

NOV 30 2020

Office of the Minnesota Secretary of State

**CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING**

**Instructions**

AUDITORS OFFICE

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 FRED BEHNKE

Office sought by candidate (if applicable) SWCD 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 to date by Minnesota Statutes 211A.02 have been submitted to the filing officer.

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

Signature of candidate or committee treasurer Fred Behnke

Date 11-21-20

RECEIVED

NOV 24 2020

Office of the Minnesota Secretary of State

# CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING

AUDITORS OFFICE

## 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 Robert J Schiefelbein

Office sought by candidate (if applicable) SWCD

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 to date by Minnesota Statutes 211A.02 have been submitted to the filing officer.

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

Signature of candidate or committee treasurer 

Date 11-8-2020

Office of the Minnesota Secretary of State

**CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING**

NOV 2 - 2020

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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 Julie Bredeson

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 to date by Minnesota Statutes 211A.02 have been submitted to the filing officer.

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

Signature of candidate or committee treasurer 

Date 11-2-2020

RECEIVED

NOV - 2 2020

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Julie Bredeson

AUDITORS OFFICE

Office sought or ballot question County Commissioner District #2

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

Period of time covered by report:

from Sept to Nov  
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 \$ 200.00 TOTAL CASH-ON-HAND \$ 0  
 IN-KIND + \$ 0  
 TOTAL AMOUNT RECEIVED = \$ 200.00

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
Sept.-NOV.	Independent Review	342.20
"	HLFD Radio	319.00
"	Viking Signs	192.38
"	Ramsey Printing	302.46
TOTAL		1,156.04

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
<del> </del>			
<del> </del>			
<del> </del>			
TOTAL			

I certify that this is a full and true statement. Julie Bredeson 11-2-2020  
 Signature Date

Printed Name Julie Bredeson Telephone 320-699-0190 Email (if available) bredfarm@gmail.com  
 Address 57894 290 St Grove City MN 56243

Report

e

For Office Use Only: Name

CAMPAIGN FINANCIAL REPORT

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

AUDITORS OFFICE

Name of candidate, committee or corporation Julie Bredeson

Office sought or ballot question County Commissioner District #2

Type of report: Candidate report (checked), Campaign committee report, Association or corporation report, Final report

Period of time covered by report: from May 19 to August 11, 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, IN-KIND \$ 0, TOTAL AMOUNT RECEIVED \$ 0, TOTAL CASH-ON-HAND \$ 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.

Table with 3 columns: Date, Purpose, Amount. Rows include: 5-19 Affidavit of Candidacy \$50.00, 7-14 Independent Review paper 99.66, 7-31 Ramsey Printing signs 89.90, 8-10 KLFD Radio commercials 45.00, TOTAL \$284.56

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 4 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. Julie Bredeson 8-11-2020

Printed Name Julie Bredeson Telephone 320-699-0190 Email (if available) bredfarm@gmail.com Address 57894 290th St. Grove City, MN. 56243

Report

Office

Name

For Office Use Only:

NOV - 9 2020

Office of the Minnesota Secretary of State

**CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING**

AUDITORS OFFICE

**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 Paul M Johnson

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 to date by Minnesota Statutes 211A.02 have been submitted to the filing officer.

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

Signature of candidate or committee treasurer Paul M Johnson  
Date 11/8/2020

NOV - 9 2020

CAMPAIGN FINANCIAL REPORT

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

AUDITORS OFFICE

Name of candidate, committee or corporation Paul M Johnson

Office sought or ballot question County Commissioner District 3<sup>rd</sup>

Type of report:  Candidate report;  Campaign committee report;  Association or corporation report;  Final report. Period of time covered by report: from 10/22 to 11/3

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.

Table with 3 columns: Date, Purpose, Amount. Row 1: 11-9-2020, Radio, 414.00. Row 2: (blank). Row 3: (blank). Row 4: (blank). Row 5: TOTAL, 414.00.

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 \_\_\_\_\_

Table with 4 columns: Date, Purpose, Name and Address of Recipient, Expenditure or Contribution Amount. Row 1: (blank). Row 2: (blank). Row 3: (blank). Row 4: TOTAL.

I certify that this is a full and true statement. \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
Printed Name: Paul M Johnson Telephone: 320-583-3003 Email (if available): pmj195@outlook.com  
Address: 21461 CSAH 9 Darwin MN 55324

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 Paul M Johnson

Office sought or ballot question County Commissioner District 3rd

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

Period of time covered by report: from 7/16/20 to 8/3/20

## 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
7/16/20	USPS - Postage	510.16
7/22/20	Hutchinson Bender - Advertising	168.22
8/3/20	USPS - Postage	93.40
<b>TOTAL</b>		<b>771.78</b>

## 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
<b>TOTAL</b>			

I certify that this is a full and true statement. Paul M Johnson Signature Date 8/10/20

Printed Name Paul M Johnson Telephone 320-583-3003 Email (if available) pmj195@outlook.com  
 Address 21461 CSAH 9 Darwin MN 55324

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 Paul M Johnson  
 Office sought or ballot question County Commissioner District 3rd

Type of report X Candidate report  
 \_\_\_\_\_ Campaign committee report  
 \_\_\_\_\_ Association or corporation report  
 \_\_\_\_\_ Final report

Period of time covered by report:  
 from 7/6/20 to 7/15/20

## 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.

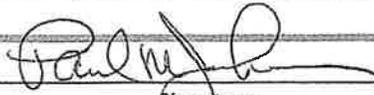
Date	Purpose	Amount
7/6/20	Hutchinson Leader - Advertising	122.13
7/8/20	Ramsey Printing - Yard Signs	265.91
7/15/20	Ramsey Printing - Mailed	643.39
<b>TOTAL</b>		<b>1,031.43</b>

## 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
<b>TOTAL</b>			

I certify that this is a full and true statement.  Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Printed Name Paul M Johnson Telephone 320-583-3003 Email (if available) p.m.j.1950@outlook.com  
 Address 21461 CSAH 9 Darwin MN 55324

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 Paul M Johnson  
 Office sought or ballot question County Commissioner District 3<sup>rd</sup>

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

Period of time covered by report:  
 from 6/9/20 to 6/30/20

## 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
6/9/20	Meeker County Auditor - Mailing list	25.00
6/15/20	Ramsey Printing - Yard signs + Vehicle signs	432.63
6/18/20	Secretary of State - Voter Reg List	35.00
6/19/20	Ramsey Printing - Handouts	118.63
Including Pg 2 TOTAL		867.76

## 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. Paul M Johnson  
 Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name Paul M Johnson Telephone 320-583-3003 Email (if available) pmj195@outlook.com  
 Address 2461 CSAH 9 Darwin MN 55324

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 Paul M Johnson

Office sought or ballot question \_\_\_\_\_ District \_\_\_\_\_

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
6/30/20	Ramsey Printing - Large Yard Sign	256.50
		—
		—
		—
	<b>TOTAL</b>	<b>256.50</b>

## CORPORATE PROJECT EXPENDITURES

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Project title or description \_\_\_\_\_

Date	Purpose	Name and Address of Recipient	Expenditure or Contribution Amount
		<b>TOTAL</b>	

I certify that this is a full and true statement. \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Printed Name \_\_\_\_\_ Telephone \_\_\_\_\_ Email (if available) \_\_\_\_\_

Address \_\_\_\_\_

Report

Office

Name

For Office Use Only:

Office of the Minnesota Secretary of State

**CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING**

AUDITORS OFFICE

**Instructions**

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**Campaign Information**

Name of candidate or committee JOHN L. SMITH

Office sought by candidate (if applicable) COUNTY COMMISSIONER

Identification of ballot question (if applicable) DIST 3

**Certification**

Select the appropriate choice below, and sign:

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

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

Signature of candidate or committee treasurer John L. Smith

Date 11/23/20

# CAMPAIGN FINANCIAL REPORT

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

RECEIVED

OCT 27 2020

AUDITOR'S OFFICE

Name of candidate, committee or corporation JOHN L. SMITH

Office sought or ballot question COUNTY COMMISSIONER District 3

Type of report \_\_\_\_\_ Candidate report

\_\_\_\_\_ Campaign committee report

\_\_\_\_\_ Association or corporation report

\_\_\_\_\_ Final report

Period of time covered by report: from 8/10 to 10/26

Report

### 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 = \$ \_\_\_\_\_

Office

### 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
9/23	POSTAGE	545.00
10/3	ADS	920.20
10/5	POST CARDS	581.21
10/10	RADIO	368.00
10/11	SIGNS	1200.00
<b>TOTAL</b>		<b>3514.41</b>

### 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
<b>TOTAL</b>			

For Office Use Only: Name

I certify that this is a full and true statement. John L. Smith 10/26/20

Signature Date

Printed Name JOHN L. SMITH Telephone \_\_\_\_\_ Email (if available) \_\_\_\_\_

Address 17830 655 Ave DAP WILMN 55324

RECEIVED

AUG 14 2020

AUDITORS OFFICE

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation JOHN L. SMITH

Office sought or ballot question County Commissioner District 3

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

Period of time covered by report:  
 from 6/2 to 8/8

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
7/6	HATS	96.00
7/13	POST CARDS	29.50
7/14	Ad	146.28
8/1	Ad	73.14
	TOTAL	344.92

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. John L. Smith 8/10/20  
 Signature Date

Printed Name JOHN L. SMITH Telephone 320-221-0282 Email (if available) runningsjohn@gmail.com  
 Address 17830 6SS AVE DARWIN MN. 55324

Report

ce

For Office Use Only: Name



AUG 11 2020

Office of the Minnesota Secretary of State

AUDITORS OFFICE

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 Tim Benoit
Office sought by candidate (if applicable) County Commissioner
Identification of ballot question (if applicable)

Certification

Select the appropriate choice below, and sign.

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

[X] 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 Tim Benoit

Date 07-30-2020

AUG 26 2020

CAMPAIGN FINANCIAL REPORT (Photocopy version)

CAMPAIGN FINANCIAL REPORT

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

AUDITORS OFFICE

Name of candidate, committee or corporation Tim Benoit

Office sought or ballot question County Commissioner District 3

Type of report: Candidate report, Campaign committee report, Association or corporation report, Final report (checked)

Period of time covered by report: from 07-30-20 to End

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, IN-KIND + \$ 0, TOTAL AMOUNT RECEIVED = \$ 0, TOTAL CASH-ON-HAND \$ 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.

Table with 3 columns: Date, Purpose, Amount. Total amount is 0.

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.

Table with 4 columns: Date, Purpose, Name and Address of Recipient, Expenditure or Contribution Amount. Total amount is blank.

I certify that this is a full and true statement. Signature: Tim Benoit Date: 08-24-2020

Printed Name: Tim Benoit Telephone: 320-282-9389 Email: benoit@reegan.com Address: 21921 748th Avenue, Dassel, MN 55325

Report Office Name For Office Use Only:

# CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING

RECEIVED

NOV 23 2020

AUDITORS OFFICE

## 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 GREG GILBERTSON

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 to date by Minnesota Statutes 211A.02 have been submitted to the filing officer.

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

Signature of candidate or committee treasurer 

Date 11-23-2020

CAMPAIGN FINANCIAL REPORT (Photocopy version)

RECEIVED

NOV 23 2020

AUDITORS OFFICE

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation \_\_\_\_\_

Office sought or ballot question COUNTY COMMISSIONER District 2

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

Period of time covered by report: from \_\_\_\_\_ to \_\_\_\_\_

Report

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

Office

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
	RADIO	200
	NEWSPAPER	150
	TOTAL	350

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	

For Office Use Only: Name

I certify that this is a full and true statement. Greg Gilbertson 11-23-2020  
 Signature Date  
 Printed Name GREG GILBERTSON Telephone 620-221-4439 Email (if available) \_\_\_\_\_  
 Address 605083 255TH ST. LITCHFIELD, MN

AUG 12 2020

CAMPAIGN FINANCIAL REPORT (Photocopy version)

CAMPAIGN FINANCIAL REPORT AUDITORS OFFICE

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

Name of candidate, committee or corporation GREG GILBERTSON

Office sought or ballot question MEEKER Co. COMMISSIONER 2

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

Period of time covered by report: from 8-2-2020 to 8-12-2020

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 + \$ \_\_\_\_\_  
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 3 columns: Date, Purpose, Amount. Rows include: 8-7-2020 SIGN STANDS 97.50, 6-2-2020 FILING FEE 50.00, and a TOTAL row of 147.50.

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.

Table with 4 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. [Signature] 8-12-2020  
Signature Date

Printed Name GREG GILBERTSON Telephone 320-221-4439 Email (if available) gregg@hutchtel  
Address 60583 255TH ST. LITCHFIELD

Report Office Name For Office Use Only:

**CAMPAIGN FINANCIAL REPORT (Photocopy version)**

District 1

**RECEIVED**

AUG 17 2020

**CAMPAIGN FINANCIAL REPORT**

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

**AUDITORS OFFICE**

Name of candidate, committee or corporation Greg Jans

Office sought or ballot question Meeker Swcd District \_\_\_\_\_

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

Period of time covered by report:

from 5/1/20 to 7/31/20

**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 \$ \_\_\_\_\_ TOTAL CASH-ON-HAND \$ 0  
 IN-KIND + \$ \_\_\_\_\_  
 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. Greg Jans 7/31/20  
 Signature Date

Printed Name Greg Jans Telephone 320-857-7381 Email (if available) cojo@cloudnet.com  
 Address 51036 310st, Grove City, MN 56243

Report

Office

Name

For Office Use Only:

District 11

RECEIVED

AUG 17 2020

Office of the Minnesota Secretary of State

# CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING

## Instructions

AUDITORS OFFICE

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 Greg Jans  
Office sought by candidate (if applicable) Meeker SWGD  
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 to date by Minnesota Statutes 211A.02 have been submitted to the filing officer.
- I do swear (or affirm) that campaign contributions or disbursements did not exceed \$750 in the calendar year.

Signature of candidate or committee treasurer Greg Jans

Date 7/31/20

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

Signature of candidate or committee treasurer Da J. Schiefelbin

Date 11-8-20