

Office of the Minnesota Secretary of State

CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING

Instructions

Each county, municipal or school district candidate or treasurer of a committee formed to promote or defeat a ballot question shall certify to the filing officer that all reports required by *Minnesota Statutes 211A.02* have been submitted to the filing officer or that the candidate or committee has not received contributions or made disbursements exceeding \$750 in the calendar year. The certification shall be submitted to the filing officer not later than seven days after the general or special election. (*Minnesota Statutes 211A.05, subdivision 1*)

Campaign Information

Name of candidate or committee *Wade Athey*
Office sought by candidate (if applicable) *County Commissioner*
Identification of ballot question (if applicable)

Certification

Select the appropriate choice below, and sign.

- I do swear (or affirm) that all campaign financial reports required by Minnesota Statutes 211A.02 have been submitted to the filing officer.
- I do swear (or affirm) that all campaign contributions or disbursements did not exceed \$750 in the calendar year.

Signature of candidate or committee treasurer

Date *11/10/2020*

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Brent Olson

Office sought or ballot question County Commissioner District 3

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

Period of time covered by report:
 from 1-1-20 to 11-10-20

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
TOTAL		<u>0.</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			<u>0.</u>

I certify that this is a full and true statement. [Signature] 11-10-20
 Signature Date

Printed Name Brent Olson Telephone 303-273-2297 Email (if available) BoOlson@SdAri.
 Address 35396 690th Ave. Otisville, MA 56278

Report Office Name For Office Use Only:

Office of the Minnesota Secretary of State

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Campaign Information

Name of candidate or committee

Office sought by candidate (if applicable)

Identification of ballot question (if applicable)

Certification

Select the appropriate choice below, and sign.

I do swear (or affirm) that all campaign financial reports required by Minnesota Statutes 211A.02 have been submitted to the filing officer.

I do swear (or affirm) that all campaign contributions or disbursements did not exceed \$750 in the calendar year.

Signature of candidate or committee treasurer



Date

11-10-2020

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation JEFF KLAGES
 Office sought or ballot question BIG STONE COUNTY COMMISSIONER District 5

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

Period of time covered by report: from 7-1-2020 to 11-3-2020

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
6-21-2020	REGISTERED VOTER LISTS	\$ 95.00
7-12-2020	LAWN SIGNS	\$ 376.87
7-18-2020	POSTCARDS	\$ 46.64
7-14-2020	ADVERTISING	\$ 90.00
8-31-2020	ADVERTISING	\$ 90.00
8-31-2020	LAWN SIGNS	\$ 397.52
10-6-2020	ADVERTISING	\$ 90.00
TOTAL		\$ 1,186.03

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] 11-10-2020
 Signature Date

Printed Name JEFF KLAGES Telephone 520-273-2163 Email (if available) jeff.klages@fedteldirect.net
 Address 64090 410TH ST. ORTONVILLE, MN 56278

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Office of the Minnesota Secretary of State

CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING

Instructions

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Campaign Information

Name of candidate or committee *James A Nelson*

Office sought by candidate (if applicable) *Commissioner*

Identification of ballot question (if applicable)

Certification

Select the appropriate choice below, and sign.

I do swear (or affirm) that all campaign financial reports required by *Minnesota Statutes* 211A.02 have been submitted to the filing officer.

I do swear (or affirm) that all campaign contributions or disbursements did not exceed \$750 in the calendar year.

Signature of candidate or committee treasurer *James A. Nelson*

Date *11-9-2020*

CAMPAIGN FINANCIAL REPORT (Photocopy version)

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation James A Nelson

Office sought or ballot question Commissioner District 5

Type of report Candidate report, Campaign committee report, Association or corporation report, Final report. Period of time covered by report: from to

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 with columns: Date, Purpose, Amount. Rows include: 8-4-2020 Ad in paper - Independent 72.00, 8-19-2020 signs and cards - Ottumville Independent 446.55, 10-5-2020 filing fee 50.00, TOTAL 903.86

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 with columns: Date, Purpose, Name and Address of Recipient, Expenditure or Contribution Amount. Includes a TOTAL row.

I certify that this is a full and true statement. James A Nelson 11-9-2020 Signature Date

Printed Name James A. Nelson Telephone 320-839-3419 Email (if available)
Address 629 Stephens Av, Ottumville MN 52528

Report

Office

For Office Use Only: Name

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Campaign Information

Name of candidate or committee

Office sought by candidate (if applicable)

Identification of ballot question (if applicable)

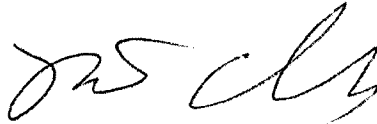
Certification

Select the appropriate choice below, and sign.

I do swear (or affirm) that all campaign financial reports required by Minnesota Statutes 211A.02 have been submitted to the filing officer.

I do swear (or affirm) that all campaign contributions or disbursements did not exceed \$750 in the calendar year.

Signature of candidate or committee treasurer



Date 11-10-20

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Campaign Information

Name of candidate or committee *Ronald Reisdorph*
Office sought by candidate (if applicable) *Soil & Water Supervisor*
Identification of ballot question (if applicable)

Certification

Select the appropriate choice below, and sign.

- I do swear (or affirm) that all campaign financial reports required by Minnesota Statutes 211A.02 have been submitted to the filing officer.
- I do swear (or affirm) that all campaign contributions or disbursements did not exceed \$750 in the calendar year.

Signature of candidate or committee treasurer *Ronald Reisdorph*
Date *11-19-2020*

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Ronald Bessdorff

Office sought or ballot question Soil & water Supervisor District 4

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

Period of time covered by report: from _____ to _____

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.

Date	Purpose	Amount
TOTAL		<u>0</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			<u>0</u>

I certify that this is a full and true statement. Ronald Bessdorff 11-19-2020
 Signature Date

Printed Name Ronald Bessdorff Telephone 839-3430 Email (if available) _____

Address 37588 7404th Ave Ortonville

Report

Office

Name

For Office Use Only: