CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation: Kim Bese

Office sought or ballot question: City Council

District: Ward 1

Type of report:

- [x] Candidate report
- [ ] Campaign committee report
- [ ] Association or corporation report
- [ ] Final report

Period of time covered by report:

From 9/1/16 to 9/30/16

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.

<table>
<thead>
<tr>
<th>Date</th>
<th>Purpose</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>8/30/16</td>
<td>Signs - Advertising</td>
<td>267.87</td>
</tr>
<tr>
<td>9/1/16</td>
<td>Shirts - Advertising</td>
<td>300.00</td>
</tr>
<tr>
<td>9/29/16</td>
<td>Signs - Advertising</td>
<td>792.72</td>
</tr>
<tr>
<td></td>
<td>TOTAL</td>
<td>1360.54</td>
</tr>
</tbody>
</table>

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

<table>
<thead>
<tr>
<th>Date</th>
<th>Purpose</th>
<th>Name and Address of Recipient</th>
<th>Expenditure or Contribution Amount</th>
</tr>
</thead>
</table>

TOTAL

I certify that this is a full and true statement.

Signature: [Signature] Date: 9/30/16

Printed Name: Kim Bese Telephone: 617 261-6399 Email (if available): [Email]

Address: 964 Aurora Circle Red Wing, MN 55066