

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Kevin Zabel  
Office sought or ballot question City Council District Oakdale  
Type of report  Candidate report Period of time covered by report:  
 Campaign committee report  
 Association or corporation report  
 Final report from 10/2 to 10/27

## 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	\$ <u>675 925</u>	TOTAL CASH-ON-HAND	\$ <u>177 =</u>
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
10/26	Facebook Ads	<u>250.00</u>
10/27	Google Adwords, incl youtube	<u>450.00</u>
	Squarespace	<u>48.00</u>
		<b>TOTAL</b> <u>748.00</u>

## 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
			<b>TOTAL</b>

I certify that this is a full and true statement.

*K. Zabel* 10/27/2020  
Signature Date  
Printed Name Kevin Zabel Telephone 612 221 1156 Email (if available) \_\_\_\_\_  
Address 6871 79th St. N. Oakdale, MN 55128

Report

Office

Name

For Office Use Only:

Donation Date	Amount	First Name	Last Name	Suffix	Address Line 1	Address Line 2	City	State	Zip	Employer	Occupation	Donor Type
10/15/2020	\$250.00	St. Paul	Area Chamber of Commerce	PAC	401 Robert St N,	Suite 150	St. Paul	MN	55101		PAC	
10/16/2020	\$250.00	Iolene	Nelson-Helm		West 97th Street		Bloomington	MN	55420	Consultant	Consultant	