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	V	2411	A	Calta
Name of candidate or committee	~	athleen	M	GETTE
Office sought by candidate (if appli	cable)	Mayor		
Identification of ballot question (if	applical	ble) NA		

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

do swear (or affirm) that all campaign contributions or disbursements did not exceed \$750 in the calendar year.
Signature of candidate opcommittee treasurer Kakluu Q

submitted to the filing officer.

Campaign Information

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Name of candidate or committee
Office sought by candidate (if applicable) WHOR OF OSSED
Identification of ballot question (if applicable)
<u>Certification</u>
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

Office of the Minnesota Secretary of State
Elections Division
2020 Campaign Manual

4/24/2020

CAMPAIGN FINANCIAL REPORT (Photocopy version)

CAMPAIGN FINANCIAL REPORT

(All of the information in this report is public information) Name of candidate, committee or corporation Office sought or ballot question District Type of Candidate report Period of time covered by report: Campaign committee report report Association or corporation report from 9-20) to 1/-2-2020 Final 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 (mo Report or in-kind) rather than contributor. See note on contribution limits on the back of this form. Use a separate sheet to itemize all contribution from a single source that exceeded \$100 during the calendar year. This itemization must include name, address, employer or occupation self-employed, amount and date for these contributions. CASH 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 Ригрозе 9-10-2020 For CAMPAIN. TOTAL CORPORATE PROJECT EXPENDITURES Corporations must list any media project or corporate message project for which contribution(s) or expenditure(s) total mi than \$200. Submit a separate report for each project. Attach additional sheets if necessary. Project title or description Date Purpose Name and Address Expenditure or of Recipient Contribution Amount TOTAL I certify that this is a full and true statement. 11-10-2020 <u>M</u>√Telephone 60-868-78/3 Email (if available)

Campaign Information

CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING Instructions

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Name of candidate or committee HAROLD E. JOHNSON
Office sought by candidate (if applicable)CTTY Council
Identification of ballot question (if applicable)
Certification
Select the appropriate choice below, and sign:
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I do swear (or affirm) that campaign contributions or disbursements did not exceed \$750 in the calendar year.
Signature of candidate or committee treasurer Hawle Johnson
Date//-/0-20

Office of the Minnesota Secretary of State Elections Division 2020 Campaign Manual

4/24/2020

CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING Instructions

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<u>Campaign Information</u>
Name of candidate or committee Kenny Joel Nelson Office sought by candidate (if applicable) Ossro City (ouncil
Office sought by candidate (if applicable) Ossro City (ounci)
Identification of ballot question (if applicable)
Certification
Select the appropriate choice below, and sign:
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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 11-17-2020

Office of the Minnesota Secretary of State Elections Division 2020 Campaign Manual

4/24/2020

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Campaign Information
Name of candidate or committee Alicia Vickerman
Office sought by candidate (if applicable) Dsseo City Council
Identification of ballot question (if applicable)
· /
<u>Certification</u>
Select the appropriate choice below, and sign:
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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 11/11/2 02 A

Office of the Minnesota Secretary of State 2020 Campaign Manual