

LEP LOUISI 2

REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees)	_
(a) Name of Individual, Organization or Corporation	
Duloth for Clean Water	
(b) Address (number and street) check if different than previously reported	
4220 Caske St.	
(c) City, State and ZIP Code	
Duluty 11.11 55804	3. FEC Identification Number
Occupation and Name of Employer (for Individual Filers Only)	C90017799
4. TYPE OF REPORT (check appropriate boxes):	
(a) April 15 Quarterly Report	
☐ July 15 Quarterly Report ☐ 24-Hour Report	•
October 15 Quarterly Report 48-Hour Report	
January 31 Year-End Report	?
	1018 F
b) Is this Report an amendment? No Yes, it amends the report filed on	
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5. COVERING PERIOD: FROM (27)	Sign VED VED
3. COVERING PERIOD. TROWN CO. 1. C.	AM 9:1
THROUGH 0 9 2018
	••••
6. TOTAL CONTRIBUTIONS.	2 6 2 0 0
Services Control of the Control of t	581=
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Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation	on, or concert with, or at the request or
suggestion of, any candidate or authorized committee or agent of either, or any political party committee or its agent.	in, or content with, or at the request of
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TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE
JT HAINES	10-12-18
NOTE: Submission of false armneous or incomplete information may subject the person signing this report to the	the penalties of 52 LLS C & 20109

ITEMI	ZED	RECE	IPTS

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OF

Any information copied from such Reports and Statements may not be sold or used by any part or for commercial purposes, other than using the name and address of any political committee	
NAME OF FILER (In Full) De loss for Clean Water	
A. Full Name (Last, First, Middle Initial)	Date of Receipt 0 8 0 2 2018 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. Name of Employer Occupation	200
B. Full Name (Last, First, Middle Initial) Mailing Address	Date of Receipt
FEC ID number of contributing federal political committee.	Amount of Each Receipt this Period
Name of Employer C. Full Name (Last, First, Middle Initial) Mailing Address City State Tip Code	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer C Occupatio	Amount of Each Receipt this Period
D. Full Name (Last, First, Middle Initial) Mailing Address City State Zip Code	Date of Receipt
FEC ID number of contributing federal political committee. Name of Employer Occupation	Amount of Each Receipt this Period
SUBTOTAL of Receipts This Page (optional)	·· ▶ 200 °2

TOTAL This Period (last page carry total to Line 6).....

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Full Name (Last, First, Middle Initial) of Payee				Date of Public Distribution/Dissemination
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Purpose of Expenditure		Category/	Offi	ce Sought: House State:
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				District:
Name of Federal Candidate Supported or Opposed by	Expendit	ure:		
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Purpose of Expenditure		Category/	Offi	ce Sought: House State:
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				District:
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a) SUBTOTAL of Itemized Independent Expenditures	••••••	***************************************		()
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b) SUBTOTAL of Unitemized Independent Expenditures	s		⊾	V 00
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c) TOTAL Independent Expenditures				Andrew 18 18 18 18 18 18 18 18 18 18 18 18 18
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Via E-Mail

Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.			
Hand Delivered	Date of Receipt		
Postmarked USPS First Class Mail	Date of Receipt		
USPS Registered/Certified	Postmarked (R/C)		
USPS Priority Mail	Postmarked		
USPS Priority Mail Express	Postmarked		
Postmark Illegible			
No Postmark			
Overnight Delivery Service (Specify):	Shipping Date		
Next Bus	iness Day Delivery		
Received from House Records & Registration Office	Date of Receipt		
Received from Senate Public Records Office	Date of Receipt		
Received from Electronic Filing Office Email	Date of Receipt		
Other (Specify):	of Receipt or Postmarked		
RJZ	10/22/18		
(3/2015)	DATE PREPARED		