

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Madsen for school committee

Office sought or ballot question School board District ISD 278

Type of report:  Candidate report Period of time covered by report:  
 Campaign committee report from 8/7 to 9/31  
 Association or corporation report  
 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 (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
8/7	Campaign yard signs	569.51
	TOTAL	569.51

## 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.  8/31/22  
Signature Date

Printed Name TODD MADSON Telephone (630)639-9251 Email (if available) \_\_\_\_\_

Address 3155 Jamestown Rd, Orono, MN 55356

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 Madson for school committee

Office sought or ballot question School board District ISD 218

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

Period of time covered by report:  
 from 9/17 to 9/17

## 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
9/17	Meet and greet food	36.55
	TOTAL	36.55

## 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. \_\_\_\_\_ 9/19

Printed Name TODD MADSON Telephone 4306349251 Email (if available) \_\_\_\_\_  
 Signature \_\_\_\_\_ Date \_\_\_\_\_  
 Address 3155 Jamestown Rd, Orono, MA 01356

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 Madson for School Committee

Office sought or ballot question School board District ISD 278

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

Period of time covered by report:  
 from 9/8 to 9/30

## 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 \$ 1,500 TOTAL CASH-ON-HAND \$ 1,500  
 IN-KIND + \$ \_\_\_\_\_  
 TOTAL AMOUNT RECEIVED = \$ 1,500

## 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
9/8	Campaign materials	1,285.03
9/14	Campaign materials	513.54
9/23	Pizza - Campaign event	107.52
9/30	Pizza - Campaign event	111.15
<del>9/27</del>	<del>Campaign meeting Food</del>	
	TOTAL	2,017.24

## 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. \_\_\_\_\_ 9/30  
Signature Date

Printed Name TODD MADSON Telephone 10301039251 Email (if available) \_\_\_\_\_

Address 3155 Jamestown Rd, Orono, MN 55356

Report

Office

Name

For Office Use Only:

<b>Name</b>	<b>Address</b>	<b>Occupation</b>	<b>Amount</b>
Sarah Borchers	1512 Tamarack Rd, Medina 55356	Self Employed	600
Brian Kingsley	1512 Tamarack Rd, Medina 55356	Self Employed	600
Gretchen Piper	463 Highcroft Rd, Wayzata 55391	Consultant	50
Robert Tunheim	679 Mtka Highlands Lane, Orono 55356	Lawyer	250

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**Date**

12-Sep

12-Sep

16-Sep

30-Sep

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# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Madson for Orono Schools

Office sought or ballot question School Board District ISD 278

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

Period of time covered by report:  
 from 10/1 to 10/28

## CONTRIBUTIONS RECEIVED

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CASH \$ 300.00 TOTAL CASH-ON-HAND \$ 00.00  
 IN-KIND + \$ 125.59  
 TOTAL AMOUNT RECEIVED = \$ ~~300~~425.59

## 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
10/24	Vista Print - Campaign mailer	2,472.66
10/24	ECM Publishers - Lake Pioneer advertisement	575.73
10/22	Stamps	480.00
10/27	Stamps	60.00
<b>TOTAL</b>		<b>3,588.39</b>

## CORPORATE PROJECT EXPENDITURES

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Project title or description \_\_\_\_\_

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

I certify that this is a full and true statement. \_\_\_\_\_ 10/28/22

Signature Date

Printed Name TODD MADSON Telephone 6306399251 Email (if available) \_\_\_\_\_

Address 3155 Jamestown Rd, Long Lake, MN 55356

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 Madson for Orono Schools

Office sought or ballot question School Board District ISD 278

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

Period of time covered by report:

from 10/1 to 10/28

## CONTRIBUTIONS RECEIVED

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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
10/28	Wendy Lundsgaard - Campaign signs & misc	488 <sup>22</sup>
	TOTAL	488 <sup>22</sup>

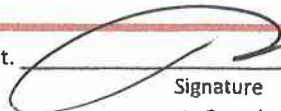
## CORPORATE PROJECT EXPENDITURES

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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

10/28/22  
Date

Printed Name TODD MADSON Telephone (0306) 79251 Email (if available) \_\_\_\_\_

Address 3155 Jamestown Rd, Long Lake, MN 55356

Report

Office

Name

For Office Use Only:

Name	Address	Occupation	Amount	Date
Jeanne Cook	685 Old Crystal Bay Rd, Orono, MN 55356	Consultant	125.59	10/6
Jeff Brown	4850 Bradford St, Maple Plain, MN 55359	Retired	100	10/1
Amy Alworth	1602 Homestead Trail, Long Lake, MN 55356	Consultant	200	10/15



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

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

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Madsen for School Committee

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

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

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

## CONTRIBUTIONS RECEIVED

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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
11/1	SWT Campaign Mailer - split by three	899.87
11/1	Rainbow Park Reservation - split by three	16.67
<b>TOTAL</b>		<b>916.54</b>

## CORPORATE PROJECT EXPENDITURES

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Project title or description \_\_\_\_\_

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

I certify that this is a full and true statement. [Signature] 12/5/22  
 Signature Date

Printed Name Todd Madsen Telephone 430 631 9251 Email (if available) \_\_\_\_\_

Address 3155 Semestrom Rd, Ocean, Md. 53354

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 Madson for School Committee  
 Office sought or ballot question School Board District ISD 278

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

Period of time covered by report:  
 from Nov 9 to Dec 31

## 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	\$ <u>0</u>	TOTAL CASH-ON-HAND	\$ <u>0</u>
IN-KIND	+ \$ <u>0</u>		
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.

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

I certify that this is a full and true statement. Todd Madson January 30, 2023  
Signature Date

Printed Name Todd Madson Telephone 630.639.9251 Email (if available) \_\_\_\_\_  
 Address 3155 Jamestown Rd, Long Lake, MN 55356

Report

Office

Name

For Office Use Only: