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).

Campa	ion In	formation
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Name of candidate or committee Committee to Continuing 1904 Demic Excellence
Office sought by candidate (if applicable)
Identification of ballot question (if applicable)
<u>Certification</u>
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 campaign contributions or disbursements did not exceed \$750 in the calendar year.
Signature of candidate or committee treasurer
Date 17 2021

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

Name of candidate,	committee or corporation by	TITLE FOR CONTINUING AZASE	MIC EXCELLENCE
		NO TECHNOLOGY LEVY District MI	
	- 0	REFERENDA	
Type of report	Candidate report Campaign comm		covered by report:
	Association or co	rporation report	to 12 31 7020
	Final report	from 11 to	10 13
	CONTR	RIBUTIONS RECEIVED	
Give the total for all o		eriod of time covered by this report. Contribu	itions should be listed by typ
		ontribution limits on the back of this form. Use	
	ingle source that exceeded \$100 dur mployed, amount and date for these	ing the calendar year. This itemization must incontributions.	ciude name, address, employ
CASH	5	TOTAL CASH-ON-HAND	\$ 3,736.39
	+ 1		
IN-KIND	\$		
TOTAL AMOUNT RE	CEIVED = \$		
England Britanis and Parkers			
		ISBURSEMENTS	
Include the amount		ements made during the period of time co	vered by report
Attach additional sh		ements made during the period of time co-	vered by report.
Date		Purpose	Amount
	MBEN = EIGHT \$7 N	MONTHLY BANK CHARGET	\$ \$6
[41/2]	TIPLE TIPLE	The first section of the section of	
		TOTAL	\$ SQ
e management and a second	WARNEST THE RESIDENCE OF THE PARTY OF THE PA	TOTAL	
	CORPORATE	E PROJECT EXPENDITURES	
Corporations must l		ate message project for which contribution	in(s) or expenditure(s) tot
•		project. Attach additional sheets if necessa	
Project title or descr	iption		
Date	Purpose	Name and Address	Expenditure or
		of Recipient	Contribution
			Amount
		TOTAL	
		TOTAL	
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Signature	Date 1 7 202		JGROTON @
Printed Name Jor		ephone Email (if avai	lable) CONCECT, NET
Address <u>104'Cl</u> 5	ILANYS LAVE, MINNE	10NHT INU 32377	

John Groton

Subject:

2020 Committee for Continuing Academic Excellence

