

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

Ben Bakken

Office sought by candidate (if applicable)

School Board

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

11/5/2020

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Ben Bakken

Office sought or ballot question School Board District #2172

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

Period of time covered by report:
 from 8/1/20 to 11/5/20

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 \$ 0⁰⁰ TOTAL CASH-ON-HAND \$ 0⁰⁰
 IN-KIND + \$ 0⁰⁰
 TOTAL AMOUNT RECEIVED = \$ 0⁰⁰

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 |
|--------------|------------|--------|
| | | |
| | <u>n/a</u> | |
| | | |
| TOTAL | | |

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 |
|---------------|--------------|-------------------------------|------------------------------------|
| <u>9/1/20</u> | <u>Signs</u> | <u>D+S Banner/Print</u> | <u>\$128⁰⁰</u> |
| TOTAL | | | |

I certify that this is a full and true statement. _____ 11/5/20

Printed Name BEN BAKKEN Telephone 612.919.0520 Email (if available) _____

Address 2124 Mingo View Dr. Wauwatosa, WI 55983

benbakken@collegecitybeverage.com

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 Sherry Eichler
Office sought by candidate (if applicable) School Board
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 Sherry Eichler
Date Dec 1, 2020

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Sherry Eichler
 Office sought or ballot question School Board District Kenyon/Wanamings

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 \$ 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 | | |

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. Sherry Eichler 12-1-2020
 Signature Date

Printed Name Sherry Eichler Telephone 507-491-9046 Email (if available) pocahantas@gmail.com
 Address 711 Mant Street, Kenyon, Mn 55946

Report
Office
Name
For Office Use Only:

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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

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Campaign Information

Name of candidate or committee

AJ LINDBEL

Office sought by candidate (if applicable)

SCHOOL BOARD

Identification of ballot question (if applicable)

Certification

Select the appropriate choice below, and sign.

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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

G. Cull

Date

4/9/2020

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation AJ LINDELL
 Office sought or ballot question SCHOOL BOARD District 2172

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

Period of time covered by report:
 from 8/1/20 to 11/9/20

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 \$ 128⁰⁰ TOTAL CASH-ON-HAND \$ Ø
 IN-KIND + \$ Ø
 TOTAL AMOUNT RECEIVED = \$ 128⁰⁰

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 |
|---------|---------|--------------------------------------|
| 9/23/20 | Signs | \$ 128 ⁰⁰ |
| | | |
| | | |
| | TOTAL | \$ 128 ⁰⁰ / _{KK} |

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. G.J. Collier 11/9/20
 Signature Date

Printed Name AJ LINDELL Telephone 651-336-8413 Email (if available) ajlindell@mc.com

Address 45395 20th Ave KENYON, MN 55946

Report

Office

Name

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CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING

Instructions

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Campaign Information

Name of candidate or committee Junie Sommer
Office sought by candidate (if applicable) School Board - District 2172
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 Junie Sommer
Date 11/5/2020

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Amie Sommer

Office sought or ballot question School Board District 2/72

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

Period of time covered by report:
 from 8/2020 to 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 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 | |

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. Amie Sommer 11/5/2020
 Signature Date

Printed Name Amie Sommer Telephone 507-271-5507 Email (if available) jsommer@kw.k12.mn.us

Address 313 2nd St E Wamamigo, MN 55983

Report Office Name For Office Use Only:

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Campaign Information

Name of candidate or committee Michelle Wood
Office sought by candidate (if applicable) School Board
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 Michelle Wood

Date 11-10-20

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Michelle Wood

Office sought or ballot question School Board District 2172

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

Period of time covered by report:
 from 8/11/20 11/20

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 |
|--------|--------------|------------------|
| 9/2/20 | Signs | \$ 418.76 |
| | | |
| | | |
| | TOTAL | \$ 418.76 |

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 | \$ 0 |

I certify that this is a full and true statement. Michelle Wood 11/9/20
 Signature Date

Printed Name Michelle Wood Telephone 612-810-4893 Email (if available) wood.kids.mn@gmail.com

Address 3014 Sogn Valley Dr. Dennison, MN 55018

Report
Office
Name
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