

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 JAMES Forshee

Office sought by candidate (if applicable) Martin County Auditor Treasurer

Identification of ballot question (if applicable) N/A

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 James Forshee

Date 11/30/2018

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

from 6/4/18 to 7/3/18

Address 1172 125th Street Welcome, MN 56181

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Richard Keans

Office sought or ballot question County Commissioner District Four

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

Period of time covered by report:

from 7/3/18 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 \$ 150.00 TOTAL CASH-ON-HAND \$ 0
IN-KIND + \$ _____
TOTAL AMOUNT RECEIVED = \$ _____
3050.00

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
7/9/18	Campaign Hand out cards	64.20
7/17/18	West Martin Weekly 4 Ads	118.60
7/25/18	Photo Press 2 Ads	229.50
	TOTAL	412.30

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

Date

Printed Name Richard Keans Telephone 507 236 2902 Email (if available) _____

Address 1172 125th Street Welcome, MN 56181

Filed 8/7/18

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

from 8/6/18 to 9/4/18

Address 1172 125TH STREET N.W. / CORNE, MN 56151,

For Office Use Only:

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

Period of time covered by report:
from 9/4/18 to 10/2/18

Printed Name Richard Koors Telephone 236-2902 Email (if available) _____
Address 1172 125th St Wellesley, MA, 06181

For Office Use Only:

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

from 10/2/18 to 10/29/18

Address 1172125th St Welcome MN 56181

For Office Use Only:

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation COMMITTEE TO ELECT RICHARD KOONS 4TH DIST. COM.

Office sought or ballot question COUNTY COMMISSIONER District 4TH

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

Period of time covered by report:

from 9-30-18 to 10-30-18

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 \$ 1425⁰⁰ TOTAL CASH-ON-HAND \$ 528³⁴
IN-KIND + \$ _____
TOTAL AMOUNT RECEIVED = \$ 1425⁰⁰

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
10/22/18	Photo Press Fliers & Paper Ads	896 ⁶⁶
	TOTAL	896 ⁶⁶

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.

Dennis G. Larson
Signature

10-30-18
Date

Printed Name DENNIS G. LARSON Telephone 507-764-6618 Email (if available) _____

Address 815 120TH ST SHERBURN MN 56171

CAMPAIGN FINANCIAL REPORT (Photocopy version)

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation COMMITTEE TO ELECT RICHARD KOONS

Office sought or ballot question COUNTY COMMISSIONER District 4TH

Type of report

☐ Candidate report
☒ Campaign committee report
☐ Association or corporation report
☒ Final report

Period of time covered by report:

from 10-30-18 to 11-16-18

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
11-16-18	ADVERTIZING	\$ 528.34
	TOTAL	\$ 528.34

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

Date

Printed Name

DENNIS G. LARSON

Telephone

507-764-6618

Email (if available)

Address

815 120TH ST SHERBORN MN 56171

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

from 10/29/18 to 11/15/18

Printed Name Richard Koons Telephone 507 236-2902 Email (if available) raKoons@hotmail.com
Address 1172 125th St Welcome, MN 56181

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

Office sought or ballot question Auditor Treasurer District _____

from 5/22 to 8/22

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

Date	Purpose	Amount
5/22/18	Filing Fee	50 ⁰⁰
	TOTAL	

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

Address 1306 School St Fairmont, MN 56031

For Office Use Only:

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Diane Sanders

Office sought or ballot question County Recorder District _____

Type of report ☒ Candidate report

Campaign committee report

Association or corporation report

Final report

Period of time covered by report:

from 5/22/18 to 8/3/18

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 \$ _____
+ \$ _____
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
5/22/18	Martin Co. Auditor - filing fee	50.00
6/20/18	Martin Co. Fair - booth rental	200.00
6/27/18	D+S Trophies - t-shirts	300.00
7/16/18	Minuteman Press - signs	390.85
	continued next page	
	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. Diane K. Sanders

Signature

Date

Printed Name Diane Sanders Telephone 507-236-1079 Email (if available) _____

Address 2427 230th Ave. Truman MN 56088

Report

Office

Name

For Office Use Only:

Campaign Financial Report
page 2

Diane Sanders

6/21/18	Sams Club (parade candy)	75.00
7/24/18	Minuteman Press (stickers)	163.00
8/1/18	Minuteman Press (flyers)	100.24
8/3/18	Wal Mart (fair candy)	23.90

Total:

\$ 1,302.99

Report

Office

Name

For Office Use Only:

from 8/4/2018 to 10/22/2018

Address 2427 230th Ave Truman W 56088

Report

Office

Name

For Office Use Only:

from 10/23/2018 to 11/8/2018

CASH	\$	<u> -0- </u>	TOTAL CASH-ON-HAND	\$	<u> </u>
IN-KIND	+	\$	<u> </u>		
TOTAL AMOUNT RECEIVED	=	\$	<u> </u>		

<i>Date</i>	<i>Purpose</i>	<i>Amount</i>
		— 0 —
	TOTAL	— 0 —

<i>Date</i>	<i>Purpose</i>	<i>Name and Address of Recipient</i>	<i>Expenditure or Contribution Amount</i>
		TOTAL	— 0 —

Address 2427 230th Ave Truman MN 56088

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

Office sought or ballot question County Commissioner District 4

from June, 2018 to Aug 04, 2018

CASH	\$	<u>50.⁰⁰</u>	TOTAL CASH-ON-HAND	\$	<u>-0-</u>
IN-KIND	+	\$			
TOTAL AMOUNT RECEIVED	=	\$	<u>50.⁰⁰</u>		

Date	Purpose	Amount
	See attached form	
	TOTAL	

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

8-04-18
Date

Printed Name Dan Schmidtke Telephone 507-236-4121 Email (if available) dan.schmidtke@yahoo.com
Address 1598 70th St Fairmont, MN 56031

For Office Use Only:

Date	Disbursements	Amount
5/22/18	MC Treasurer	50.00
6/15/18	Photo Press magnets	202.31
7/9/18	Beemer's sign hangers	150.33
7/11/18	MC Star ad	134.00
7/16/18	Photo Press Brochures	217.07
7/16/18	Photo Press Ad	55.00
7/17/18	MC Treasurer labels	50.25
7/20/18	Photo Press Ad	55.80
7/27/18	Photo Press ad	83.70
7/27/18	Design Signs	1247.77
7/30/18	Photo Press postcards	124.29
7/31/18	Postage postcards	595.00
7/31/18	MC Star Ad	248.40
8/3/18	Photo Press Ad	202.50
8/3/18	Postage postcards	21.75
	Total	\$3438.17

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Clark Berry

Office sought or ballot question 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 1-1-18 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

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
8/9/18	Lawn Signs	397.85
8/20/18	Lawn Signs	259.96
	TOTAL	657.81

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 Clark Berry

Date _____

Printed Name Clark Berry Telephone 507-236-0543 Email (if available) abstract@midco.net

Address 137 Homewood Drive, Fairmont, MN 56031

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 Jeff P Markgunt

Office sought or ballot question Sheriff District _____

Type of report

Candidate report

Campaign committee report

Association or corporation report
☒ Final report

Period of time covered by report:

from 5/22 to 11/8/2018

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
5/22/18	Filing	\$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.

Jeff P Markgunt
Signature

11/8/18
Date

Printed Name Jeff P Markgunt Telephone 507-236-1122 Email (if available) _____

Address 65 Fox Lake Dr. West Sherburn MN 56171

Report

Office

Name

For Office Use Only:

Report

Office

Name

Period of time covered by report:
from 05/24/18 to 11/06/18

For Office Use Only:

DISBURSEMENTS

<i>Date</i>	<i>Purpose</i>	<i>Amount</i>
	TOTAL	

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.

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

Signature

Date _____

Printed Name Benjamin Madsen Telephone 507-236-7140 Email (if available) benlmadsen@hotmail.com
Address 1307 Budd Street Fairmont, MN 56031

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

Office sought or ballot question Martin County Attorney District Martin County

Period of time covered by report:

from 11/1/2018 to 11/30/2018

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</u>	TOTAL CASH-ON-HAND	\$	<u>0</u>
IN-KIND	+	\$ <u>0</u>			
TOTAL AMOUNT RECEIVED	=	\$ <u>0</u>			

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
		None
	TOTAL	0

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

<i>Date</i>	<i>Purpose</i>	<i>Name and Address of Recipient</i>	<i>Expenditure or Contribution Amount</i>
		TOTAL	<i>2</i>

I certify that this is a full and true statement.

Bruce V. Kesselman
Signature

Date _____

Printed Name Terry Wayne Viesselman Telephone 507 235-6018 Email (if available) terryviesselman@hotmail.com

Address 3817 Cedar Park Road Fairmont, MN 56031

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: Terry Wayne Kesselman
Office sought by candidate (if applicable): Martin County Attorney
Identification of ballot question (if applicable): N/A

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: Terry W. Kesselman

Date: 11/30/2018

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

Office sought or ballot question Libertarian District 2

Period of time covered by report:

from to

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.

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

<i>Date</i>	<i>Purpose</i>	<i>Amount</i>
	TOTAL	

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 _____

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

I certify that this is a full and true statement. Don M. [Signature] 12-6-2019

Signature _____

Date

Printed Name Tom Mahony Telephone 507-236-3375 Email (if available) mahony.anna@disa

Address 1014 Day St. O'Fairmont Md. 54031 (410) 540-3111

Report

Office

Name

For Office Use Only:

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

Don Mahy

Office sought by candidate (if applicable)

Commissioner Dist 2

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

Don Mahy

Date

12-6-2018

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

Office sought or ballot question Soil And Water Board District 4

Period of time covered by report:
from _____ to _____

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.

DISBURSEMENTS

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

<i>Date</i>	<i>Purpose</i>	<i>Amount</i>
	TOTAL	0

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.

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

Signature

Date _____

Printed Name Clair Schmid / Dr Telephone 307-236-2670 Email (if available) _____

Address Cervelo MW

For Office Use Only:

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

Clair Schmidt Jr

Office sought by candidate (if applicable)

Soil And Water 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

Clair Schmidt Jr

Date

12-14-18