CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Winona Education Association

Office sought or ballot question Referendum April 2023 District Winona Area Public Schools

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

Period of time covered by report: from 3/19 to 4/15

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*
4/15	Campaign Coordinator Stipend	500.00
4/15	Phonebank Coordinator Stipend	250.00
4/15	~~Cam~~ Assistant Campaign Coordinator Stipend	250.00
4/11	phone banking gift card prizes	70.00
	(see additional attached) **TOTAL**	2800.04

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. Elizabeth Hall

Signature

Printed Name Elizabeth Hall Telephone 507.450.5668 Date Email (if available) winonaeducationassociation@gmail.com

Address [redacted] Winona, MN 55987

Report

Office

Name

For Office Use Only:

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IN-KIND + $ _____

TOTAL AMOUNT RECEIVED = $ _____

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Date	*Purpose*	*Amount*
4/15	phone banking gift card prizes	40.00
3/19	in-kind contribution of mailer to Vote Yes WAPS	1648.52
3/19	print order for 2/9 event	33.02
3/21	parent contact list	8.50
	TOTAL	2800.04

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Printed Name Elizabeth Hall Telephone 507.450.5668 Email (if available) winonaeducationassociation@gmail.com

Date

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