

Rec'd  
10-30-23

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

Type of report: ✓ Candidate report: \_\_\_\_\_ Period of time covered by report: \_\_\_\_\_  
 \_\_\_\_\_ Campaign committee report \_\_\_\_\_  
 \_\_\_\_\_ Association or corporation report \_\_\_\_\_ from 10/10/23 to 10/27/23  
 \_\_\_\_\_ Final report \_\_\_\_\_

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	\$	<u>1,250.00</u>	TOTAL CASH-ON-HAND	\$	_____
IN-KIND:	+	\$	_____		
TOTAL AMOUNT RECEIVED	=	\$	<u>1,250.00</u>		

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
10/2023	Handout pieces + postage	2,933.62
10/2023	Website maintenance 4 months	116.00
	TOTAL	3,049.62

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.

<i>Date</i>	<i>Purpose</i>	<i>Name and Address of Recipient</i>	<i>Expenditure or Contribution Amount</i>
		<b>TOTAL</b>	

Signature: Debra Wells Kinnaman Date: 10/27/23

Printed Name LISA Dolly Korman Telephone 952 881 1825 Email (if available) kormanford@rrschools.org  
Address 9240 Upton Ave. S. Bloomington, MN 55431

posted  
10/2023

**For Office Use Only:**

Contributions 100 + Korman

Report 3

Name	Address	Amount
SEIU Local 284	450 Southview Blvd. S Saint Paul, MN 55075	600.00
MRLF	312 Central Ave., Suite 542, Minneapolis, MN 55414	600.00

Korman

pr

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Nelly Korman for Bloomington School Board  
Office sought or ballot question School Board District

Type of report	<u>✓</u>	Candidate report
		Campaign committee report
		Association or corporation report
		Final report

Period of time covered by report:

from 08/23 to 10/10/23

## 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	\$	<u>2,263.97</u>	TOTAL CASH-ON-HAND	\$	<u>2,263.97</u>
IN-KIND	+	\$			
TOTAL AMOUNT RECEIVED	=	\$	<u>2,263.97</u>		

## 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
10-04-23	Korman cards printing + lacrosse signs with stands	1,290.53
10-23	Online contribution fees	28.32
	TOTAL	1,318.85

## 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**

<i>Date</i>	<i>Purpose</i>	<i>Name and Address of Recipient</i>	<i>Expenditure or Contribution Amount</i>
		<b>TOTAL</b>	

I certify that this is a full and true statement. Arthur Kelly Korman 10-11-23  
Signature Date

Printed Name AIRA Nelly Korman Telephone 952-8811885 Email (if available) Kormanfgroup  
Schools@gmail.com  
 Address 9240 Upton Ave. S Bloomington, MN 55431

Contributions: 100+ Korman (08/23 to 10/23)

Name	Address	Amount
Jane Freeman and Jeffrey Leppink	5601 W 104th Street Bloomington, MN. 55437	100.00
Women Winning State Pac	2233 University Avenue W Ste 310 Saint Paul, MN. 55114	100.00
Bloomington Federation of Paraprofessionals		600.00
Bloomington Federation of Teachers	1350 West 106th St. Bloomington MN 55431	600.00
Steve Elkins	8709 Sandro Road Bloomington Mn. 55438	

Korman

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Nelly Korman for Bloomington School Board

Office sought or ballot question School Board District ESD 271

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

Period of time covered by report:

from 07/13 to 08/23

## 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 \$ 1,230.00 TOTAL CASH-ON-HAND \$ 1,230.00  
 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
08/01/23	Reimbursement to Heather Starks Campaign for Kick Off event	128.00
08/11/23	Impact printing lit.	411.50
08/28/23	Data list	100.00
	TOTAL	639.50

## 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,

Alba Nelly Korman 08/31/23  
 Signature Date

Printed Name Alba Nelly Korman Telephone 957-8811885 Email (if available) net @ gmail.com

Address 9240 Upton Ave. S. Bloomington, MN 55431

Report

Office

Name

For Office Use Only:

Rec'd

10-30-23

Contributions 100+ Korman

Report 2

Correction

Name	Address	Amount
Jane Freeman and Jeffrey Leppink	5601 W 104th Street Bloomington, MN. 55437	100.00
Women Winning State Pac	2233 University Avenue W Ste 310 Saint Paul, MN. 55114	100.00
Bloomington Federation of Paraprofessionals		600.00
Bloomington Federation of Teachers	1350 West 106th St. Bloomington MN 55431	600.00
Steve and Judy Elkins	8709 Sandro Road Bloomington Mn. 55438	100.00

Korman  
P✓

Rec'd 12-13-23  
gAzel

## CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Nelly Korman for Bloomington School Board

Office sought or ballot question School Board District ISD 271

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

Period of time covered by report:

from 10/27/23 to 11/07/23

### 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 \$ 661.63 TOTAL CASH-ON-HAND \$ 661.63  
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
11/2023	Printing Korman Pieces/Flyers	231.9
11/2023	Korman-Alson-Starks Joint Flyers	108.88
11/2023	Card postage	399.34
11/07/23	TOTAL	740.12

### 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.

Nelly Korman  
Signature

12/12/2023  
Date

Printed Name AIDA NELLY KORMAN Telephone 952-8811885 Email (if available) Kormanforourschools@gmail.com

Address 9240 Upham Ave. S. Bloomington, MN. 55431

Report

Office

Name

For Office Use Only:

Contribuciones Nelly Korman 100+

Name	Address	Amount
Mark and Nelly Korman	9140 Upton Avenue South Bloomington Mn 55431	661.63



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: Nelly Korman For Bloomington School Board.  
Office sought by candidate (if applicable): School Board.  
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: Alba Nelly Korman  
Date: 12/12/23

P ✓

Rec'd  
1-31-24  
G. Ward

Name of candidate, committee or corporation Nelly Korman for Bloomington Schools.

Period of time covered by report:  
from 11-07-23 to 01-31-24.

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.

## Report

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

Office

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.

Name \_\_\_\_\_

Printed Name Nelly Korman Telephone 952 8811885 Email (if available) kormanfourschools@gmail.com  
Address 9740 Upton Ave. S. Bloomington, MN 55431

**For Office Use Only:**

Posted  
10/2023 ✓  
complete

**Ric Oliva Campaign Contributions over \$100.00  
7/29/2023 - 10/23/2023 & Cumulative Totals**

Date Rcvd.	Contributor Name	Contributor Address	Contributor's Employer**	7/29-10/23/2023		Prior Report(s)	
				\$ Received	\$	\$ Received	Cumulative
8/10/2023	Nikki Kinne	10833 Harrison Ave S Bloomington MN 55437	Self-Employed	\$ 500.00	\$	\$ -	\$ 500.00
7/25/2023	Jeff Reardon	11101 Xerxes Avenue S Bloomington, MN 55431	Retired	-	\$	\$ 150.00	\$ 150.00
7/28/2023	Ric Oliva			-	\$	\$ 505.00	\$ 535.00
7/29/2023	Ric Oliva	10725 Bush Lake Road Cir, Bloomington MN 55438	Emergent Software	30.00	\$		
8/6/2023	Gordette Oliva	212 Spring Valley Dr, Bloomington MN 55420	Retired	500.00	\$		\$ 500.00
8/6/2023	Tony Oliva	212 Spring Valley Dr, Bloomington MN 55420	MN Twins	500.00	\$		\$ 500.00
8/7/2023	Ken & Irene Olson	174 Spring Valley Dr, Bloomington MN 55420	Retired	250.00	\$		\$ 250.00
8/7/2023	Sally Waldor	2833 Overlook Cir, Bloomington MN 55431	Self-Employed (equipment sales)	200.00	\$		\$ 200.00
7/28/2023	Dan Murphy	219 Spring Valley Drive, Bloomington MN 55420	Self (sales/training)	-	\$	\$ 100.00	\$ 350.00
8/8/2023	Dan Murphy			250.00	\$		
8/8/2023	Joe Sorenson	11032 Aquila Bluffs Dr, Bloomington MN 55438	Self-Employed (Realtor)	200.00	\$		\$ 200.00
8/8/2023	Ted Lockhart	5342 Paola Cir, Bloomington MN 55437	Self-Employed (Consultant)	250.00	\$		\$ 250.00
8/11/2023	Mike Lehmann	7666 W 100th St, Bloomington MN 55438	Retired	200.00	\$		\$ 200.00
8/14/2023	Al Fischer	3220 Valley Ridge Dr, Eagan MN 55121	Retired	200.00	\$		\$ 200.00
8/17/2023	Michael Barg	8432 Irwin Road Bloomington, MN 55437	Retired	100.00	\$		\$ 300.00
9/27/2023	Michael Barg			200.00	\$		
9/27/2023	Dave Matton	20 102nd St W, Bloomington 55420	Self-Employed (Machinist)	150.00	\$		\$ 150.00
9/27/2023	Erica McMullen	10952 Glen Wilding Pl, Bloomington MN 55431	Self-Employed (Roll-Off dumpsters)	350.00	\$		\$ 350.00
9/27/2023	Lewis Coffey	8296 Kingslee Rd, Bloomington MN 55438	Retired	300.00	\$		\$ 300.00
10/4/2023	Don Smith	11417 Louisiana Ave S, Bloomington MN 55438	Retired	500.00	\$		\$ 500.00
<b>TOTAL DONORS &gt;\$100</b>				<b>\$ 4,680.00</b>	<b>\$</b>	<b>755.00</b>	<b>\$ 5,435.00</b>

*Oliva*

**Disbursements**

Date	Purpose	Amount
7/31/2023 to 10/18/2023	Credit Card Processing Fees (online Donations)	\$ 50.77
8/25/2023	Campaign Filing Fee	\$ 2.00
8/11/23 & 9/30/23	Campaign Yard Signs	\$ 1,379.97
8/3/2023 - 10/18/2023	Postage & Printing - Campaign Flyers & Direct Mailings	\$ 6,608.49
10/18/2023	Newspaper Advertising	\$ 852.72
8/7/23 & 9/30/23	Office Supplies	\$ 38.68
8/6/2023	Volunteer Apparel	\$ 110.04
8/7/2023	Campaign Materials - Magnets	\$ 108.00
8/8/2023	Campaign Materials - Door Hangers	\$ 152.99
8/28/2023	Campaign Events	\$ 11.83
	<b>TOTAL Disbursements</b>	<b>\$ 9,315.49</b>

Oliver

Rec'd 8-10-23  
JHazel

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Ricardo Oliva Principal Campaign Committee

Office sought or ballot question Bloomington School Board District ISD 271

Type of report X Candidate report  
\_\_\_\_ Campaign committee report  
\_\_\_\_ Association or corporation report  
\_\_\_\_ Final report  
Period of time covered by report:  
from 7/16/2023 to 7/28/2023

## 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 \$ 1,625.00 TOTAL CASH-ON-HAND \$ 1,517.28  
IN-KIND + \$ \_\_\_\_\_  
TOTAL AMOUNT RECEIVED = \$ 1,625.00

## 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
7/16/2023	Website fees	\$48.00
7/18/2023	MN Secretary of State - Voter List	\$30.00
7/24/2023	Campaign Marketing Materials	\$10.21
7/24 - 7/28/2023	Credit Card Processing Fees (Online Donations)	\$19.51
	TOTAL	\$107.72

## 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

Printed Name Ricardo Oliva Telephone 952-250-3638 Email (if available) oliva.campaign@gmail.com

Address 10725 Bush Lake Road Cir Bloomington MN 55458

posted  
10/23

#1  
Report  
Office  
S Board  
Oliva, R  
Name  
For Office Use Only:

**Ric Oliva Campaign Contributions over \$100.00**  
**7/16/2023 - 7/28/2023**

<b>Date Rcvd.</b>	<b>Contributor Name</b>	<b>Contributor Address</b>	<b>Contributor's Employer</b>	<b>\$ Received</b>
7/25/2023	Jeff Reardon	11101 Xerxes Avenue S Bloomington, MN 55431	Retired	\$ 150.00
7/28/2023	Ric Oliva	10725 Bush Lake Road Cir, Bloomington MN 55438	Emergent Software	\$ 505.00

*Oliva*

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Ricardo Oliva Principal Campaign Committee

Office sought or ballot question Bloomington School Board District ISD 271

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

Period of time covered by report:

from 10/24/2023 to 12/5/2023

## 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 \$ 225.00 TOTAL CASH-ON-HAND \$ 00.00  
IN-KIND + \$ 68.65  
TOTAL AMOUNT RECEIVED = \$ 293.65

## 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
10/24/23 - 12/5/23	See Attached	\$869.44
	TOTAL	\$869.44

## 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 Ricardo Oliva

Date 12-6-23

Printed Name Ricardo Oliva Telephone 952-250-3638 Email (if available) oliva.campaign@gmail.com

Address 4909 W 93rd St Bloomington MN 55437

Report

Office

Name

For Office Use Only:



Disbursements (10/24/2023 - 12/5/2023)

Date	Purpose	Amount
10/31/2023 - 11/3/2023	Credit Care Processing Fees (online Donations)	\$ 0.92
11/1/2023 & 11/15/2023	Meta Advertising (Facebook)	\$ 625.00
10/30/2023	Postage & Printing - Campaign Flyers & Direct Mailings	\$ 66.00
10/29/2023	Office Supplies	\$ 42.29
11/5/2023	Volunteer Election Night Watch Party	\$ 135.23
	<b>TOTAL Disbursements</b>	<b>\$ 869.44</b>

**Ric Oliva Campaign Contributions over \$100.00**  
**10/24/2023 - 12/5/2023 & Cumulative Totals**

Date Rcvd.	Contributor Name	Contributor Address	Contributor's Employer**	10/24/2023 - 12/5/2023		Prior Report(s)	
				\$ Received	In Kind Donations	\$ Received	Cumulative
8/10/2023	Nikki Kinne	10833 Harrison Ave S Bloomington MN 55437	Self-Employed	\$ -	\$ -	\$ 500.00	\$ 500.00
7/25/2023	Jeff Reardon	11101 Xerxes Avenue S Bloomington, MN 55431	Retired	\$ -	\$ -	\$ 150.00	\$ 150.00
7/28/2023	Ric Oliva	10725 Bush Lake Road Cir, Bloomington MN 55438	Emergent Software	\$ -	\$ -	\$ 505.00	\$ 603.65
7/29/2023	Ric Oliva			\$ -	\$ -	\$ 30.00	\$ -
11/5/2023	Ric Oliva			\$ -	\$ 68.65	\$ -	\$ -
8/6/2023	Gordette Oliva	212 Spring Valley Dr, Bloomington MN 55420	Retired	\$ -	\$ -	\$ 500.00	\$ 500.00
8/6/2023	Tony Oliva	212 Spring Valley Dr, Bloomington MN 55420	MN Twins	\$ -	\$ -	\$ 500.00	\$ 500.00
8/7/2023	Ken & Irene Olson	174 Spring Valley Dr, Bloomington MN 55420	Retired	\$ -	\$ -	\$ 250.00	\$ 250.00
8/7/2023	Sally Waldor	2833 Overlook Cir, Bloomington MN 55431	Self-Employed (equipment sales)	\$ -	\$ -	\$ 200.00	\$ 200.00
7/28/2023	Dan Murphy	219 Spring Valley Drive, Bloomington MN 55420	Self (sales/training)	\$ -	\$ -	\$ 100.00	\$ 350.00
8/8/2023	Dan Murphy	11032 Aquila Bluffs Dr, Bloomington MN 55438	Self-Employed (Realtor)	\$ -	\$ -	\$ 200.00	\$ 200.00
8/8/2023	Joe Sorenson	5342 Paola Cir, Bloomington MN 55437	Self-Employed (Consultant)	\$ -	\$ -	\$ 250.00	\$ 250.00
8/11/2023	Mike Lehmann	7666 W 100th St, Bloomington MN 55438	Retired	\$ -	\$ -	\$ 200.00	\$ 200.00
8/14/2023	Al Fischer	3220 Valley Ridge Dr, Eagan MN 55121	Retired	\$ -	\$ -	\$ 200.00	\$ 200.00
8/17/2023	Michael Barg	8432 Irwin Road Bloomington, MN 55437	Retired	\$ -	\$ -	\$ 100.00	\$ 300.00
9/27/2023	Michael Barg	20 102nd St W, Bloomington 55420	Self-Employed (Machinist)	\$ -	\$ -	\$ 200.00	\$ 300.00
9/27/2023	Dave Matton			\$ -	\$ -	\$ 150.00	\$ -
10/24/2023	Dave Matton			\$ 150.00	\$ -	\$ -	\$ -
9/27/2023	Erica McMullen	10952 Glen Wilding Pl, Bloomington MN 55431	Self-Employed (Roll-Off dumpsters)	\$ -	\$ -	\$ 350.00	\$ 350.00
9/27/2023	Lewis Coffey	8296 Kingslee Rd, Bloomington MN 55438	Retired	\$ -	\$ -	\$ 300.00	\$ 300.00
10/4/2023	Don Smith	11417 Louisiana Ave S, Bloomington MN 55438	Retired	\$ -	\$ -	\$ 500.00	\$ 500.00
<b>TOTAL DONORS &gt;\$100</b>				<b>\$ 150.00</b>	<b>\$ 68.65</b>	<b>\$ 5,435.00</b>	<b>\$ 5,653.65</b>

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 Ricardo Oliva Principal Campaign Committee

Office sought by candidate (if applicable) Bloomington School Board, ISD 271

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

12-6-23

*Ricardo Oliva*

*P✓*

Rec'd 10-27-23  
gtagel

## CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation MIA FOR BLOOMINGTON SCHOOLS C/O MIA OLSON  
Office sought or ballot question \_\_\_\_\_ District BLOOMINGTON, MN  
15D 271  
Type of report ☒ Candidate report  
\_\_\_\_\_ Campaign committee report  
\_\_\_\_\_ Association or corporation report  
\_\_\_\_\_ Final report  
Period of time covered by report:  
from 9-27-23 to 10-26-23

### 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 \$ 1944.00 TOTAL CASH-ON-HAND \$ 31.59  
IN-KIND + \$ —  
TOTAL AMOUNT RECEIVED = \$ 1944.00

### 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
10/24/23	Do good Biz 3730 Dunlop St N Arden Hills Mail campaign fliers 8000 households	-\$2,731.91
10/24/23	IMPACT PRINTING LLC ST PAUL 9000 Fliers	-\$1,763.78
10/24/23	Point Of Sale Withdrawal SQUARESPACE INC. HTTPSSQUARESP NY	-\$23.00
10/22/23	COSTCO WHSE Food for volunteer door knocking efforts	-\$136.31
10/11/23	Direct Withdrawal ACTBLUEDONATE from 474.18 check 10-11-23	-\$9.15
10/05/23	Direct Withdrawal ACTBLUEDONATE 2629634261790 - 6175177600	-\$3.01
TOTAL		-\$4,667.16

### 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. Mia Olson 10/28  
Signature Date  
Printed Name Mia Lisa Olson Telephone 612-991-8153 Email (if available) \_\_\_\_\_  
Address 4523 Heritage Hills Circle Bloomington 55437

Posted  
10/20/23

Mia Olson contribution exceeding \$100 for the period ending 09/25/2023

Name	Address	City	State	Zip Code	Profession	Date	Amount	Type
Allison Gardner	830 Stoughton Ave	Chaska	MN	55318	Teacher ISD 271	07/01/23	\$100.00	AB cash
Allison Gardner	830 Stoughton Ave	Chaska	MN	55318	Teacher ISD 271	07/27/23	\$400.00	check
Mia Olson	4523 Heritage Hills Cir	Bloomington	MN	55437	Teacher	06/23/23	\$200.00	check
Bloomington Federation of Teachers	1350 W 106th St	Bloomington	MN	55437		09/21/23	\$600.00	check
Bloomington Federation of Paraprofessionals	<a href="https://bfp4399.mn.aft.org">https://bfp4399.mn.aft.org</a>					09/27/23	\$600.00	check
Minneapolis Reg Labor Federation 612-379-4206	312 Central Ave #542	Minneapolis	MN	55414	<a href="http://www.minneapolisunions.org">www.minneapolisunions.org</a>	10/05/23	\$600.00	check
SEIU School Service Employees Political Activity Fund	450 Southview BLVD	S. ST. Paul	MN	55075	<a href="http://www.seiu284.org">www.seiu284.org</a>	10/18/23	\$600.00	check

Mia  
OLSON

Olson

posted  
10/23

Mia Olson contribution exceeding \$100 for the period ending 09/25/2023

Name	Address	City	State	Zip Code	Profession	Date	Amount	Type
Allison Gardner	830 Stoughton Ave	Chaska	MN	55318	Teacher ISD 271	07/01/23	\$100.00	AB cash
Allison Gardner	830 Stoughton Ave	Chaska	MN	55318	Teacher ISD 271	07/27/23	\$400.00	check
Mia Olson	4523 Heritage Hills Cir	Bloomington	MN	55437	Teacher	06/23/23	\$200.00	check
Bloomington Federation of Teachers	1350 W 106th St	Bloomington	MN	55437		09/21/23	\$600.00	check
Bloomington Federation of Paraprofessionals	<a href="https://bfp4399.mn.aft.org">https://bfp4399.mn.aft.org</a>					09/27/23	\$600.00	check

Mia  
Olson

Olson

Rec'd  
9-6-23

## CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation MIA FOR BLOOMINGTON SCHOOLS C/O MIA OLSON

Office sought or ballot question \_\_\_\_\_ District BLOOMINGTON, IN

Type of report: ☒ Candidate report  
☐ Campaign committee report  
☐ Association or corporation report  
☐ Final report

Period of time covered by report:

from 8/19/23 to 9/1/23

### 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 \$ 650.00 TOTAL CASH-ON-HAND \$ 1425.81  
IN-KIND + \$ 0.00  
TOTAL AMOUNT RECEIVED = \$ 650.00

### 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
08/11/23	Point Of Sale Withdrawal IMPACT PRINTING LLC ST PAUL	-\$453.08
08/25/23	Point Of Sale Withdrawal SQUARESPACE INC. HTTP55QUARESP NY	-\$23.00
08/17/23	Point Of Sale Withdrawal USPS PO 266302042 9641 GARFIELD AVE S	-\$11.98
08/09/23	Direct Withdrawal ACTBLUEDONATE -Credit processing fee	-\$11.85
TOTAL		-\$499.91

### 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

Printed Name MIA OLSON

Telephone 612-991-8193

Email (if available) Mia for Bloomington Schools

Address 4523 HERITAGE HILLS CIR BLOOMINGTON, IN 47414

@ gmail - com

Report

Office

Name

For Office Use Only:

posted  
10/1/23



Mia Olson contribution exceeding \$100 for the period ending 08/06/2023

Name	Address	City	State	Zip Code	Profession	Date	Amount	Type
Allison Gardner	830 Stoughton Ave	Chaska	MN	55318	Teacher ISD 271	07/01/23	\$100.00	AB cash
Allison Gardner	830 Stoughton Ave	Chaska	MN	55318	Teacher ISD 271	07/27/23	\$400.00	check
Mia Olson	4523 Heritage Hills Cir	Bloomington	MN	55437	Teacher	06/23/23	\$200.00	check

Mia  
Olson

Olson

Rec'd  
8-10-23  
J Hazel

## CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation MIA FOR BLOOMINGTON SCHOOLS C/O MIA OLSON  
Office sought or ballot question SCHOOL BOARD MEMBERSHIP District BLOOMINGTON, MD  
15D 271  
Type of report X Candidate report Period of time covered by report:  
\_\_\_\_\_ Campaign committee report  
\_\_\_\_\_ Association or corporation report from 6/23/23 to 8/9/23  
\_\_\_\_\_ Final report

### 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 \$ 1435.00 TOTAL CASH-ON-HAND \$ 1275.67  
IN-KIND + \$ 0.00  
TOTAL AMOUNT RECEIVED = \$ 1435.00 BEGAN WITH \$73.78 (2019 CAMPAIGN)

### 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
08/09/23	Post Office Stamps and Thank you cards	-\$52.79
08/03/23	Direct Withdrawal ACTBLUE DONATE 2628531712616 - 6175177600	-\$5.10
08/02/23	Check #1013 - Heather Starks for schools- Reimbursement for joint kickoff	-\$128.00
07/25/23	Point Of Sale Withdrawal SQUARESPACE INC. HTTPSSQUARESP.NY	-\$23.00
07/11/23	Direct Withdrawal Vantiv eCommerce 00000000264016149215 -	-\$1.23
06/25/23	Point Of Sale Withdrawal SQUARESPACE INC. HTTPSSQUARESP.NY	-\$23.00
TOTAL		-\$238.12

### 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

Printed Name MIA OLSON

Telephone 612-991-8193

Email (if available) \_\_\_\_\_

Address 4523 HEATSE HILLS CIR BLOOMINGTON, MD 55437

For Office Use Only:

Name

Office

Report

Olson, M  
S Board  
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Po Sted  
10/27

Mia Olson contribution exceeding \$100 for the period ending 08/06/2023

Name	Address	City	State	Zip Code	Profession	Date	Amount	Type
Allison Gardner	830 Stoughton Ave	Chaska	MN	55318	Teacher ISD 271	07/01/23	\$100.00	AB cash
Allison Gardner	830 Stoughton Ave	Chaska	MN	55318	Teacher ISD 271	07/27/23	\$400.00	check
Mia Olson	4523 Heritage Hills Cir	Bloomington	MN	55437	Teacher	06/23/23	\$200.00	check

Mia  
Olson

Olson

**CAMPAIGN FINANCIAL REPORT**

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

Name of candidate, committee or corporation MIA FOR BLOOMINGTON SCHOOLS C/O MIA OLSON

Office sought or ballot question \_\_\_\_\_ District Bloomington, IL  
150 271

Type of report ✓ Candidate report  
 \_\_\_\_\_ Campaign committee report  
 \_\_\_\_\_ Association or corporation report  
 \_\_\_\_\_ Final report

Period of time covered by report:

from 10/26/23 to 11/27/23

### 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	\$	<u>410.00</u>	TOTAL CASH-ON-HAND	\$	<u>51.14</u>
IN-KIND	+	\$ <u>          </u>			
TOTAL AMOUNT RECEIVED	=	\$ <u>410.00</u>			

## DISBURSEMENTS

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

<i>Date</i>	<i>Purpose</i>	<i>Amount</i>
11/26/23	Point Of Sale Withdrawal SQUARESPACE INC. HTTPSSQUARESP NY	-\$23.00
11/11/23	Impact Printing flyers inv 57983	-\$108.88
11/10/23	Point Of Sale Withdrawal FACEBK *7HM52WB5H2 fb.me/ads CA US	-\$25.00
11/09/23	Withdrawal Vantiv eCommerce 0000000264016362917 -	-\$32.67
10/31/23	IMPACT PRINTING LLC ST PAUL 1000 Filers from October	-\$204.96
11/03/23	Direct Withdrawal ACTBLUEDONATE 2630150333120 - 6175177600	-\$15.49
	<b>TOTAL</b>	<b>-\$410.00</b>

## 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

<i>Date</i>	<i>Purpose</i>	<i>Name and Address of Recipient</i>	<i>Expenditure or Contribution Amount</i>
		<b>TOTAL</b>	

I certify that this is a full and true statement.

Signature \_\_\_\_\_

Date \_\_\_\_\_

Printed Name Mia Lisa OLSON Telephone 612-991-8193 Email (if available) \_\_\_\_\_

Address 4523 HERITAGE HILLS CIRCLE BLOOMINGTON, MN 55437

## Report

Office

Name \_\_\_\_\_

For Office Use Only:

Mia Olson contribution exceeding \$100 for the period ending 11/27/2023

Name	Address	City	State	Zip Code	Profession	Date	Amount	Type
Allison Gardner	830 Stoughton Ave	Chaska	MN	55318	Teacher ISD 271	07/01/23	\$100.00	AB cash
Allison Gardner	830 Stoughton Ave	Chaska	MN	55318	Teacher ISD 271	07/27/23	\$400.00	check
Mia Olson	4523 Heritage Hills Cir	Bloomington	MN	55437	Teacher	06/23/23	\$200.00	check
Bloomington Federation of Teachers	1350 W 106th St	Bloomington	MN	55437		09/21/23	\$600.00	check
Bloomington Federation of Paraprofessionals	<a href="https://bfp4399.mn.aft.org">https://bfp4399.mn.aft.org</a>					09/27/23	\$600.00	check
Minneapolis Reg Labor Federation 612-379-4206	312 Central Ave #542	Minneapolis	MN	55414	<a href="http://www.minneapolisunions.org">www.minneapolisunions.org</a>	10/05/23	\$600.00	check
SEIU School Service Employees Political Activity Fund	450 Southview BLVD	S. ST. Paul	MN	55075	<a href="http://www.seiu284.org">www.seiu284.org</a>	10/18/23	\$600.00	check

Olson  
11-28-23

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation MIA FOR BLOOMINGTON SCHOOLS c/o MIA OLSON

Office sought or ballot question \_\_\_\_\_ District BLOOMINGTON, MD  
ISO 271

Type of report \_\_\_\_\_ Candidate report  
 \_\_\_\_\_ Campaign committee report  
 \_\_\_\_\_ Association or corporation report  
 ✓ \_\_\_\_\_ Final report

Period of time covered by report:

from 11/27/23 to 01/14/2024

## 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	\$	<u>75.00</u>	TOTAL CASH-ON-HAND	\$	<u>54.56</u>
IN-KIND	+	\$ <u>—</u>			
TOTAL AMOUNT RECEIVED	=	\$ <u>75.00</u>			

## 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
01/09/24	Withdrawal Vantiv eCommerce 00000000264016460018 - Funds Disb 26502006479211	-\$0.50
12/29/23	Check #1020 Minnesota DFL-VAN	-\$100.00
12/11/23	Withdrawal Vantiv eCommerce 00000000264016414411 - Funds Disb 26501979730212	-\$1.68
	<b>TOTAL</b>	<b>-\$102.18</b>

## 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

<i>Date</i>	<i>Purpose</i>	<i>Name and Address of Recipient</i>	<i>Expenditure or Contribution Amount</i>
		<b>TOTAL</b>	

I certify that this is a full and true statement.

**Signature**

Date \_\_\_\_\_

Printed Name Mia Lisa Olson Telephone 612-991-8193 Email (if available) \_\_\_\_\_

Address 4523 HERITAGE HILLS CIR BLOOMINGTON, MN 55437

## Report

Office

**For Office Use Only:** Name \_\_\_\_\_

P 724  
complete

Mia Olson contribution exceeding \$100 for the period ending 01/14/2024

Name	Address	City	State	Zip Code	Profession	Date	Amount	Type
Allison Gardner	830 Stoughton Ave	Chaska	MN	55318	Teacher ISD 271	07/01/23	\$100.00	AB cash
Allison Gardner	830 Stoughton Ave	Chaska	MN	55318	Teacher ISD 271	07/27/23	\$400.00	check
Mia Olson	4523 Heritage Hills Cir	Bloomington	MN	55437	Teacher	06/23/23	\$200.00	check
Mia Olson	4523 Heritage Hills Cir	Bloomington	MN	55437	Teacher	12/26/23	\$75.00	deposit
Bloomington Federation of Teachers	1350 W 106th St	Bloomington	MN	55437		09/21/23	\$600.00	check
Bloomington Federation of Paraprofessionals	<a href="https://bfpa4399.mn.aft.org">https://bfpa4399.mn.aft.org</a>							
Minneapolis Reg Labor Federation 612-379-4206						09/27/23	\$600.00	check
SEIU School Service Employees Political Activity Fund	312 Central Ave #542	Minneapolis	MN	55414	<a href="http://www.minneapolisunions.org">www.minneapolisunions.org</a>	10/05/23	\$600.00	check
	450 Southview BLVD	S. St. Paul	MN	55075	<a href="http://www.seiu284.org">www.seiu284.org</a>	10/18/23	\$600.00	check

M Olson

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 Mia for Bloomington Schools / Mia Olson  
Office sought by candidate (if applicable) Bloomington Public School Board  
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 Mia Olson  
Date 1/30/24

Rec'd  
1-30-24

Posted  
1-24



*For Office Use Only:*

DATE OF DONATION	DATE OF DEPOSIT	AMOUNT	TYPE	FIRST NAME	LAST NAME	ADDRESS	CITY	STATE	ZIP	OCCUPATION
9/14/2023	9/14/2023	\$150.00	Paypal	Matt	Dymoke	8538 13th Ave S	Bloomington	Minnesota	55425	Director of Development, PROP
9/23/2023	10/16/2023	\$300.00	Paypal	Harold	Price	4864 138th St W	Apple Valley	Minnesota	55124	Project Managment, Securian
10/16/2023	10/18/2023	\$200.00	Check	Dennis	Whallon	9940 Oakland Ave S	Bloomington	Minnesota	55420	Retired

Starks

DATE	AMOUNT	REASON
8/25/2023	\$129.00	Kickoff Event
9/4/2023	\$100.00	VAN Payment
9/6/2023	\$39.60	Stamps
9/13/2023	\$236.56	Allegra - buttons & stickers
9/14/2023	\$291.80	STB Printing - t-shirts & sweatshirts
9/14/2023	\$614.59	Do Good Biz Inc (mailing house - 1418 pieces)
9/14/2023	\$1,370.01	Impact Printing (50 small signs - \$431.50, 2000 mailers - \$345.20, 4000 walking lit - \$593.31)
9/27/2023	\$365.85	Do Good Biz Inc (mailing house - 576 pieces)
10/19/2023	\$26.40	Stamps
10/24/2023	\$1,130.69	Do Good Biz Inc (mailing house - 3000 pieces)
	\$91.02	Transaction Fees (Paypal + Act Blue)
<b>TOTAL</b>	<b>\$4,395.52</b>	

Star Kc

Rec'd 8.9.23  
Hazel

from 7/21/23 to 8/9/23

Printed Name Heather Starks Telephone (952) 884-7582 Email (if available) heather@starksfor  
Address 16309 Blaisdell Circle, Bloomington, MN 55420 schools.  
com

For Office Use Only: Name Starks Office S. Board Report #1

DATE OF DONATION	DATE OF DEPOSIT	AMOUNT	TYPE	FIRST NAME	LAST NAME	ADDRESS	CITY	STATE	ZIP	OCCUPATION
7/27/2023	8/1/2023	\$300.00	Check #1925	Marie	Holm	10650 Beard Ave S, Apt 424	Bloomington	MN	55431	retired

8/9/23  
Starks

Rec'd  
1-7-2024  
JH

Name of candidate, committee or corporation Starks for Schools

Office sought or ballot question School Board District SD #271

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

from 10/27/23 to 12/6/23

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	\$	<u>Ø</u>	TOTAL CASH-ON-HAND	\$	<u>58.65</u>
IN-KIND	+	\$ <u>Ø</u>			
TOTAL AMOUNT RECEIVED	=	\$ <u>Ø</u>			

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
	see attached	
	TOTAL	

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

<i>Date</i>	<i>Purpose</i>	<i>Name and Address of Recipient</i>	<i>Expenditure or Contribution Amount</i>
		<b>TOTAL</b>	

I certify that this is a full and true statement. Heather Stahn 12/19/23  
Signature Date

Printed Name Heather Starks Telephone (952) 884 7582 Email (if available) heather@starksforschools.com  
Address 10509 Blaisdell Circle, Bloomington, MN 55420

**For Office Use Only:**

DATE	AMOUNT	REASON
11/1/2023	\$20.00	Facebook Ads
11/3/2023	\$377.28	Impact Printing (3000 mailers)
11/3/2023	\$2.00	Bank Service Charge
12/1/2023	\$34.88	Facebook Ads
<b>TOTAL</b>	<b>\$434.16</b>	

Sfarks

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# CAMPAIGN FINANCIAL REPORT

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

Final  
Report  
Rec'd  
2-27-24

Name of candidate, committee or corporation Starks for Schools  
Office sought or ballot question School Board District ISD #271

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

Period of time covered by report:

from 12/1/23 to 1/31/24

## 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 \$ 0 TOTAL CASH-ON-HAND \$ 5865  
IN-KIND + \$ 0  
TOTAL AMOUNT RECEIVED = \$ 0

## 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
	None	
	TOTAL	

## 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. Heather Starks 2/26/24  
Signature Date

Printed Name Heather Starks Telephone 952-884-7582 Email (if available) heather@starksforschools.com  
Address 10309 Blaisdell Circle, Bloomington, MN 55420

complete

P 2/24

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 Starks for Schools

Office sought by candidate (if applicable) School Board

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 Heather Jen

Date 2/26/24

PV  
124

Rec'd 11-10-23  
Hazel

## CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Langalafa Oriho

Office sought or ballot question School Board District 271

Type of report  
\_\_\_\_ Candidate report  
\_\_\_\_ Campaign committee report  
\_\_\_\_ Association or corporation report  
☒ Final report

Period of time covered by report:

from June to Nov

### 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 \$ 500 TOTAL CASH-ON-HAND \$ 800  
IN-KIND + \$ 2,780  
TOTAL AMOUNT RECEIVED = \$ 4,080

### 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
09/29/2023	Signs, Business Card, Door Hanger	1,765.42
09/25/2023	Signs	1,723.09
09/27/2023	T-shirt printing	1,200
	TOTAL	4,688.51

### 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

Printed Name Langalafa Oriho Telephone 952-457-8067 Email (if available) langalafa@gmail.com

Address \_\_\_\_\_

Report

Office

Name

For Office Use Only:

## Langa Oriho Campain Fundraising

Name	Address		Amount
Carol Ann Kerr	7755 Shaughnessy RD Edina, MN 55439		25
Chad L HERRON Jennifer K HERRON	10333 YUKON Ave S Bloomington, MN 55438		25
Audrey B Ohlgren	10372 Columbus CIR Bloomington, MN 55420		30
Robert T Buahard	395 Cleveland Ave N Saint Paul, 55104		50
Charles L Johnson Revocable trust	9632 Wyoming Ter S Bloomington, MN 55438		50
Paul Fredrick King	10154 Boone Cir Bloomington, MN 55438		50
Larry Forst Esq	8035 W 86th St Circle Bloomington, MN 55438		100
Donnell J Johnson	10557 Decator Ave South Bloomington, MN 55438		100
Sandra L Coffey Lewis R Coffey	8296 Kingslee RD Bloomington, MN 55438		100
Robin N Kelleher	800 BLUEBILL Bay RD Burnsville,MN 55306		100
Kathleen D Kranz	10639 Kell Ave S Bloomington MN 55437		100

Bryan J Schoenecker Allyson Schoenecker	5109 W 110th Street Bloomington, MN 55437		100
Reed A Swensen	17555 Bearp Trail Eden Prairie, MN 55347		100
Erica H McMullen PH 612-418-6829	10952 Glen Wilding PL Bloomington, MN 55431		300
Suzanne J Lehmann Michael E Lehmann	7666 W 100TH ST Bloomington, MN 55438		200
Hellen Lotara	ST.Clou 104th Street S APT 206 ST Cloud, MN 56301		50
Mark Ahlsten	2311 Jones Place Bloomington, MN 55431		100\$
William Herrmann	10680 Hampshire Ave S APT 118, Bloomington MN 55438		200\$
Michael LORI	8432 IRWIN ROAD Bloomington, MN 55437		100 \$
Linda Steen	9709 Utica CIR Minneapolis, MN 55437		25 \$
Faris Victor	549Redwood LN New Brighton,		200 \$
Len Erickson			25
Stacy C Bridel	10732 TOLEDO CT Bloomington, MN 55437		50
<b>Total</b>			<b>2,180</b>

<b>Online Contribution Total</b>			<b>700</b>
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Expense:

Alpha Graphics	1,765.42
Quiet Whispher	1,723.09
Krown Apparel	1,200

# INVOICE

Krown Apparel  
5725 25th ave so.  
Minneapolis, MN 55417

brad@krownapparel.com  
(612)644-5055  
krownapparel.com



LANGA ORIHO

Bill to  
LANGA ORIHO

Ship to  
LANGA ORIHO

## Invoice details

Invoice no.: 2304  
Terms: Due on receipt  
Invoice date: 09/29/2023  
Due date: 09/29/2023

#	Date	Product or service	SKU	Qty	Rate	Amount
1.		Screen Print PC55Y AND PC55 WITH 3 COLOR FRONT LOGO		120	\$10.00	\$1,200.00

Total **\$1,200.00**

Overdue 09/29/2023

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Sandra Johnson

Office sought or ballot question School Board District 271

Type of  
report

☒ Candidate report  
☐ Campaign committee report  
☐ Association or corporation report  
☐ Final report

Period of time covered by report:

from Aug 23 to Nov 23

## 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 = \$ 0

## 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
	TOTAL	

## 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.

Sandra Johnson  
Signature

Dec 1 2023  
Date

Printed Name Sandra Johnson Telephone 952-994-3450 Email (if available) \_\_\_\_\_

Address 10025 Yukon Ave S Bloomington 55438

P✓

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: Sandra Johnson  
Office sought by candidate (if applicable): School Board  
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: Sandra Johnson  
Date: 11/26/23

p✓





Minnesota Parents Alliance CFR ISD 271

12/7/2023

Contributions Exceeding \$100

Date	Amount	Donor	Address	Employer
	\$125.00	Ronald Eibensteiner	217 Coventry Court Minneapolis, MN 55435	self
	\$250.00	Freedom Club	13033 Ridgedale Dr. #113 Minnetonka, MN 55305	n/a
	\$125.00	Mike Hayden	6704 Parkwood Lane Edina, MN 55436	self
	\$125.00	Kevin Roche	6301 Westwood Ct. Minneapolis, MN 55436	retired

Received  
7/5/24 9:01

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Bloomington Federation of Teachers  
Office sought or ballot question School Board District 271

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

Period of time covered by report:  
from 9-22 to 12-23

## 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.

Date	Purpose	Amount
9-20-23	Campaign contribution - Mia Olsen	\$600.00
9-20-23	- Nelly Ekerman	\$600.00
9-30-23	printing costs to EDUN-mailings, fliers, etc.	\$3516.15
10-23-23	ad. in Sun Current	\$522.95
	TOTAL	\$5,251.51

## 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.

Kirsten Morcomb  
Signature

Date

Printed Name

Kirsten Morcomb

Telephone

952-356-5711

Email (if available)

Address

1350 W. 106th St., Bloomington MN 55431



Office of the Minnesota Secretary of State

Received  
7-15-24 ga

**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 Bloomington Federation of Teachers  
Office sought by candidate (If applicable) School Board Election  
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 Kristen Morwick  
Date