

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Debra Davis

Office sought or ballot question \_\_\_\_\_ District \_\_\_\_\_

Type of report	<input checked="" type="checkbox"/>	Candidate report
	<input type="checkbox"/>	Campaign committee report
	<input type="checkbox"/>	Association or corporation report
	<input type="checkbox"/>	Final report

Period of time covered by report:

from \_\_\_\_\_ to 10-24-14

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

## EXPENDITURES

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

<i>Date</i>	<i>Purpose</i>	<i>Amount</i>
	<b>TOTAL</b>	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 \_\_\_\_\_

<i>Date</i>	<i>Purpose</i>	<i>Name and Address of Recipient</i>	<i>Expenditure or Contribution Amount</i>
		<b>TOTAL</b>	<i>4</i>

I certify that this is a full and true statement. Debra L. Davis 10-21-14  
Signature Date

Printed Name Debra L Davis Telephone 651-792-5912 Email (if available) \_\_\_\_\_

Address 838 9th Ave SW Faribault, MN 55021

## Report

Office

Name

**For Office Use Only:**

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

Period of time covered by report:  
from 8/1/14 to 10/24/14

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

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
	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

Date	Purpose	Name and Address of Recipient	Expenditure or Contribution Amount
		TOTAL	

I certify that this is a full and true statement.

Signature: Thomas J. Capel Date: 10/23/14

Printed Name: Thomas R. Casper Telephone: 507 334 9766 Email (if available): tcasper@b3@yahoo.com  
Address: 213 SE 12<sup>th</sup> Ave Faribault Mn 55021

OCT 23 2014

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation RICHARD OLSON

Office sought or ballot question SCHOOL BOARD District 656

Type of report	<u>    X    </u>	Candidate report
	<u>          </u>	Campaign committee report
	<u>          </u>	Association or corporation report
	<u>          </u>	Final report

Period of time covered by report:

from 8/2/14 to 10/24/14

## CONTRIBUTIONS RECEIVED

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CASH	\$ 899.00	TOTAL CASH-ON-HAND	\$ _____
IN-KIND	+ \$ _____		
TOTAL AMOUNT RECEIVED	= \$ 899.00		

## EXPENDITURES

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

<i>Date</i>	<i>Purpose</i>	<i>Amount</i>
10/22/14	KDHL - RADIO AD	\$880.00
	<b>TOTAL</b>	

## CORPORATE PROJECT EXPENDITURES

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Project title or description

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

I certify that this is a full and true statement.

**Signature**

10/24/14

Date \_\_\_\_\_

Printed Name RICHARD OLSON Telephone 334-2373 Email (if available) \_\_\_\_\_

Address 113 9TH AVE. S.E., FARIBAULT

## Report

Office

Name \_\_\_\_\_

For Office Use Only:

### **Donations-School Board 2014**

1. 8/6/14-Ralph Liverseed-\$25.00
2. 8/6/14-Shawn Mackay-\$50.00
3. 9/21/14-Bron Scherer-\$99.00
4. 9/30/14-William Helling-\$15.00
5. 10/1/14-Charles Carr-\$20.00
6. 10/2/14-James Glynn-\$25.00
7. 10/3/14-Ralph Goracke-\$20.00
8. 10/3/14-Don Jasinski-\$25.00
9. 10/3/14-Fred Pithey-\$20.00
10. 10/4/14-David Gross-\$50.00
11. 10/9/14-Roger Koopmans-\$35.00
12. 10/9/14-Larry Charbonneau-\$50.00
13. 10/14/14-David Paukert-\$25.00
14. 10/14/14-Scott Quiring-\$50.00
15. 10/15/14-Dean Mulder-\$40.00
16. 10/17/14-James Beckmann-\$25.00
17. 10/18/14-William Sand-\$100.00
18. 10/20/14-Milt Plaisance-\$100.00
19. 10/20/14-Doug Jones-\$100.00
20. 10/22/14-Bruce Diercks-\$25.00

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Phyllis Bongard

Office sought or ballot question \_\_\_\_\_ District \_\_\_\_\_

Type of report	<input checked="" type="checkbox"/>	Candidate report
	<input type="checkbox"/>	Campaign committee report
	<input type="checkbox"/>	Association or corporation report
	<input type="checkbox"/>	Final report

Period of time covered by report:

from 8/2/14 to 10/24/14

## CONTRIBUTIONS RECEIVED

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

## 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
	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 \_\_\_\_\_

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

I certify that this is a full and true statement.

Phyllis M. Bongard  
Signature

10/24/14  
Date

Printed Name Phyllis Bongard Telephone 507-330-4394 Email (if available) phyllis.bongard@gmail.com

Address 24783 Babcock Ave., Faribault, MN 55021

## Report

Office

Name

For Office Use Only:

DUE 10-24-14

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation CHAD WOLFF

Office sought or ballot question \_\_\_\_\_ District \_\_\_\_\_

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

Period of time covered by report:

from \_\_\_\_\_ to \_\_\_\_\_

## CONTRIBUTIONS RECEIVED

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CASH \$ \_\_\_\_\_ TOTAL CASH-ON-HAND \$ 0  
IN-KIND + \$ \_\_\_\_\_  
TOTAL AMOUNT RECEIVED = \$ \_\_\_\_\_

## 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
	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	

I certify that this is a full and true statement. Chad Wolff 10/21/14  
Signature Date

Printed Name CHAD WOLFF Telephone 612-760-1757 Email (if available) cdwolff@cableconnection.com

Address 37600 Chappois Trail FARIBAUT, MN 55021

Report

Office

Name

For Office Use Only:

**For Office Use Only:**

Address 419 Willow, Faribault, MN 55021



Paid	order date	vendor	charge
	8/9/2014	62714 Faribault print shop	33.76 printing
	8/9/2014	70814 Faribault print shop	45.38 printing
	9/14/2014	80714 Faribault print shop	87.53 printing
	9/14/2014	71714 Faribault print shop	28.77 printing
	9/14/2014	71814 Faribault print shop	19.21 printing
	9/14/2014	72914 Faribault print shop	53.69 printing
	9/14/2014	81414 Faribault print shop	95.24 printing
		73014 Secretary of State	35 Walking list
	10/1/2014	90414 Faribault print shop	222.04 printing
pending		100214 Faribault print shop	31.04 printing
	10/15/2014	101514 FCTV	20 TV advert
pending		101414 Faribault print shop	102.67 printing
pending		101714 Faribault print shop	8.89 printing
pending		100814 Faribault print shop	19.11 printing
pending		92314 Faribault print shop	12.73 printing
pending		91214 Faribault print shop	8.09 printing
	8/9/2014	fedex office	11.76 binding & tabs
	9/14/2014	fedex office	16.04 binding & tabs

DUE 10-24-14

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation ANDREA VOGELSBERG

Office sought or ballot question SCHOOL BOARD District 656

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

Period of time covered by report:

from \_\_\_\_\_ to \_\_\_\_\_

## CONTRIBUTIONS RECEIVED

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

## 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
10-07-2014	CAMPAIGN SIGNS	133.61
	TOTAL	133.61

## CORPORATE PROJECT EXPENDITURES

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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. Andrea F Vogelberg 10-20-2014  
 Signature Date

Printed Name ANDREA VOGELSBERG Telephone 332-4006 Email (if available) avogelsberg@yahoo.com

Address 862 HOME PLACE FAIRBANK, MN 55021

Report

Office

Name

For Office Use Only: