

JUL - 8 2024

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Joelle Alvard for Anoka Mayor

Office sought or ballot question Mayor District 35

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

Period of time covered by report:

from 6-28-24 to 7-8-24

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 \$ 5000.00 TOTAL CASH-ON-HAND \$ 2527.58
IN-KIND + \$ 0
TOTAL AMOUNT RECEIVED = \$ 5000.00

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
7/01/24	Campaign Design	378.45
7/03/24	FLYERS	70.28
7/02/24	SIGNS	1887.98
7/01/24	Website	29.00
7/07/24	T-shirts	106.79
TOTAL		2339.63

~~2339.63~~
2473.42

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. Joelle Alvard Signature Date 7/8/24

Printed Name Joelle Alvard Telephone 714-504-3776 Email (if available) joellealvard@gmail.com
Address 418 Rice St. Anoka, MN 55303

Report

Office

Name

For Office Use Only:

MINUTEMAN PRESS
848 EAST RIVER ROAD
ANOKA MN 55303
763-422-1059

Minuteman Press

WE DESIGN, PRINT & PROMOTE...YOU!

JUL - 8 2024 Minuteman Press - Anoka

Moving to:

848 East River Road
Anoka, MN 55303

Phone : 763-422-1059

Anoka Phone 763-421-3422:

www.weloveminuteman.com

hamlake@minutemanpress.com

Invoice Number 983103

Invoice Date 7/1/2024

07/01/2024 10:21

Sale

Trans: 1 Batch: 172
MASTERCARD CHIP
*****1947 **/**

AMOUNT: \$391.70
Resp: APPROVAL 368229
Code: 368229
Ref#: 418315335439
App Name: Mastercard Debit
AID: A0000000041010
TVR: 8000088000
TSI: 6800

r City of Anoka Mayor
303-2128

Ship to: Joelle Alvord for City of Anoka Mayor
Joelle Alvord
418 Rice Street
Anoka, MN 55303-2128

Phone: 714-504-3776
Email: joellealvord@gmail.com

Cardholder acknowledges receipt of goods and obligations set forth by the cardholder's agreement with issuer.

CUSTOMER COPY

Thank You

Powered By ValorPay (v1.2.90)

4-3776
ord@gmail.com



IS NOW



1 Logo Design - Basic Package (Job 77259) \$350.00

Invoice Subtotal:	\$350.00
MN:	\$24.06
ANOKA:	\$0.88
MN Housing:	\$0.88
MN Transp:	\$2.63
Invoice Total:	\$378.45
Balance Due:	\$378.45

+ 3.5%
cc fee

Salesperson: Katie
Terms: COD
Please pay from this Invoice. Interest Rate is 1.5%.
Thank you,





JUL -8 2024 Minuteman Press - Anoka
Moving to:
 848 East River Road
 Anoka, MN 55303
 Phone : 763-422-1059
 Anoka Phone 763-421-3422:
 www.weloveminuteman.com
 hamlake@minutemanpress.com

Invoice

Invoice Number 983119
 Invoice Date 7/3/2024

Bill to: Joelle Alvord for City of Anoka Mayor
 418 Rice Street
 Anoka, MN 55303-2128

 Phone: 714-504-3776
 Email: joellealvord@gmail.com

Ship to: Joelle Alvord for City of Anoka Mayor
 Joelle Alvord
 418 Rice Street
 Anoka, MN 55303-2128

 Phone: 714-504-3776
 Email: joellealvord@gmail.com

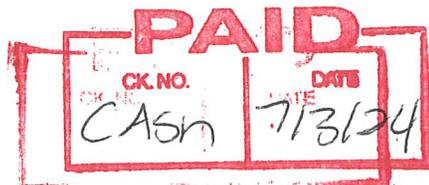


IS NOW



100 Joelle Alvord Sign Flyers (Job 77457) \$65.00

Invoice Subtotal:	\$65.00
MN:	\$4.47
ANOKA:	\$0.16
MN Housing:	\$0.16
MN Transp:	\$0.49
Invoice Total:	\$70.28
Balance Due:	\$70.28



Salesperson: Katie
 Terms: COD
 Please pay from this Invoice. Interest Rate is 1.5%.
 Thank you,





JUL - 8 2024 Minuteman Press - Anoka
Moving to:
848 East River Road
Anoka, MN 55303
Phone : 763-422-1059
Anoka Phone 763-421-3422:
www.weloveminuteman.com
hamlake@minutemanpress.com

Quotation

7/2/2024

Bill to: Joelle Alvord for City of Anoka Mayor
418 Rice Street
Anoka, MN 55303-2128

Phone: 714-504-3776
Email: joellealvord@gmail.com

Ship to: Joelle Alvord for City of Anoka Mayor
Joelle Alvord
418 Rice Street
Anoka, MN 55303-2128

Phone: 714-504-3776
Email: joellealvord@gmail.com

200 4 MM Corrugated Yard Signs - 24 x 18 2-sided full color (\$8.75 each)
(Job ID 77183)

Subtotal: \$1,750.00
Tax: \$137.98
Total: \$1,887.98

Component 1 of 1:

Miscellaneous

Yard Signs - 200 Pieces.

Salesperson: Katie

Taxes are included.

Please call for production times. Production times are an estimate only. Rush service may also be available for your product. To better serve you if you have a specific deadline required for your job, a date must be provided and agreed upon at the time your order is placed. Rush charges may apply.

AUG -1 2024

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Joelle Alvord for Mayor

Office sought or ballot question Mayor District 35

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

Period of time covered by report:

from 7/9/24 to 8/3/24

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 \$ ~~2350.00~~ TOTAL CASH-ON-HAND \$ ~~2350.00~~
 IN-KIND + \$ ~~850.00~~ 1169.79
 TOTAL AMOUNT RECEIVED = \$ 2350.00

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
7/12/24	MINUTE MAN PRESS	94.00
7/19/24	Minute man PRESS	3391.75
8/1/24	Website	29.00
TOTAL		3514.79

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. Joelle Alvord 8/1/24
 Signature Date

Printed Name Joelle Alvord Telephone 714-504-3716 Email (if available) joellealvord@gmail.com
 Address 418 RICE ST, ANOKA, MN 55303

Report

Office

For Office Use Only: Name

#31



Minuteman Press - Anoka
Moving to:
848 East River Road
Anoka, MN 55303
Phone : 763-422-1059
Anoka Phone 763-421-3422:
www.weloveminuteman.com
hamlake@minutemanpress.com

Invoice

Invoice Number 983159
Invoice Date 7/12/2024

Bill to: Joelle Alvord for City of Anoka Mayor
418 Rice Street
Anoka, MN 55303-2128

Phone: 714-504-3776
Email: joellealvord@gmail.com

Ship to: Joelle Alvord for City of Anoka Mayor
Joelle Alvord
418 Rice Street
Anoka, MN 55303-2128

Phone: 714-504-3776
Email: joellealvord@gmail.com



IS NOW



1 Graphic Design for Business Card (Job 77580)	\$45.00
500 Business Cards (Joelle Alvord) (Job 77498)	\$41.99

Invoice Subtotal:	\$86.99
MN:	\$5.98
ANOKA:	\$0.21
MN Housing:	\$0.21
MN Transp:	\$0.65
Invoice Total:	\$94.04
Balance Due:	\$94.04

PAID
CK. NO. 7/12/24
DATE CASR PAID



Salesperson: Katie
Terms: COD
Please pay from this Invoice. Interest Rate is 1.5%.
Thank you,





Minuteman Press - Anoka

Moving to:

848 East River Road

Anoka, MN 55303

Phone : 763-422-1059

Anoka Phone 763-421-3422:

www.weloveminuteman.com

hamlake@minutemanpress.com

Invoice Number 983198

Invoice Date 7/18/2024

Invoice

Bill to: Joelle Alvord for City of Anoka Mayor
418 Rice Street
Anoka, MN 55303-2128

Phone: 714-504-3776
Email: joellealvord@gmail.com

Ship to: Joelle Alvord for City of Anoka Mayor
Joelle Alvord
418 Rice Street
Anoka, MN 55303-2128

Phone: 714-504-3776
Email: joellealvord@gmail.com



IS
NOW



6 3'x6' Aluminum Composite Sign full color 2-sided (\$425 each) (Job 77432) \$2,550.00

12 12x18 Vehicle Magnet - rounded corners (\$49 each) (Job 77186) \$588.00

Invoice Subtotal:	\$3,138.00
MN:	\$214.70
ANOKA:	\$7.81
MN Housing:	\$7.81
MN Transp:	\$23.43
Invoice Total:	\$3,391.75
Balance Due:	\$3,391.75



Salesperson: Katie
Terms: COD
Please pay from this Invoice. Interest Rate is 1.5%.
Thank you,

Contributions

\$600⁰⁰ — Gloria Stone 31465 Azon Rd.

Cushing, MD 56443

\$150⁰⁰ SD 35 — Scott Selue 13874 Evergreen St NW
Treasurer Andover, MD

55304



Minuteman Press - Anoka
Moving to:
 848 East River Road
 Anoka, MN 55303
 Phone : 763-422-1059
 Anoka Phone 763-421-3422:
 www.weloveminuteman.com
 hamlake@minutemanpress.com

Invoice

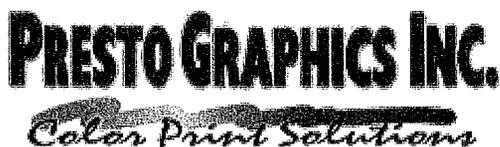
Invoice Number 983279
 Invoice Date 7/31/2024

Bill to: Joelle Alvord for City of Anoka Mayor
 418 Rice Street
 Anoka, MN 55303-2128

 Phone: 714-504-3776
 Email: joellealvord@gmail.com

Ship to: Joelle Alvord for City of Anoka Mayor
 Joelle Alvord
 418 Rice Street
 Anoka, MN 55303-2128

 Phone: 714-504-3776
 Email: joellealvord@gmail.com

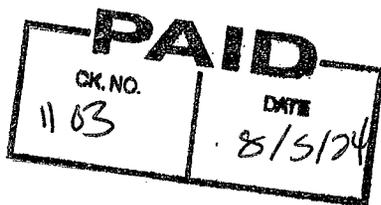


IS NOW

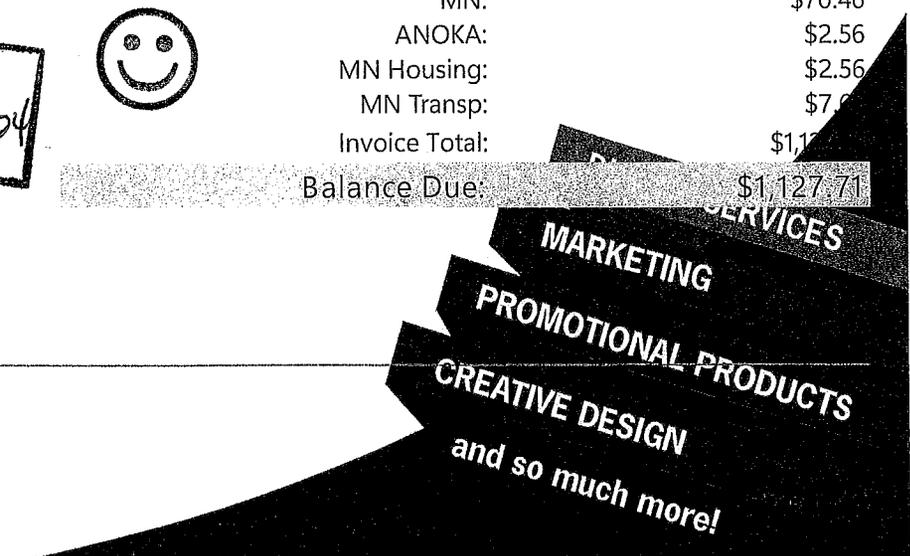


1 Graphic Design for Rack Card (Job 77702)	\$45.00
4,000 Joelle Alvord For Mayor Rack Card (Job 77705)	\$999.44
1,000 3.5 x 8.5 Door Hanger (Job 77189)	\$349.25
1 Invoice was Overbilled (Job 77859)	(\$349.25)

Invoice Subtotal:	\$1,044.44
MN:	\$70.46
ANOKA:	\$2.56
MN Housing:	\$2.56
MN Transp:	\$7.00
Invoice Total:	\$1,127.02
Balance Due:	\$1,127.71



Terms: COD



Invoice Adjustments

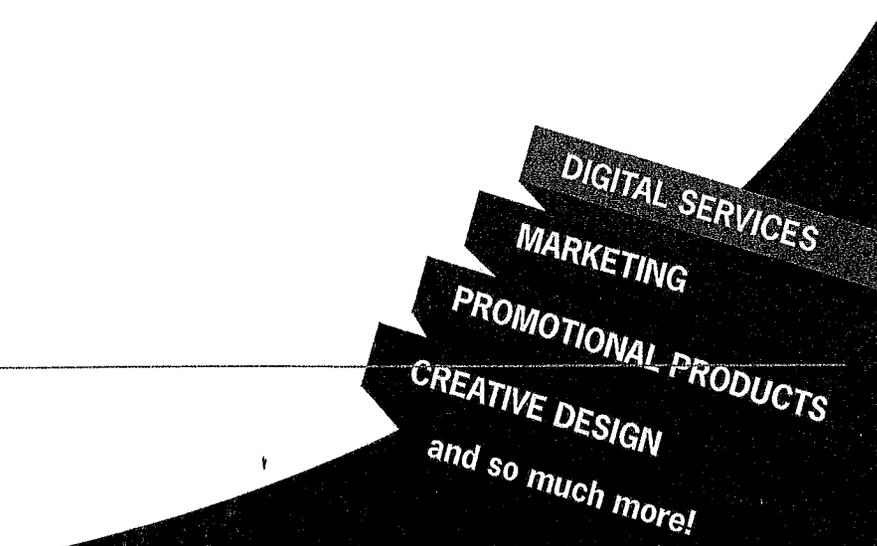
Date	Amount	Description	Original Subtotal	Original Taxes	Adjusted Subtotal	Adjusted Taxes
8/5/2024	(\$349.25)	Invoice was Overbilled - Door Hangers accidentally added to this order. Customer changed order to Rack card instead of door hanger.	\$1,393.69	\$111.12	\$1,044.44	\$83.27

Salesperson: Katie

Terms: COD

Please pay from this Invoice. Interest Rate is 1.5%.

Thank you,



DIGITAL SERVICES
MARKETING
PROMOTIONAL PRODUCTS
CREATIVE DESIGN
and so much more!

OCT - 9 2024

CAMPAIGN FINANCIAL REPORT

#4

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

Name of candidate, committee or corporation JOELLE ALVORD

Office sought or ballot question AUOKA MAYOR District _____

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

Period of time covered by report:
 from 8/20/24 to 10/7/2024

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 \$ 950 TOTAL CASH-ON-HAND \$ 950
 IN-KIND + \$ —
 TOTAL AMOUNT RECEIVED = \$ 950

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
9/24/24	MINUTE MAN PRESS SIGNS	\$ 2,411.50
	WEBSITE	\$ 29
	WEBSITE	\$ 29
	WEBSITE	\$ 29
	TOTAL	\$ 2,498.50

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. [Signature] 10/7/2024
 Signature Date

Printed Name DAVID ALAN JAROMBEK Telephone 612-413-1482 Email (if available) JAROMBEKMBAP@MPFL.CO
 Address 331 COULIGNE STREET AUOKA MN 55303

Report
Office
Name
For Office Use Only:



Minuteman Press - Anoka
Moving to:
 848 East River Road
 Anoka, MN 55303
 Phone : 763-422-1059
 Anoka Phone 763-421-3422:
 www.weloveminuteman.com
 hamlake@minutemanpress.com

Invoice

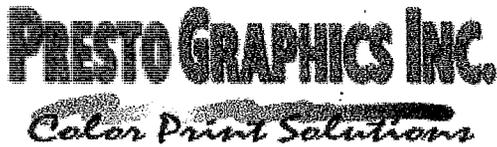
Invoice Number 983564
 Invoice Date 9/24/2024

Bill to: Joelle Alvord for City of Anoka Mayor
 418 Rice Street
 Anoka, MN 55303-2128

 Phone: 714-504-3776
 Email: joellealvord@gmail.com

Ship to: Joelle Alvord for City of Anoka Mayor
 Joelle Alvord
 418 Rice Street
 Anoka, MN 55303-2128

 Phone: 714-504-3776
 Email: joellealvord@gmail.com



IS NOW



100 4 MM Corrugated Yard Signs - 24 x 48 2-sided full color (\$22.30 each) (Job 78257) \$2,230.00



PAID
 CK. NO. 1102
 DATE 9/24/24

Invoice Subtotal: \$2,230.00
 MN 2024: \$153.31
 ANOKA 2024: \$5.58
 MN Housing 2024: \$5.58
 MN Transp 2024: \$16.73
 Invoice Total: \$2,411.20
 Balance Due: \$2,411.20

CASH 901.00 PAID CASH
~~200.90~~
~~1611.00~~
~~1511.00~~

11,510 due



Salesperson: Katie
 Terms: COD
 Please pay from this Invoice. Interest Rate is 1.5%.
 Thank you,

8/24/24

Primerica

Anoka, MN

250⁰⁰

9/19/24

LES, TN

Anoka, MN

500⁰⁰

MSC

—

200⁰⁰

CAMPAIGN FINANCIAL REPORT

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

OCT 24 2024

Name of candidate, committee or corporation Joelle Alvard
 Office sought or ballot question Anoka Mayor District 35

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

Period of time covered by report:
 from 10/8/2024 to 10/23/2024

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
10/20/2024	APGG7 - Joelle Alvard for Mayor	\$250.00
10/19/2024	APG - Halloween Square tab	\$770.00
10/18/2024	APG7 - Joelle Alvard for Mayor	\$250.00
TOTAL		\$1270.00

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. [Signature] 10/23/2024
 Signature Date
 Printed Name DAVID ALLEN JARAMBEK Telephone 612 413 1482 Email (if available) jarambekmba@gmail.com
 Address 331 Codrigo St Anoka MN 55303

Report Office Name For Office Use Only:



-Receipt-

Your ad
Not Actual Size

Date: 10/08/24
Account #: 515598
Company Name: JOELLE ALVORD FOR MAYOR
Contact: JOELLE ALVORD
Address: 418 RICE ST.
 ANOKA
Telephone: (714) 504-3776
Fax:

Ad ID: 1426339
Ad P.O. #:
Ad Description: APG7 Joelle Alvord for Mayor
Columns wide: 1
Total Depth: 1.0
Total Cost: \$250.00
Ad Class: 0
Account Rep: Cindy Brooking-Luedke
Phone # (763) 712-3526
Email: cindy.brooking@apgecm.com

Run Schedule

PUB	START DATE	STOP DATE	# OF INSERTS
ABCNewspapers.com	10/20/24	10/26/24	2

Payments

Method	Card Type	Name on Card	Last 4 Digits	Expire Date	Check Number	Amount Paid
CC	VISA		4377			\$250.00

Gross: \$250.00
Paid Amount: -\$250.00
Amount Due: \$0.00



-Receipt-

Your ad
Not Actual Size

Date: 10/08/24
Account #: 515598
Company Name: JOELLE ALVORD FOR MAYOR
Contact: JOELLE ALVORD
Address: 418 RICE ST.
 ANOKA
Telephone: (714) 504-3776
Fax:

Ad ID: 1426403
Ad P.O. #:
Ad Description: Halloween Square Tab
Columns wide: 6
Total Depth: 4.75
Total Cost: \$770.00
Ad Class: 0
Account Rep: Cindy Brooking-Luedke
Phone # (763) 712-3526
Email: cindy.brooking@apeccm.com

Run Schedule

PUB	START DATE	STOP DATE	# OF INSERTS
Anoka County Shopper	10/16/24	10/16/24	1
Online Advertising	10/16/24	10/16/24	1

Payments

Method	Card Type	Name on Card	Last 4 Digits	Expire Date	Check Number	Amount Paid
CC	VISA		4377			\$770.00

Gross: \$770.00
Paid Amount: -\$770.00
Amount Due: \$0.00



-Receipt-

Your ad
Not Actual Size

Date: 10/08/24
Account #: 515598
Company Name: JOELLE ALVORD FOR MAYOR
Contact: JOELLE ALVORD
Address: 418 RICE ST.
 ANOKA
Telephone: (714) 504-3776
Fax:

Ad ID: 1426341
Ad P.O. #:
Ad Description: APG7 Joelle Alvord for Mayor
Columns wide: 1
Total Depth: 1.0
Total Cost: \$250.00
Ad Class: 0
Account Rep: Cindy Brooking-Luedke
Phone # (763) 712-3526
Email: cindy.brooking@apeccm.com

Run Schedule

PUB	START DATE	STOP DATE	# OF INSERTS
ABCNewspapers.com	10/27/24	11/02/24	3

Payments

Method	Card Type	Name on Card	Last 4 Digits	Expire Date	Check Number	Amount Paid
CC	VISA		4377			\$250.00

Gross: \$250.00
Paid Amount: -\$250.00
Amount Due: \$0.00

CAMPAIGN FINANCIAL REPORT

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

OCT 24 2024

Name of candidate, committee or corporation Joelle Alvard

Office sought or ballot question Anoka Mayor District 35

Type of report

Candidate report

Campaign committee report

Association or corporation report

Final report

Period of time covered by report:

from 10/8/2024 to 10/23/2024

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
10/20/2024	APGG7 - Joelle Alvard for Mayor	\$250.00
10/19/2024	APG7 - Halloween Square tab	\$770.00
10/18/2024	APG7 - Joelle Alvard for Mayor	\$250.00
TOTAL		\$1270.00

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. [Signature] 10/23/2024
 Signature Date

Printed Name DAVID ALLEN JARAMBEK Telephone 612 413 1482 Email (if available) jarambekmba@gmail.com

Address 331 Coddige St Anoka MN 55303

Report

Office

Name

For Office Use Only:



-Receipt-

Your ad
Not Actual Size

Date: 10/08/24
Account #: 515598
Company Name: JOELLE ALVORD FOR MAYOR
Contact: JOELLE ALVORD
Address: 418 RICE ST.
 ANOKA
Telephone: (714) 504-3776
Fax:

Ad ID: 1426339
Ad P.O. #:
Ad Description: APG7 Joelle Alvord for Mayor
Columns wide: 1
Total Depth: 1.0
Total Cost: \$250.00
Ad Class: 0
Account Rep: Cindy Brooking-Luedke
Phone # (763) 712-3526
Email: cindy.brooking@apgecm.com

Run Schedule

PUB	START DATE	STOP DATE	# OF INSERTS
ABCNewspapers.com	10/20/24	10/26/24	2

Payments

Method	Card Type	Name on Card	Last 4 Digits	Expire Date	Check Number	Amount Paid
CC	VISA		4377			\$250.00

Gross: \$250.00
Paid Amount: -\$250.00
Amount Due: \$0.00



-Receipt-

Your ad
Not Actual Size

Date: 10/08/24
Account #: 515598
Company Name: JOELLE ALVORD FOR MAYOR
Contact: JOELLE ALVORD
Address: 418 RICE ST.
 ANOKA
Telephone: (714) 504-3776
Fax:

Ad ID: 1426403
Ad P.O. #:
Ad Description: Halloween Square Tab
Columns wide: 6
Total Depth: 4.75
Total Cost: \$770.00
Ad Class: 0
Account Rep: Cindy Brooking-Luedke
Phone # (763) 712-3526
Email: cindy.brooking@apeccm.com

Run Schedule

PUB	START DATE	STOP DATE	# OF INSERTS
Anoka County Shopper	10/16/24	10/16/24	1
Online Advertising	10/16/24	10/16/24	1

Payments

Method	Card Type	Name on Card	Last 4 Digits	Expire Date	Check Number	Amount Paid
CC	VISA		4377			\$770.00

Gross: \$770.00
Paid Amount: -\$770.00
Amount Due: \$0.00



-Receipt-

Your ad
Not Actual Size

Date: 10/08/24
Account #: 515598
Company Name: JOELLE ALVORD FOR MAYOR
Contact: JOELLE ALVORD
Address: 418 RICE ST.
 ANOKA
Telephone: (714) 504-3776
Fax:

Ad ID: 1426341
Ad P.O. #:
Ad Description: APG7 Joelle Alvord for Mayor
Columns wide: 1
Total Depth: 1.0
Total Cost: \$250.00
Ad Class: 0
Account Rep: Cindy Brooking-Luedke
Phone # (763) 712-3526
Email: cindy.brooking@apeccm.com

Run Schedule

PUB	START DATE	STOP DATE	# OF INSERTS
ABCNewspapers.com	10/27/24	11/02/24	3

Payments

Method	Card Type	Name on Card	Last 4 Digits	Expire Date	Check Number	Amount Paid
CC	VISA		4377			\$250.00

Gross: \$250.00
Paid Amount: -\$250.00
Amount Due: \$0.00

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Joelle Alford

Office sought or ballot question Mayor District 35

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

Period of time covered by report:
from 10/24/24 to 11/15/24

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 \$ 125⁰⁰ TOTAL CASH-ON-HAND \$ 125⁰⁰
IN-KIND + \$ _____
TOTAL AMOUNT RECEIVED = \$ 125⁰⁰ SD 35 - Coon Rapids, MN

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		<u>N/A</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
TOTAL			

I certify that this is a full and true statement.

[Signature] Date 11/18/24

Printed Name DAVID ALLEN JAROMEK Telephone 612-413-1487 Email (if available) JAROMEKMB@GMAIL.COM

Address 331 COOLIDGE ST. ANOKA MN 55303

Joelle Alford
418 Rice St
Anoka, MN
55303

Report
Office
Name
For Office Use Only: