## CAMPAIGN FINANCE REPORT OF RECEIPTS AND EXPENDITURES

As required by the Hennenin County Financial Disclosure Law: Minnesota Statutes 383B.041-383B.058

ALL INFORMATION ON THIS REPORT IS PUBLIC.	Type or print in black ink.	RETAIN A COPY OF THIS REPORT FOR YOUR FILES.
Bruce for City Council	717 G SKI (MS) AV SG1317111	
(Name of Committee or Fund)		-
2. Bruce A. Lundeen (Treasurer's Name)	· · · · · · · · · · · · · · · · · · ·	brucealundeen@msn.com (E-mail Address)
32628 Stevens Ave., Minneapolis, MN 5540	8.	(L-mail Address)
(Treasurer's Mailing Address for Committee Bus	iness)	
4. Treasurer's Daytime Phone Number: 61	2 978 8973	
5. Change in Committee or Officer's Name, Ad	ddress, Phone. (Attach new "Registration & State	ement of Organization")
6. No activity since last Report. (Insert Beginni	ng and Ending Balance at #9 & #12 below)	
6a. No activity with 383B.041058 candidates	this reporting period. (Complete lines #9-#12 a	s applicable)
	e paid and Ending Balance can be no more than	\$100. Termination of committee registration.
If your committee is a state committee, please		Received by Hennepin Coun
	esday January 31, 2018	Техрауег, Services
REPORTING PERIOD: (check one)		, , , , , , , , , , , , , , , , , , ,
2017 Candidates on the ballot		JAN 3 1 2018
And Political Funds or Committe  Candidates NOT on the ballot in 2	the second secon	Through: 12/31/2017
The Control of the American plant and the problem, the depth of the problem of the problem.	Company of the Compan	109 110
9. BEGINNING CASH BALANCE THIS REPORT	: \$ 368.16	PW DEL
001//4/	(Insert Ending Cash Balance from last report	rt)
COLUMN A Activity Reported this year,	COLUMN B	COLUMN C
In previous reporting periods.	ACTIVITY IN THIS REPORTING PERIOD	<del>-</del>
10. ADDITIONS:		
\$ 702.01	+ \$ 0.02	\$ 702.03
(Column C, Line 10 from Last Reporting period.)	(Insert amount from line 25)	(Insert total of line 10, columns A + B)
11. SUBTRACTIONS:		
<u>\$ 333.85</u>	<b>-</b> \$ 54.99	\$ 388.84
(Column C, Line 11 from Last Reporting period.)	(Insert amount from line 34)	(Insert total of line 11, columns A + B)
12. ENDING CASH BALANCE THIS REPORT:	= \$ 303.19 56 31316 (Line 9 + line 10(column B) - line 11(column B)	<u>Q</u> }> mn B)
SUMMARY OF IN-KIND DONATIONS & OUTSTANDI	NG LOANS RECEIVABLE:	•
COLUMN A	COLUMN B	COLUMN C
Activity Reported on Last Report	ACTIVITY IN THIS REPORTING PERIOD	
13. In-Kind Donations Received:		
¢	+\$	\$
(Column C, Line 13 from Last Reporting period.)	(Insert total from line 36)	(Insert total of line 13, columns A + B)
14. Goods/Services Given to Others:	, ,	
e	<b>d</b>	¢
(Column C, Line 14 from Last Reporting period.)	(Insert total from line 39)	(Insert total of line 14, columns A + B)
15. Current Balance of Outstanding Loans Reco	sivable (leaned to others)	
Our tent balance of Outstanding Loans Nece	ervable (loaned to others)	(Insert total Current Balance from line 45)
CHRIMADY OF OUTSTANDING DEDT		
<ul><li>SUMMARY OF OUTSTANDING DEBT;</li><li>16. Current Balance of Outstanding Loans Payable</li></ul>	(loaned to you)	• \$
(Amount from Last Report: \$ )	(	(Insert total Current Balance from line 42)
17. Current Balance of Outstanding Unpaid Bills/Ac	lvance of Credit	• \$
(Amount from Last Report: \$ )		(Insert total Amount Owed from line 46)
18. CERTIFICATION: Any person who signs and certification.	les to be true a report or statement which the per	son knows contains false information or who knowingly omits
required information is guilty of a gross misdemeand	r.	
I, (Print Name) <u>Bruce A. Lundeen</u>	, CERTIFY THAT THIS RE	PORT IS COMPLETE, TRUE AND CORRECT.
SIGNATURE OF TREASURER:	Theyles -	DATE: 1/31/2018

FILE THIS REPORT WITH:

## RECEIPT AND EXPENDITURES WORKSHEET FOR THIS REPORTING PERIOD ONLY

NA	ME OF COMMITTEE OR FUND: Bruce for City C	ouncil	DATE: <u>12/31/2017</u>
AD	DITIONS: (Income)		
19.	Total ITEMIZED Contributions:	\$ (Insert total from line 35)	
20.	Total NON-ITEMIZED Contributions:	\$	(Subtotal: lines 19 + 20)
21.	Income from bank dividends, interest, etc:	\$ 0.02	
22.	New Loans Payable (loaned to you):	(Insert total from line 40)	
23.	New Repayments on Loans Receivable: (loaned to others/repaid to you)	\$ (Insert total from line 44)	
24.	Other:	\$	\$ 0.02 (Subtotal: lines 21+22+23+24)
25.	TOTAL INCOME:	\$ 0.02 (TOTAL lines 19 through 24. Tra	nsfer this amount to Line 10, Column B.)
SU	BTRACTIONS: (Expenditures)		
26.	Total ITEMIZED Contributions to Others:	\$ (Insert total from line 38)	
27.	Total NON-ITEMIZED Contributions to Others:	\$	\$ (Subtotal: lines 26 + 27)
28.	Total ITEMIZED Operating Expenditures:	\$ (Insert total from line 37)	
29.	Total NON-ITEMIZED Operating Expenditures:	\$	(Subtotal: Lines 28 + 29)
30.	Bank service charges, etc., paid by you:	\$ 54.99	
31.	New Repayments on Loans Payable: (loaned to you/repaid to lender)	(Insert total from line 41)	
32.	New Loans Receivable (loaned to others):	\$ (Insert total from line 43)	
33.	Other:	\$	\$ 54.99 (Subtotal: lines 30+31+32+33)
34.	TOTAL EXPENDITURES:	\$ 54.99 (Total lines 26 through 33. <b>Trans</b>	sfer this amount to Line 11, Column B.)

Important information: Addresses submitted on Schedule A are public data pursuant to the Minnesota Government Data Practices Act. This form is retained on file in the Hennepin County Elections Division. As a convenience, Hennepin County also displays Schedule A on the Hennepin County web site. Please check the box and initial the form on the line provided if you do not want the If selected, please submit two versions of Schedule A, one with contributors' addresses and one without. address of contributors to be displayed on the website. 

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## SCHEDULE A: INCOME FROM CASH (MONETARY) CONTRIBUTIONS and IN-KIND DONATIONS

uce for City Council
E OR FUND: Bruce
OF COMMITTEE OR
NAME OF

DATE: 12/31/2017

You must disclose the date and amount of each monetary contribution or donation In Kind within the year that, in aggregate from any contributor, exceeds \$100 \*, the name and address of the individual, committee or fund that made the monetary contribution or Donation In Kind, and the employer of the individual contributor. (\*\*In the case of a contributor who is self-employed, that is, does not derive earned income as owner, partner, or employee of a corporation, partnership, or other entity, including a branch of government, you must list that contributor's occupation.)

\*Political Funds must itemize contributions of members that, in aggregate in the year, exceed \$50.

Attach additional pages as necessary. If you submit a typed or computer-generated list, all items must be in the same order as they appear on Schedule A.

e name not					)		
					List contribution	List contributions here for the	
				COLUMN A	COLUMN B COLUM	COLUMN B1	COLUMN C
Date	ALPHABETICAL ORDER!	Contributor's	Description of In-Kind	Previous Total	\$ Received	\$ Value of In-	Total from Source
Rcvd.	Contributor Name & Address	Employer**	Donation	For This Year	This Period	Kind Donation	Year to Date
-							
			7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1				
		111111111111111111111111111111111111111	1				
			1,000				
					-		
	MATTING MATTING	1000			<u>€</u>		
Subtota	Subtotal II EMIZED Monetary Contributions received this period:	s received this period:			Ð		
Subtota	Subtotal ITEMIZED Monetary Contributions received this period listed on previous page:	s received this period listed	on previous page:		\$		
35. TOTAL	35. TOTAL ITEMIZED CONTRIBUTIONS RECEIVED THIS PERIOD: (Transfer this amount to Line 19)	EIVED THIS PERIOD: (Tra	insfer this amount to Line	(19)	\$		
							-
Subtota	Subtotal ITEMIZED In-Kind Donations received this period	ived this period:				\$	
Subtota	Subtotal ITEMIZED In-Kind Donations received this period	ived this period listed on pi	listed on previous page:			<b>€</b>	
Subtota	Subtotal NON-ITEMIZED In-Kind Donations Received This Period:	s Received This Period:				\$	

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36. TOTAL IN-KIND DONATIONS RECEIVED THIS PERIOD. (Transfer this amount to Line 13, Column B)

## SCHEDULE B: OPERATING EXPENDITURES and CONTRIBUTIONS MADE TO OTHER COMMITTEES

NAME OF COMMITTEE OR FUND: Bruce for City Council

You must disclose the name and address of each individual, business or committee to whom expenditures/contributions have been made, in an aggregate amount in excess of \$100 within the year, and the amount, date and specific purpose of the expenditure.

DATE: 12/31/2017

If you submit a typed or computer-generated list, all items must be in the same order as they appear on Schedule B.

Attach additional pages as necessary.

				List expenditures here for the current reporting period	es here for the	
			COLUMN A	COLUMN B	COLUMN B1	COLUMN C
	ALPHABETICAL ORDER!	Purpose for	Previous Total	Operating	Contributions	Total to Source
Date Paid	Vendor or Recipient Committee Name and Address	Expenditure	For This Year	Expenditures	to Others	Year to Date
ı	119-12-119				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	CALLET THE PARTY OF THE PARTY O			Paris i		
	1000					
					The section of the se	
Subtots	Subtotal ITEMIZED Operating Expenditures this period:			€.		
Subtota	Subtotal ITEMIZED Operating Expenditures this period listed on previous page:	us page:		<b>↔</b>		
37. TOTAL	TOTAL ITEMIZED OPERATING EXPENDITURES THIS PERIOD: (Transfer this amount to Line 28)	nsfer this amount to Line	28)	↔	<del>1</del>	
					1	
Subtota	Subtotal ITEMIZED Contributions to Others this period:				\$	
Subtota	Subtotal ITEMIZED Contributions to Others this period listed on previous page:	is page:			\$	
38. TOTAL	TOTAL ITEMIZED CONTRIBUTIONS TO OTHERS THIS PERIOD: (Transfer this amount to Line 26)	insfer this amount to Lin	e 26)		\$	
						ı

,	F COMMITTEE OR FUND: B	• ".		DATE:	12/31/2017	<del></del>
You must goods and	LE C: GOODS AND SERVIC disclose the total value of go d services, is in excess of \$10 services given.	ods and services given to	another committee, ist also disclose the	as well as any othe date, name and a	erwise non-itemizab Idress of the recipie	ole cash that, togethent and a description
				Goods & Service	s + Cash = \$100+	
				Given in Cu	irrent Period	
	Alphabetical Order!		COLUMN A	COLUMN B	COLUMN B1	COLUMN C
	Name & Address of	Description of	Previous Total		Value of Goods	Recipient Total
Date	Recipient	Goods and Services	for This Year	Cash Given	& Services	Year to Date
					Φ.	
39. Total	Goods and Services given in	this period: (Transfer this	s amount to Line 1	4, Column B)	\$	
SCHEDUI	LE D: NOTES AND LOANS	PAYABLE (Loaned to You	u)			
			,			
	Loans Given to or Repaid by You in  Current Reporting Period					
	Alphabetical Orderl		COLUMN A1	COLUMN B	COLUMN B1	COLUMN C1
	Alphabetical Orderi		Loan Balance	Add New Loan	Subtract Loan	Current Balance
Date	Name, Address & Emplo	over of Lender	Last Report	\$ Received	\$ Repaid	Owed by You
		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		·	,	
					<del> </del>	
40. Total	New Loans Payable this per	iod: (Transfer this amoun	t to Line 22)	\$		
	Repayment of Loans Payable				\$	
12. Curre	ent Balance of Outstanding Lo	oans Payable: (Transfer th	nis amount to Line	16)		\$
SCHEDUI	LE E: NOTES AND LOANS	RECEIVABLE (Loaned by	You)	i -	or Repaid to You in	
	Almhahatiani Ordani		COLUMN A1	COLUMN B	column B1	COLUMN C1
	Alphabetical Order!	U 187 - <del></del>	Loan Balance	Add New Loan	Subtract Loan	Current Balance
Date	Name, Address & Emplo	over of Recipient of Loan	Last Report	\$ Given	\$ Repaid	Owed to You
	<u> </u>		•			
	New Loans Receivable this	<u> </u>		\$		
	Repayment of Loans Receiv				\$	
45. Curre	ent Balance of Outstanding Lo	oans Receivable: (Transfe	r this amount to Li	ne 15)		\$
SCHEDUI	LE F: UNPAID BILLS/ADVA	NCE OF CREDIT (Items o	r services received	l but not paid)		
	Alphabetical Order!					Current Balance
		dor of Goods or Services R	Received But Not Pa	id For		Owed by You
Date	Name & Address of Ven	dor or coods or corvices to				
Date	Name & Address of Ven	doi oi codda di colvicca i				
Date	Name & Address of Ven	der of cools of convicts t				
			die /Tunnas- 4ht-	mount to I to a d T		¢
	Name & Address of Ven		dit: ( <b>Transfer this</b> a	nmount to Line 17	)	\$
46. Curre	ent Balance of Outstanding U	npaid Bills/Advance of Cre				\$
46. Curre		npaid Bills/Advance of Cre	NDENT EXPENDIT	URES WERE MAD		\$
47. <b>The</b> <sup>-</sup> (Mak	ent Balance of Outstanding U  Treasurer is to sign this state notations on Schedules B	npaid Bills/Advance of Cre stement ONLY IF INDEPE or C where Independent Ex	NDENT EXPENDIT	URES WERE MAD		\$
46. Curre 47. <b>The</b> (Mak	ent Balance of Outstanding U  Treasurer is to sign this state notations on Schedules B of EPENDENT EXPENDITURE:	npaid Bills/Advance of Cre stement ONLY IF INDEPE or C where Independent Ex	NDENT EXPENDIT penditures are item	URES WERE MAD	PE.	
46. Curre 47. <b>The</b> (Mak <b>INDE</b> I, (Pri	ent Balance of Outstanding U  Treasurer is to sign this state notations on Schedules B of EPENDENT EXPENDITURE: int Name) Bruce A. Lundeen	npaid Bills/Advance of Cre stement ONLY IF INDEPE or C where Independent Ex SWORN STATEMENT	NDENT EXPENDIT penditures are item, here	URES WERE MAD	DE. dependent expendi	tures made on beh
6. Curre  7. The (Mak	ent Balance of Outstanding U  Treasurer is to sign this state notations on Schedules B of EPENDENT EXPENDITURE:	npaid Bills/Advance of Cre  Itement ONLY IF INDEPE  or C where Independent Ex  SWORN STATEMENT  port were made WITHOUT	NDENT EXPENDIT penditures are item, here, the authorization	URES WERE MAD ized.) by certify that all in or expressed or in	DE.  dependent expendinglied consent of,	tures made on beh
46. Curre 47. The (Mak INDE I, (Pri candi	Treasurer is to sign this state notations on Schedules B of EPENDENT EXPENDITURE: int Name) Bruce A. Lundeen idates and reported in this re	npaid Bills/Advance of Cre  Itement ONLY IF INDEPE  or C where Independent Ex  SWORN STATEMENT  port were made WITHOUT	NDENT EXPENDIT penditures are item, here, the authorization	URES WERE MAD ized.)  by certify that all in or expressed or in campaign commi	DE.  dependent expendinglied consent of,	tures made on beh