

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Tim Zbaracki

Office sought or ballot question Buffalo - Hanover - Montrose School Board District _____

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

Period of time covered by report:
 from 06/01/22 to 08/12/22

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 \$ 1150 + 100 (self) TOTAL CASH-ON-HAND \$ 1040.50
 IN-KIND + \$ _____
 TOTAL AMOUNT RECEIVED = \$ 1250

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
<u>5/7/22</u>	<u>checks</u>	<u>\$15.00</u>
<u>6/15/22</u>	<u>Debit card</u>	<u>\$10.00</u>
<u>6/21/22</u>	<u>Business cards</u>	<u>\$74.62</u>
<u>See</u>	<u>attached</u>	<u>See attached</u>
TOTAL		

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. Tim Zbaracki 08/19/2022
 Signature Date

Printed Name Tim Zbaracki Telephone 763-334-1516 Email (if available) _____

Address 9815 Jordan ave NE Hanover, MN 55341

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 Tom Zbaracki

Office sought or ballot question Board School Board District 877

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

Period of time covered by report:

from 11/14/22 to 12/8/22

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>—</u>	TOTAL CASH-ON-HAND	\$ <u>415.20</u>
IN-KIND	+ \$ <u>—</u>		
TOTAL AMOUNT RECEIVED	= \$ <u>—</u>		

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
TOTAL		

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. Tom Zbaracki 12/14/22
 Signature Date

Printed Name Tom Zbaracki Telephone 762 334 1516 Email (if available) _____
 Address 3815 Jonda Ave NE Hamover MN 55341 tzbaracki3@gmail.com

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 Tim Zbaracki
 Office sought or ballot question Schod Board District 877

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

Period of time covered by report:
 from 12/8/22 to 1/31/23

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 \$ 0 TOTAL CASH-ON-HAND \$ 0
 IN-KIND + \$ 0
 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
<u>1/31/23</u>	<u>Reimbursement</u>	<u>\$200</u>
<u>1/31/23</u>	<u>Donation</u>	<u>\$21520</u>
	TOTAL	<u>41520</u>

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. Tim Zbaracki 1/31/23
 Signature Date

Printed Name Tim Zbaracki Telephone 763-334-1516 Email (if available) _____
 Address 9815 Jordan Ave NE Hanover, MN 55341

Report

Office

Name

For Office Use Only: