

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Doug Gregor

Office sought or ballot question Mayor of Aurora District _____

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

Period of time covered by report:

from 8/2/19 to 11/1/19

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.

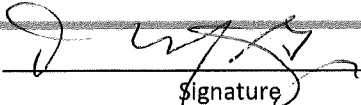
Date	Purpose	Amount
10/15/19	W.A. Fisher - campaign signs for lawns	375.81
8/2/19	City of Aurora - filing fee	2.00
10/31/19	East Range Shopper - campaign ads	178.51
10/5/19	Treats for Victory party	61.56
TOTAL		617.88

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.  11/2/19
 Signature Date

Printed Name Douglas Gregor Telephone 218-750-0714 Email (if available) gregordj@aurora.com

Address 731 Maple Drive, Aurora, MN 55705

Report Office Name For Office Use Only:

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Richard Hess

Office sought or ballot question Recreation Commission District _____

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

Period of time covered by report: from _____ to _____

CONTRIBUTIONS RECEIVED

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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
10-2-19	Yard Signs	187.02
11-7-19	Rtd. Est. Large Shopper	160.65
TOTAL		347.67

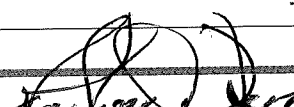
CORPORATE PROJECT EXPENDITURES

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

11-8-19
Date

Printed Name Richard Hess Telephone 749-0104 Email (if available) _____

Address 321 S 1st St East

Report

Office

Name

For Office Use Only:

CAMPAIGN FINANCIAL REPORT (Photocopy version)

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Talicia Honkola

Office sought or ballot question City Councilor District Aurora

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

Period of time covered by report:
 from 8/9/19 to _____

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 \$ 100 TOTAL CASH-ON-HAND \$ 0
 IN-KIND + \$ _____
 TOTAL AMOUNT RECEIVED = \$ 100

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
8-9-19	Filing Fee	2.00
8-13-19	Signs	293.91
9-10, 10-1, 10-15	Ad	166.60
9-17	Buttons	53.69
	TOTAL	516.20

CORPORATE PROJECT EXPENDITURES

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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. Talicia Honkola 11-6-2019
 Signature Date

Printed Name Talicia Honkola Telephone 218 229 2496 Email (if available) _____
 Address 130 Linda Dr.

Report Office Name For Office Use Only:

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Norma Jean Jofs

Office sought or ballot question Councilor District Aurora

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

Period of time covered by report:
 from _____ to _____

CONTRIBUTIONS RECEIVED

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CASH \$ 0 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
7-30-19	filing fee	2.00
9-18-19	Campaign signs	284.54
11-4-19	Campaign ads	130.95
11-11-19	thank you ad	20.83
TOTAL		444.32

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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. Norma Jean Jofs 11-8-19
 Signature Date

Printed Name Norma Jean Jofs Telephone 218-780-2860 Email (if available) _____
 Address 505 S. 3rd St. W. Aurora MN 55705

Report

Office

Name

For Office Use Only: