	(All of the information in this report is public information)	
Name of candid	ate, committee or corporation <u>LISA D'BCI C</u>	
Office sought or	ballot question <u>School board</u> Distric	TSD 273
Type of report	Campaign committee report	of time covered by report:
money or in-kind contributions fror	CONTRIBUTIONS RECEIVED  all contributions received during the period of time covered by this report. On the period of time covered by this report. On the period of time covered by this report. On the period of this form a single source that exceeded \$100 during the calendar year. This itemization relf-employed, amount and date for these contributions.	m. Use a separate sheet to itemiz
CASH	\$ TOTAL CASH-ON-HAN	D \$
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	<b>DISBURSEMENTS</b> Sount, date and purpose for all disbursements made during the period of tiel sheets if necessary.	me covered by report.
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Date	Purpose	Name and Address of Recipient	Expenditure or Contribution
			Amount
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I certify that this is a full and true statement. 1	you Ver			2017
	Signature	e	Date	
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Printed Name Lisa O Brick Telephone 628/2569 Email (if available) 405333 Bymand. Com Address 5333 Minulagha Block, Edina MN 554-28-

## **CAMPAIGN FINANCIAL REPORT**

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

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