CAMPAIGN FINANCE REPORT OF RECEIPTS AND EXPENDITURES

As required by the Hennepin 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.
1.	MARK HAASE FOR HENNEPIN COUNTY A	TTORNEY	
2.	(Name of Committee or Fund)EMILY FALENCZYKOWSKI-SCOTT	r	
۷.	(Treasurer's Name)		EMILY.SUSANN@GMAIL.COM (E-mail Address)
3.	231 MARIA AVE SAINT PAUL MN 55106		,
	(Treasurer's Mailing Address for Committee Busin	ess)	
4.	Treasurer's Daytime Phone Number:		
5.	☐ Change in Committee or Officer's Name, Add	ress, Phone. (Attach new "Registration & Statem	ent of Organization")
6.	No activity since last Report. (Insert Beginning	and Ending Balance at #9 & #12 below)	
6a.	☐ No activity with 383B.041058 candidates, the	nis reporting period. (Complete lines #9-#12 as	applicable) 70. Termination of committee registration. 71. 2021
7.	Termination of Committee - All debts must be p	paid and Ending Balance can be no more than \$10	00. Termination of committee registration.
	If your committee is a state committee, please co	ntact our office regarding termination.	
8.	2020 ANNUAL REPORT	DUE Monday Febr	ruary 1, 2021
	REPORTING PERIOD: (check one)		
	2020 Candidates on the ballot		
	And Political Funds or Committee Candidates NOT on the ballot in 20		Through: 12/31/2020
	Candidates NOT on the ballot in 20	20: F10III. 1/1/2020	Through: 12/31/2020
9.	BEGINNING CASH BALANCE THIS REPORT:	\$ 2,645.01	
	001 (1981) 4	(Insert Ending Cash Balance from last report)	-
	COLUMN A Activity Reported this year,	COLUMN B	COLUMN C
	In previous reporting periods.	ACTIVITY IN THIS REPORTING PERIOD	A + B = Total Activity for This Calendar Year
10.	ADDITIONS:		
	\$	+\$	\$
	(Column C, Line 10 from Last Reporting period.)	(Insert amount from line 25)	(Insert total of line 10, columns A + B)
11.	SUBTRACTIONS:		•
	\$ (Column C, Line 11 from Last Reporting period.)	(Insert amount from line 34)	(Insert total of line 11, columns A + B)
	(column o, Line 11 nom Last (coporting penoa.)	(macre amount monthing 54)	(moon total of line 11, columns 71 - b)
12.	ENDING CASH BALANCE THIS REPORT:	= \$ 2,645.01	
		(Line 9 + line 10(column B) - line 11(column	16)
SU	MMARY OF IN-KIND DONATIONS & OUTSTANDIN	G LOANS RECEIVABLE:	
	COLUMN A	COLUMN B	COLUMN C
	Activity Reported on Last Report	ACTIVITY IN THIS REPORTING PERIOD	A + B =Total Activity for This Calendar Year
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)
		(insert total from line 50)	(insert total of line 13, columns A + b)
14.	Goods/Services Given to Others:		
	(Column C, Line 14 from Last Reporting period.)	- \$ (Insert total from line 39)	(Insert total of line 14, columns A + B)
45	· · · · · · · · · · · · · · · · · · ·		(most total of mio 14, oddinio / (* 2)
10.	Current Balance of Outstanding Loans Received	vable (loaned to others)	(Insert total Current Balance from line 45)
CHI	MMARY OF OUTSTANDING DEBT:		· ·
	Current Balance of Outstanding Loans Payable (I	oaned to you)>	\$
	(Amount from Last Report: \$)	• •	(Insert total Current Balance from line 42)
17.	Current Balance of Outstanding Unpaid Bills/Adva	ance of Credit>	\$
	(Amount from Last Report: \$		(Insert total Amount Owed from line 46)
18.		to be true a report or statement which the persor	n knows contains false information or who knowingly omits
	required information is guilty of a gross misdemeanor. I, (Print Name) <u>Emily Falenczykowski-Sc</u>	CEDTIEV THAT T	HIS REPORT IS COMPLETE, TRUE AND CORRECT.
	, (i microsine) interiozyrowski-50	, OERHET IHAT II	THO TELL OIT IS COMPLETE, INCEAND CORRECT.
SIGI	NATURE OF TREASURER:		DATE: 1/29/2021

RECEIPT AND EXPENDITURES WORKSHEET FOR THIS REPORTING PERIOD ONLY NAME OF COMMITTEE OR FUND: _____ DATE: ___ ADDITIONS: (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: 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: _____ (Subtotal: lines 21+22+23+24) 25. TOTAL INCOME: (TOTAL lines 19 through 24. Transfer this amount to Line 10, Column B.) SUBTRACTIONS: (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: 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: _____ (Subtotal: lines 30+31+32+33)

(Total lines 26 through 33. Transfer this amount to Line 11, Column B.)

34. TOTAL EXPENDITURES:

Division.	information: Addresses submitted or As a convenience, HennepIn County a f contributors to be displayed on the v	ilso displays Schedule A c	on the Hennepin County web site	 Please check the 	box and initial the	form on the line pro	ovided if you do no	County Elections t want the
SCHED	ULE A: INCOME FROM CAS	H (MONETARY) CO	ONTRIBUTIONS and IN-	KIND DONATION	ONS			
NAME O	COMMITTEE OR FUND:				[DATE:	<u> </u>	
or fund that (**In the callist that con *Political F	disclose the date and amount of each mo t made the monetary contribution or Don- ise of a contributor who is self-employed, itributor's occupation.) unds must itemize contributions of memb tit a typed or computer-generated list, all	ation In Kind, and the emplo that is, does not derive earn ers that, in aggregate in the	yer of the individual contributor. ned income as owner, partner, or e year, exceed \$50.	employee of a corpora		or other entity, includin		
					1	ions here for the]
				COLUMN A	COLUMN B	COLUMN B1	COLUMN C	-
Date Rcvd.	ALPHABETICAL ORDER! Contributor Name & Address	Contributor's	Description of In-Kind	Previous Total	\$ Received	\$ Value of In-	Total from Source	
RCVu.	Contilibutor Name & Address	Employer**	Donation	For This Year	This Period	Kind Donation	Year to Date	-
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	-			 				-
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	·				<u> </u>			
Subto	tal ITEMIZED Monetary Contribution	is received this period:	·		\$			
Subtotal ITEMIZED Monetary Contributions received this period listed on previous page: \$ 1.5 1.5								
35. TOTA	L ITEMIZED CONTRIBUTIONS RE	CEIVED THIS PERIOD:	Transfer this amount to Line	19)	\$			
Subto	tal ITEMIZED In-Kind Donations rec	eived this period:				\$	1	
	tal ITEMIZED In-Kind Donations rec		n previous page;			\$	-	
Subtotal NON-ITEMIZED In-Kind Donations Received This Period:]	
36. TOTA	L IN-KIND DONATIONS RECEIVED	THIS PERIOD: (Transf	er this amount to Line 13, Co	olumn B)		\$		

SCHEDULE B: OPERATING EXPENDITURES and CONTRIBUTIONS MADE TO OTHER COMMITTEES

NAME OF COMMITTEE OR FUND: _____

the year, an	sclose the name and address of each individual, business or or of the amount, date and specific purpose of the expenditure. It a typed or computer-generated list, all items must be in the s	•		have been made,	, in an aggregate a	mount in excess of \$100 v
Attach addit	ional pages as necessary.					
				List expenditures here for the current reporting period		
			COLUMN A	COLUMN B	COLUMN B1	COLUMN C
	ALPHABETICAL ORDER!		Previous Total	Operating	Contributions	Total to Source
Date Paid	Vendor or Recipient Committee Name and Address	Purpose for Expenditure	For This Year	Expenditures	to Others	Year to Date
	<u>.</u>				 -	
		·				
	1.2 5 1.101 01.10.00 1.101					
	1000					
	***				1	
	·	. <u>.</u>				
					7	
Subtota	I ITEMIZED Operating Expenditures this period:			\$	_	
Subtota	I ITEMIZED Operating Expenditures this period listed on previ	ious page:		\$		
37. TOTAL	ITEMIZED OPERATING EXPENDITURES THIS PERIOD: (T	ransfer this amount to Line	28)	\$		
					-	_
Subtota	Subtotal ITEMIZED Contributions to Others this period:]
Subtotal ITEMIZED Contributions to Others this period listed on previous page: \$					\$	1 .
38. TOTAL ITEMIZED CONTRIBUTIONS TO OTHERS THIS PERIOD: (Transfer this amount to Line 26) \$					\$	1

DATE:_

SCHEDU	JLES C, D, E, and F (A	ttach additional page	s if necessary f	or Schedules C	, D, E, and F)		
NAME OF COMMITTEE OR FUND: DATE:							
You must of goods and	LE C: GOODS AND SERVIC disclose the total value of go services, is in excess of \$1 ervices given.	ods and services given to	another committee, ust also disclose the	as well as any othe date, name and ad	erwise non-itemizal ddress of the recipio	ble cash that, together vent and a description of	
·				Goods & Service	s + Cash = \$100+		
				Given in Current Period			
- `	Alphabetical Order!		COLUMN A	COLUMN B	COLUMN B1	COLUMN C	
	Name & Address of	Description of	Previous Total	j	Value of Goods	Recipient Total	
Date	Recipient	Goods and Services	for This Year	Cash Given	& Services	Year to Date	
39 Total (Goods and Services given in	this period: (Transfer this	s amount to Line 1	4 Column P)	¢		
- Total v	Coods and Octologs given in	r this period, (Transfer till	s amount to time i	4, Column b)	\$		
SCHEDUL	E D: NOTES AND LOANS	PAYABLE (Loaned to Yo	u)				
				Loans Given to o			
	Alabat (C. 10.7.1		001111111		porting Period	1	
	Alphabetical Order!		COLUMN A1	COLUMN B	COLUMN B1	COLUMN C1	
Date	Name, Address & Emplo	war of Landor	Loan Balance	Add New Loan	Subtract Loan	Current Balance	
Date	Name, Address & Emplo	yer of Lender	Last Report	\$ Received	\$ Repaid	Owed by You	
	! New Loans Payable this peri			\$			
	Repayment of Loans Payablet The Balance of Outstanding Lo				\$		
SCHEDULI	E E: NOTES AND LOANS I	RECEIVABLE (Loaned by	/ You)	Loans Given by c			
	Alphabetical Orderl		COLUMN A1	COLUMN B	COLUMN B1	COLUMN C1	
Date	Name, Address & Emplo	yer of Recipient of Loan	Loan Balance Last Report	Add New Loan \$ Given	Subtract Loan \$ Repaid	Current Balance Owed to You	
<u></u>							
43. Total N	New Loans Receivable this p	eriod: (Transfer this amo	unt to Line 32)	\$			
44. Total F	Repayment of Loans Receive	able this period: (Transfer	this amount to Lir	ne 23)	\$,	
45. Current Balance of Outstanding Loans Receivable: (Transfer this amount				ne 15)	\$		
SCHEDULE	E F: UNPAID BILLS/ADVAI	NCE OF CREDIT (Items o	r services receive	d but not paid)		<u></u>	
	Alphabetical Order!					Current Balance	
Date	·	dor of Goods or Services R	Received But Not Pa	id For		Owed by You	
	*					2	
16. Curren	 t Balance of Outstanding Ur	\$					
(Make INDEP I, (Print and rep or at th	The Treasurer is to sign this statement ONLY IF INDEPENDENT EXPENDITURES WERE MADE. Make notations on Schedules B or C where Independent Expenditures are itemized.) NDEPENDENT EXPENDITURE: SWORN STATEMENT (Print Name), hereby certify that all independent expenditures made on behalf of other candid not reported in this report were made WITHOUT the authorization or expressed or implied consent of, or in cooperation or in concert wire at the request or suggestion of any candidate, candidate's campaign committee or agent.						
<u>Signatı</u>	ure of Treasurer			Dat	e		