

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 Robert Burns
Office sought by candidate (if applicable) County Comm. District 3
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 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 _____

Robert H Burns

Date _____

1/4/21

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Campaign Information

Name of candidate or committee Robert H Burns
Office sought by candidate (if applicable) Houston County Commissioner
Identification of ballot question (if applicable) N/A

Certification

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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 Robert H Burns

Date 11/15/18

CAMPAIGN FINANCIAL REPORT (Photocopy version)

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Robert H Burns
 Office sought or ballot question County Commissioner District 3
Houston County
 Type of report Candidate report Period of time covered by report:
 Campaign committee report from _____ to _____
 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 \$ _____ 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
8-23-18	J Line Design Vehicle Signage	90 ⁰⁰
9-7-18	LAXPrint Yard Signs (15)	221 ⁰⁰
10-5-18	You Betcha Shoppes Yard Signs (12)	194 ⁴⁵
10-23-18	Caledonia Argus Campaign Ad	73 ⁸⁰
	TOTAL	579⁸⁰

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. Robert H. Burns 11/14/18
 Signature Date

Printed Name Robert H Burns Telephone 507 725 2823 Email (if available) bbmbfamily@gmail.com
 Address 405 W Adams St., Caledonia Mn 55921

Report

Office

For Office Use Only: Name

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Campaign Information

Name of candidate or committee Robert H Burns

Office sought by candidate (if applicable) Houston County Commissioner

Identification of ballot question (if applicable) N/A

Certification

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Signature of candidate or committee treasurer Robert H Burns

Date 2/19/19

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Campaign Information

Name of candidate or committee Bruce G. Fulman
Office sought by candidate (if applicable) County Commissioner
Identification of ballot question (if applicable) _____

Certification

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Signature of candidate or committee treasurer 

Date 3/22/19