

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Ron Stoffel for New Hope City Council

Office sought or ballot question New Hope City Council District

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

Period of time covered by report:

from 10/24/2019 to 12/3/2020

CONTRIBUTIONS RECEIVED

Give the total for all contributions received during the period of time covered by this report. Contributions should be listed by type (money or in-kind) rather than contributor. See note on contribution limits on the back of this form. Use a separate sheet to itemize all contributions from a single source that exceeded \$100 during the calendar year. This itemization must include name, address, employer or occupation if self-employed, amount and date for these contributions.

CASH \$ _____ TOTAL CASH-ON-HAND \$ 14.40
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
10/30/2020	Bank Fees	10.
11/3/2020	Entertainment / Transportation	40.
11/19/2020	Loan Repayment - To Candidate	180.
11/30/2020	Bank Fees	10.
TOTAL		240.

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.

Ronald K. Stoffel
Signature

12/3/2020
Date

Printed Name Ron Stoffel Telephone 763-219-2596 Email (if available) _____

Address 804 55th Lane N, New Hope, MN 55428

Report

Office

Name

For Office Use Only: