YOU!
Visit survey.office depot.com
and enter the survey code below:
RESR 28TX JUGZ

Office DEPOT
OfficeMax
BLAINE - (763) 783-8033
09/24/2020 10:26 AM

SALE 6181-4-6501-905226-20.9.2
166962 Color SS Lette 213.00
  300 @ 0.71
  Bulk 80.55
  Coupon - 16331879 -42.00
  You Pay 123.00SS
167060 BW SS Letter 45.00
  300 @ 0.15
  Bulk 80.13
  Coupon - 16331879 -9.00
  You Pay 30.00SS
167228 110lb Index 36.00
  300 @ 0.12
  Coupon - 16331879 -9.00
  You Pay 27.00SS
861838 CUT MACH PER C 2.25
  3 @ 0.75
  Coupon - 16331879 -0.57
  You Pay 1.68SS
9944345 3-Ply Mask, BD 29.99SS
  Instant Savings -10.00
  You Pay 19.99SS
856595 RBBNDS, SZ20, 1# 8.99
  Coupon - 16331879 -2.25
  You Pay 6.74SS
918249 Candy, SP, Water 4.98
  2 @ 2.49
  Coupon - 16331879 -1.24
  You Pay 3.74SS
4346040 CNDY, GYBR, MLT 7.98
  2 @ 3.99
  Coupon - 16331879 -2.00
  You Pay 5.98SS
4279656 SNTZ, HND, ALOE, 10.99
  You Pay 10.99SS
759194 HLDR, LIT, VM, CN 9.49
  Coupon - 16331879 -2.36
  You Pay 7.13SS
4279656 SNTZ, HND, ALOE, Promotion -10.99
  You Pay 0.00SS

Coupon Number - 14HISJCBB3DKGE

Subtotal: 236.25
  Sales Tax: 16.83
  Total: 253.08
  MasterCard 9837: 253.08

AUTH CODE 102813
TDS Chip Read
AID AO00000042203 BDW DEBIT CARD
TVR 0000088000
CVS No Signature Required
**BILL TO**  
Bob White  
7920 Hartig Cir  
Spring Lake Park, MN  55432  
USA

**SHIP TO**  
Bob White  
7920 Hartig Cir  
Spring Lake Park, MN  55432  
USA

**INVOICE 2632**

**DATE** 09/08/2020  
**TERMS** Net due in 0 days  
**DUE DATE** 09/08/2020

**SHIP DATE** 09/11/2020  
**SHIP VIA** Best Way  
**SALES REP** Nathan Dufek

<table>
<thead>
<tr>
<th>ACTIVITY</th>
<th>DESCRIPTION</th>
<th>QTY</th>
<th>RATE</th>
<th>AMOUNT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Signs &amp; Banners</td>
<td>Corrugated Plastic Yard Signs 24&quot;W x 18&quot;H. With full color print on 2-sides. 2-beefy stakes per sign included. &quot;Bob White&quot; design.</td>
<td>100</td>
<td>8.00</td>
<td>800.00T</td>
</tr>
<tr>
<td>Signs &amp; Banners</td>
<td>Corrugated Plastic Yard Signs 48&quot;W x 36&quot;H. With full color print on 1-side. 2-beefy stakes per sign included. &quot;Bob White&quot; design.</td>
<td>3</td>
<td>28.00</td>
<td>84.00T</td>
</tr>
<tr>
<td>Signs &amp; Banners</td>
<td>Vinyl Banner 72&quot;W x 36&quot;H. With full color on 1-side. 2-beefy stakes per sign included. &quot;Bob White&quot; design.</td>
<td>3</td>
<td>81.00</td>
<td>243.00T</td>
</tr>
<tr>
<td>Freight</td>
<td>Shipping - Yard Signs.</td>
<td>1</td>
<td>85.00</td>
<td>85.00T</td>
</tr>
<tr>
<td>Signs &amp; Banners</td>
<td>Vinyl Decals 96&quot;W x 48&quot;H, Full color print on 1-side with adhesive back. &quot;Bob White&quot; design.</td>
<td>2</td>
<td>65.00</td>
<td>130.00T</td>
</tr>
<tr>
<td>Freight</td>
<td>Shipping</td>
<td>1</td>
<td>19.00</td>
<td>19.00T</td>
</tr>
</tbody>
</table>

Thank you for your business!

**SUBTOTAL** 1,361.00  
**TAX** 96.97  
**TOTAL** 1,457.97

**TOTAL DUE** $1,457.97
CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation: Robert White

Office sought or ballot question: Mayor - SL

District: Spring Lake Park

Type of report: x Candidate report

Association or corporation report

Final report

Period of time covered by report: from 10/7/20 to 10/4/20

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 $ ______________

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.

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TOTAL

CORPORATE PROJECT EXPENDITURES

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Project title or description

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</table>

TOTAL

I certify that this is a full and true statement.

Signature: Robert White

Date: 11/9/2020

Printed Name: Robert White

Telephone: 612-887-5312

Email (if available): broke.drywall@msn.com

Address: 7920 Haulig Circle, SLG MN 55432
CAMPAIGN FINANCIAL REPORT

Name of candidate, committee or corporation: Robert White
Office sought or ballot question: Mayor - SLP
District: Spring Lake Park
Type of report: Campaign committee report
Period of time covered by report: from 10/19 to 11/28

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 $ 
IN-KIND $ +
TOTAL AMOUNT RECEIVED $ 

DISBURSEMENTS

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</table>

TOTAL

I certify that this is a full and true statement.

Signature: Robert White
Date: 11/9/2020

Printed Name: Robert White
Telephone: 612.847.5312
Email (if available): briana.stephens@gmail.com
Address: 7320 Harbor Circle SLP MN 55432
Office of the Minnesota Secretary of State

CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING

Instructions
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Campaign Information
Name of candidate or committee: Robert White
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: Robert White
Date: 11/9/2020