

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Denny Kemp

Office sought or ballot question Nicollet County Commissioner District 3rd

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

Period of time covered by report:
 from 05/19/2020 to 9/29/2020

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	\$	0.00		TOTAL CASH-ON-HAND	\$	0.00
IN-KIND	+	\$ 1323.95				
TOTAL AMOUNT RECEIVED	=	\$ 1323.95				

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
5/19/2020	Candidate Filing Fee	50.00
9/04/2020	Postmaster EDDM Postage	634.20
09/29/2020	Paragon Printing	639.75
	TOTAL	1323.95

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. _____ 09/29/2020



Signature _____ Date _____

Printed Name Denny Kemp Telephone 1-800-337-8810 Email (if available) denny@dennykemp.com

Address 1814 Mary Lane North Mankato, MN 56003

Report Office Name For Office Use Only:

9/29/2020

2020 Election report

In Kind Contribution

DATE	Name	Address	Employer	Nature of Contribution	Value
5/19/2020	Denny Kemp (Candidate)	1814 Mary Lane NorthMankato MN	Self	Filing Fee	\$ 50.00
9/4/2020	Denny Kemp (Candidate)	1814 Mary Lane NorthMankato MN	Self	EDDM Postage	\$ 634.20
9/29/2020	Denny Kemp (Candidate)	1814 Mary Lane NorthMankato MN	Self	Paragon Printing	\$ 639.75

REPORT TOTAL \$ 1,323.95

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Denny Kemp

Office sought or ballot question Nicollet County Commissioner District 3rd

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

Period of time covered by report:
 from 9/30/2020 to 10/19/2020

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	\$ <u>0.00</u>	TOTAL CASH-ON-HAND	\$ <u>0.00</u>
IN-KIND	+ \$ <u>0.00</u>		
TOTAL AMOUNT RECEIVED	= \$ <u>0.00</u>		

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		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.

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. _____ 10/19/2020

(Signature) _____ Date

Printed Name Denny Kemp Telephone 1-800-337-8810 Email (if available) denny@dennykemp.com

Address 1814 Mary Lane North Mankato, MN 56003

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 Dr. Bruce Beatty
 Office sought or ballot question Nicollet County Commissioner District 5th District

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

Period of time covered by report:
 from Filing Date 2020 to 7/28/20

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 \$ _____
 IN-KIND + \$ _____
 TOTAL AMOUNT RECEIVED = \$ 0.00

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
5/18/20	Filing Fee	50. ⁰⁰ / ₁₀₀
5/26/20	SEC. of STATE (Voter List)	35. ⁰⁰ / ₁₀₀
6/9/20	WEB Design	500. ⁰⁰ / ₁₀₀
TOTAL		585.⁰⁰/₁₀₀

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. Dr. Bruce Beatty Signature Date 7/28/20

Printed Name DR. BRUCE BEATTY Telephone 507-276-2723 Email (if available) 5beatty@newulmnet.net
 Address 60127 412th LANE, New Ulm, MN 56073

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 DR. BRUCE BEATTY
 Office sought or ballot question Nicollet County Commissioner District 5th DISTRICT

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

Period of time covered by report:
 from 7/29/20 to 8/17/20

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 \$ _____
 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
8/1/20	Website Design / Cost	250.00
8/4/20	POSTAGE	910.00
8/4/20	POST CARDS	176.79
8/15/20	POST CARDS	176.79
8/15/20	POSTAGE	875.00
TOTAL		2,388.58

CORPORATE PROJECT EXPENDITURES

Corporations must list any media project or corporate message project for which contribution(s) or expenditure(s) total more than \$100. 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. Dr. Bruce Beatty 8/17/20
 Signature Date

Printed Name DR. BRUCE BEATTY Telephone 507-276-0723 Email (if available) bruce@brucebeatty.com
 Address 60127 412th LANE New Ulm, MN 56073

For Office Use Only: Name _____

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation DR. BRUCE BEATTY
 Office sought or ballot question Nicollet County Commissioner District 5th District.

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

Period of time covered by report:
 from 8/18/20 to 10/20/20

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 \$ 50.⁰⁰ TOTAL CASH-ON-HAND \$ _____
 IN-KIND + \$ _____
 TOTAL AMOUNT RECEIVED = \$ 50.⁰⁰

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
8/26/20	KNUT - RADIO ADS	1,002. ⁹⁴
9/16/20	Dave HANDEL	3/3. ⁰¹
10/8/20	Lafayette Ledger Ads	163. ²⁰
10/14/20	NU JOURNAL Ad	114. ⁶⁰
10/20/20	GAS.	50. ⁰⁰
TOTAL		<u>1,644.¹⁴</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. Dr. Bruce Beatty 10/20/20
 Signature Date

Printed Name DR. BRUCE BEATTY Telephone 507-276-2723 Email (if available) bruce@nicollet.com
 Address 60127 412th Lane, New Ulm, MN 56073

For Office Use Only: Name _____

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Marie Dranttel

Office sought or ballot question Nicollet County Comm District 1

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

Period of time covered by report:

from 5/1/20 to 11/6/20

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
5/19/2020	Filing Fee ✓ # 11242	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	0

I certify that this is a full and true statement. Marie Dranttel 11/6/2020
 Signature Date

Printed Name Marie Dranttel Telephone 5073274706 Email (if available) marie@dranttel.com
 Address 34697 Daisy Ln St Peter MN 56082

Report Office Name For Office Use Only:

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: Marie Drantel
Office sought by candidate (if applicable): Nicollet County Commissioner Dist 1
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: Marie Drantel
Date: 11/06/2020

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation John Luepke

Office sought or ballot question Nicollet County Commissioner District 5

Type of report Candidate report Period of time covered by report:
 Campaign committee report
 Association or corporation report
 Final report from 5-19-2020 to 7-1-2020

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
5-19-20	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	0

I certify that this is a full and true statement. John Luepke 7-28-2020
Signature Date
 Printed Name John Luepke Telephone 507-359-2703 Email (if available) jl@concrete.net
 Address 44242 541st Ave Courtland MN 56021

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 John Loeplke

Office sought or ballot question County Commissioner District Nicollet 5

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

Period of time covered by report:
 from 7-31-20 to 10-23-20

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 \$ _____
 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
9-10-20	Lafayette Ledger (ads)	114.00
9-17-20	Paragon Printing	669.56
9-17-20	Postmaster	689.43
	total of additional page	542.39
	TOTAL	2015.38

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 Loeplke 10-19-2020

Printed Name John Loeplke Telephone 507-359-2203 Signature _____ Date 10-19-2020
 Address 44242 541st Ave, Courtland MN 56021 Email (if available) jld@newtel.net

Report

Office

Name

For Office Use Only:

John Luepke
additional
10-19-20

9-21-20	KNUT Radio	125.00
9-21-20	New Ulm Journal	210.00
9-22-20	additional postage	92.40
10-6-20	Voters Guide (NewUlm)	76.49
10-9-20	additional ad (Lafayette)	38.50
	total this page	<u>542.39</u>

CAMPAIGN FINANCIAL REPORT (Photocopy version)

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation John Loeppke

Office sought or ballot question Commissioner Nicollet Co. District 5

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

Period of time covered by report:
 from 10-21-20 to 11-16-20

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 \$ _____
 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
10-21-20	KNUT Radio News U/m	260.02
10-30-20	KNUT Radio News U/m	55.20
	TOTAL	315.22

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 Loeppke 11-10-20
 Signature Date
 Printed Name John Loeppke Telephone 607-359-2703 Email (if available) jldk@necollet.com
 Address 47242 1541st Ave Coon Rapids MN 55021

Report

Office

For Office Use Only: Name

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 John Luepke
Office sought by candidate (if applicable) Nicollet County Commissioner Dist 5
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 11-9-20

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
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