

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 *Orcutt Veto Yes*

Office sought by candidate (if applicable)

Identification of ballot question (if applicable) *School levy referendum*

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

11/4/2020



CAMPAIGN FINANCIAL REPORT (Photocopy version)

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Carina Van Yes
 Office sought or ballot question School levy referendum District Green 212
 Type of report X Candidate report Campaign committee report Association or corporation report Final report
 Period of time covered by report from 1/1/2020 to 7/14/2020

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 \$ 3,600.00 TOTAL CASH-ON-HAND \$ 4,882.58
 IN-KIND + \$
 TOTAL AMOUNT RECEIVED = \$ 3,600.00

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
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 [Signature] 7/14/2020
 Signature Date
 Printed Name Deborah Van Yes Telephone 612 119 2513 Email (if available) _____
 Address 1442 Hermitage Trail, Long Lake, MN 55326

Report

Office

For Office Use Only Name

Martha & Andy Van de Ven	1765 Medina Rd	Long Lake	MN	55356	\$1,200	U of MN & retired	7/7/2020
Brian Kingsley	1512 Tamarack Dr	Long Lake	MN	55356	\$600	self-employed investor	7/8/2020
Sarah Borchers	1512 Tamarack Dr	Long Lake	MN	55356	\$600	self-employed investor	7/8/2020
Raphael & Laura Wallander	1070 Tonkawa Rd	Independence	MN	55359	1,200	Wayzata Invstmt Partners	7/9/2020

CAMPAIGN FINANCIAL REPORT (Photocopy version)

CAMPAIGN FINANCIAL REPORT

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

Report

Name of candidate, committee or corporation Celine Val Yes
 Office sought or ballot question School Trust Affiliation District Circle 2A
 Type of report X Candidate report Period of time covered by report:
X Campaign committee report
 Association or corporation report
 Final report
 from 7/13/20 to 10/22/20

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 \$ 7,800.00 TOTAL CASH-ON-HAND \$ 4,650.49
 IN-KIND * \$ 144.10
 TOTAL AMOUNT RECEIVED = \$ 7,944.10

Office

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>See Attached</u>	<u>8,176.19</u>
		TOTAL <u>8,176.19</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

For Office Use Only: Name

I certify that this is a full and true statement D. Val 10/22/20
 Signature Date
 Printed Name D. Val Telephone 612 119 2513 Email (if available) _____
 Address 444 Home Street, Longview, WA 99026

Campaign Financial Report
Period 7/15/20 to 10/22/20
Disbursements

08/05/2020	resident data request	\$ 75.00
08/24/2020	automobile decals	69.10
08/27/2020	newspaper advertisements	2,743.75
09/25/2020	post office box rental	92.00
10/01/2020	yard signs, postage, printing	5,196.34
	TOTAL DISBURSEMENTS	\$8,176.19

Robert & Kathy Tunheim	679 Minnetonka Hghlands Ln	Orono	MN	55356	\$250	Ballard Spahr & Gustavus	7/19/2020
Philip & Nicole Kaufman	1580 Bohns Pt Rd	Wayzata	MN	55391	\$1,200	United Health Group	7/27/2020
Mike & Ruth Bash	1680 Bollum Ln	Long Lake	MN	55356	\$400	Connexus Energy	8/2/2020
Katherine Shannon	2760 White Oak Cir	Long Lake	MN	55356	\$250	retired	8/13/2020
Bradley & Emily Kadue	465 Linden Ave	Orono	MN	55356	\$200	Precision Assoc, Orono	8/13/2020
Addison & Cynthia Piper	2905 Willowood Farm Rd	Hamel	MN	55340	\$1,200	retired	8/11/2020
John & Diane Malone	265 Lindawood Ln	Wayzata	MN	55391	\$500	Malone & Atchison; Accounting	8/13/2020
Richard & Jane Borchers	3 Tamarisk Trail	Sante Fe	NM	87506	\$600	retired	8/13/2020
Aaron Howe	6695 Hillstrom Rd	Independence	MN	55359	\$600	RBC Wealth Mgt	8/14/2020
Alicia Howe	6695 Hillstrom Rd	Independence	MN	55359	\$600	retired	8/14/2020
Kent & Heather Pilakowski	6445 County Rd 26	Minnestrta		55364	\$1,200	self-employed sales	9/16/2020
Orono Education Assn	795 North Old Crystal Bay Rd	Long Lake	MN	55356	\$500		10/5/2020

CAMPAIGN FINANCIAL REPORT (Photocopy version)

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Oreano Voks Yes

Office sought or ballot question School levy referendum District Oreano - 278

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

Period of time covered by report
 from 12/23/20 to 12/31/20

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 \$ 4,330.49
 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
10/29/20	postage	320.00
	TOTAL	320.00

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.

Signature

Date 12/3/20

Printed Name Deb Van de Ven Telephone 612-769-2513 Email (if available) _____

Address 1442 Hornstead Trail, Long Lake, MN 55356

Report

Office

For Office Use Only Name

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Orono Vote Yes

Office sought or ballot question School levy referendum District Orono - District 278

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

Period of time covered by report:

from 12/3/20 to 1/26/21

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	\$ <u>4330.49</u>
IN-KIND	+ \$ _____		
TOTAL AMOUNT RECEIVED	= \$ <u>-0-</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		

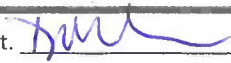
CORPORATE PROJECT EXPENDITURES

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

1/26/21

Date

Printed Name Deb Van de Ven Telephone 612-719-2513 Email (if available) _____

Address 1442 Homestead Trail, Long Lake, MN 55356

Report

Office

Name

For Office Use Only: