

CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING

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*)

Name of candidate or committee John H. Kral

Office sought by candidate SWCD Supervisor
(if applicable)

or

Identification of ballot question _____

Check the appropriate box below:

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 campaign contributions or disbursements did not exceed \$750 in the calendar year.

John H. Kral
(Signature of candidate or committee treasurer)

12-2-14
(Date)

CAMPAIGN FINANCIAL REPORT
(All of the information in this report is public information)

Name of candidate, committee, or corporation John H. Kral

Office sought or ballot question SWCD Supervisor District 5

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

Period of time covered by report: from _____ to _____

CONTRIBUTIONS

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 exceed \$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

EXPENDITURES

Include the amount, date, and purpose for all expenditures made during the period of time covered by this 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. John H. Kral 12-2-14
 Signature Date
 Printed Name John H. Kral Telephone 507.354.6592 Email (if available) jdkral@newulm.tel.net
 Address 64325 Cty Rd 21 New Ulm, Mn. 56073

Report

Office

Name

For Office Use Only:

CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING

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*)

Name of candidate or committee Dave Lange

Office sought by candidate County Sheriff
(if applicable)

or

Identification of ballot question _____

Check the appropriate box below:

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 campaign contributions or disbursements did not exceed \$750 in the calendar year.

 Dave Lange
(Signature of candidate or committee treasurer)

 11-18-14
(Date)

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation David Lunge

Office sought or ballot question Sheriff District _____

Type of report _____ Candidate report
 _____ Campaign committee report
 _____ Association or corporation report
X 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 = \$ - 0 -

EXPENDITURES

Include the amount, date and purpose for all expenditures made during the period of time covered by report. Attach additional sheets if necessary.

Date	Purpose	Amount
5-20-14	Filing Fee	50.00
	TOTAL	50.00

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.

David Lunge
Signature

11-18-14
Date

Printed Name David Lunge Telephone 507-232-3823 Email (if available) dlunge@co.nicollet.mn.us

Address 46176 Red Oak Dr, Nicollet, MN 56074

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 David C Johnson

Office sought or ballot question COMMISSIONER District 2

Type of report Candidate report
 Campaign committee report
 Association or corporation report
 Final report
Period of time covered by report:
from 5-22 to 10-24-14

CONTRIBUTIONS

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 exceed \$100 during the calendar year. This itemization must include name, address, employer or occupation if self-employed, amount, and date for these contributions.

CASH \$ 500.00 TOTAL CASH ON HAND \$ 770.87
IN-KIND + \$ 234.00
TOTAL AMOUNT RECEIVED = \$ 734.00

EXPENDITURES

Include the amount, date, and purpose for all expenditures made during the period of time covered by this report. Attach additional sheets if necessary.

Date	Purpose	Amount
5-29-14	Filing Fee Nic do	50.00
8-20-14	Signs & Suplies	216.94
10-00-14	RADIO MANKATO ADS	560.00
10-23-14	Flyers Bulk MAIL Postage	381.87
10-23-14	Supplies Flyers & handouts	246.00
TOTAL		<u>246.00</u>
		<u>\$1,454.87</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] 10/24/14
Signature Date

Printed Name David C Johnson Telephone 507-3275034 Email (if available) _____

Address 46620 381st AVE St Peter MN

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 David C Johnson

Office sought or ballot question Commissioner District 2

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

Period of time covered by report:
 from 5-22 to 11-4-14

CONTRIBUTIONS

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 exceed \$100 during the calendar year. This itemization must include name, address, employer or occupation if self-employed, amount, and date for these contributions.

CASH \$ 500.00 TOTAL CASH ON HAND \$ -720.87
 + \$ 234.00
 IN-KIND = \$ 234.00
 TOTAL AMOUNT RECEIVED = \$ 234.00

EXPENDITURES

Include the amount, date, and purpose for all expenditures made during the period of time covered by this report. Attach additional sheets if necessary.

Date	Purpose	Amount
5-22-14	Filing Fee Nic Co	50.00
8-20-14	Signs & Supplies	216.94
10-20-14	Radio Mankato ADS	560.00
10-23-14	Flyers Bulk Mail Postage	281.87
10-23-14	Supplies Flyers & handouts	246.00
	TOTAL	1454.87

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.

David C Johnson Signature 11-19-14 Date

Printed Name David C Johnson Telephone 322-5034 Email (if available) _____

Address 46620 381st AVE St Peter Mn 56082

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 JAMES STENSON

Office sought or ballot question COMMISSIONER District #2

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

Period of time covered by report:
 from 5/20/14 to 10/21/14

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 \$ 375.00 TOTAL CASH-ON-HAND \$ NONE
 IN-KIND + \$ _____
 TOTAL AMOUNT RECEIVED = \$ 375.00

EXPENDITURES

Include the amount, date and purpose for all expenditures made during the period of time covered by report. Attach additional sheets if necessary.

Date	Purpose	Amount
	See attached sheet	
	TOTAL	\$ 1,063.10

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
		N/A	
		TOTAL	

I certify that this is a full and true statement. JAMES A. STENSON 10/24/14
 Signature Date

Printed Name JAMES STENSON Telephone 931-6632 Email (if available) _____
 Address 45146 - 367th Ave St. Peter MD 20682

Report
Office
Name
For Office Use Only:

2014 Campaign

JAMES STENSON - 2014 CAMPAIGN INFORMATION

May 20 2014	Auditor-Treasurer: Filing Fee	50.00
Sep 12 2014	Office of Sec of State	35.00
Oct 7 2014	Nelson Printing	575.25
Oct 15 2014	U. S. Post Office	49.00
Oct 16 2014	Nelson Printing	34.20
Oct 18 2014	U. S. Post Office	294.00
Oct 21 2014	Nelson Printing	25.65
	Total	1,063.10

FINAL REPORT

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation JAMES STENSON

Office sought or ballot question COMMISSIONER District #2

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

Period of time covered by report:

from 5/20/14 to 11/20/14

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 \$ 425.- TOTAL CASH-ON-HAND \$ N/A
IN-KIND + \$ _____
TOTAL AMOUNT RECEIVED = \$ 425.-

EXPENDITURES

Include the amount, date and purpose for all expenditures made during the period of time covered by report. Attach additional sheets if necessary.

Date	Purpose	Amount
	See attached sheet	
	TOTAL	<u>2,047.60</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
		N/A	
		TOTAL	

I certify that this is a full and true statement.

James A. Stenson
Signature

11/22/14
Date

Printed Name JAMES STENSON Telephone 931-6633 Email (if available) _____

Address 45146 - 367th AVE St. Peter MN 56082

Report

Office

Name

For Office Use Only:

2014 Campaign

JAMES STENSON - 2014 CAMPAIGN INFORMATION

May 20 2014	Auditor-Treasurer: Filing Fee	50.00
Sep 12 2014	Office of Sec of State	35.00
Oct 7 2014	Nelson Printing	575.25
Oct 15 2014	U. S. Post Office	49.00
Oct 16 2014	Nelson Printing	34.20
Oct 18 2014	U. S. Post Office	294.00
Oct 21 2014	Nelson Printing	25.65
Oct 21 2014	U. S. Post Office	196.00
Oct 24 2014	U. S. Post Office	49.00
Nov 1 2014	Red Door Creative	177.00
Dec 11 2014	St.Peter Herald - via Credit Card Oct 16, 2014	562.50
	TOTAL EXPENSES	2,047.60

Sep 12 2014	Tom A S	100.00
Sep 24 2014	Phil A C	50.00
Oct 22 2014	Jon P K	100.00
Oct 22 2014	Marcia M S	25.00
Oct 22 2014	Marit A K	100.00
Oct 29 2014	Dave E S	50.00
	Contributions Received	425.00

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Name of candidate or committee KATHRYN CONLON

Office sought by candidate COUNTY RECORDER
(if applicable)

or

Identification of ballot question _____

Check the appropriate box below:

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 campaign contributions or disbursements did not exceed \$750 in the calendar year.

Kathryn Conlon
(Signature of candidate or committee treasurer)

12-5-14
(Date)

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation KATHRYN CONLON

Office sought or ballot question Nicolet County Recorder District _____

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

Period of time covered by report:

from 7-14 to 12-5-14

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

EXPENDITURES

Include the amount, date and purpose for all expenditures made during the period of time covered by report. Attach additional sheets if necessary.

Date	Purpose	Amount
10-1-14	ADVERTISE	111.28
10-3-14	ADVERTISE	63.20
10-3-14	ADVERTISE	31.25
5-20-14	FILING FEE	50.80
TOTAL		255.73

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. Kathryn Conlon 12-5-14
 Signature Date

Printed Name KATHRYN CONLON Telephone 931-6333 Email (if available) _____

Address 40297 STATE Hwy 22 ST. PETER MN 56082

Report

Office

Name

For Office Use Only:

CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING

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*)

Name of candidate or committee Michelle Zehrnder Fischer

Office sought by candidate Nicollet County Attorney
(if applicable)

or

Identification of ballot question _____

Check the appropriate box below:

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 campaign contributions or disbursements did not exceed \$750 in the calendar year.


(Signature of candidate or committee treasurer)

11/4/2014
(Date)

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: Jack Kolars

Office sought by candidate (if applicable): Commissioner Dist 4

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: 11-12-2014