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 <u>211A.02</u> 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 <u>211A.05</u>, <u>subdivision 1</u>).

Campaign Information
Name of candidate or committee Robert Burn 5
Office sought by candidate (if applicable) County Comm District
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 $\frac{1.1421}{1.1421}$

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<u>Campaign Information</u>
Name of candidate or committee Robert H Burns Office sought by candidate (if applicable) Houston County Commissioner Identification of ballot question (if applicable) MA
Office sought by candidate (if applicable) Houston County Commissioner
Identification of ballot question (if applicable) $\frac{N/\hbar}{}$
,
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 N Burns
Date 11/15/18

CAMPAIGN FINANCIAL REPORT (Photocopy version)

CAMPAIGN FINANCIAL REPORT

Name of candid	ate, committee or corporation <u>*</u>			
Office sought or	balliot question County C	OMMISSIONAL DES	trict 3	
Type of	Candidate repo	ouston County	od of time covers	ad has roman
report	Campaign com		De an maine posent	m of school
•		corporation report	1 to	
	Final report	BB 249 /8		***************************************
Malacanasa				
		RIBUTIONS RECEIVED		
Give the total for a or in-kindl eather t	If contributions received during the peri han contributor. See note on contribution	od of time covered by this report. Con unlimits on the back of this form. He a	tributions should b	e listed by ty
from a single source	ce that exceeded \$100 during the calend	iar year. This itemization must include	name, address, en	ubjoket ot or neurse an co
self-employed, am	count and date for these contributions.			
CASH	\$	TOTAL CASH-ON-H	AMD \$	
IN-KIND	* \$			
TOTAL AMOUNT	RECEIVED			
	\$ <u></u>			
		DISBURSEMENTS		
Include the amou	ent, date and purpose for all disburs		ftime covered by	report.
Attach additiona	sheets if necessary.		•	•
Date		Purpose		Amount
8-22-18	J Line Design	Vehicle Signage		900
9-7-18	LAXPOINT	Yard Signs (15))	22155
10-5-18	You Betche Shopp	& YArd 8,505 (12))	1944
10-23-18	CALEDONIA Argus	CAMPAIGN Ad		7385
		1 0	TOTAL S	579 85
				· / /
	CORPORAT	E PROJECT EXPENDITURES		
Corporations mus	st list any media project or corporate	message project for which contrib	aution(s) or expe	nditure(s) to
	it a separate report for each project			* * *
Project title or de	scription			
Date	Purpose	Name and Address	Exp	enditure o
		of Recipient		ntribution
				Amount
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	s a full and true statement. 166	ert H. Burns		10
certify that this i	- I	6/2	/	
certify that this i		Signature phone <u>,507 72<i>5</i> 2823</u> Emai	Date / /	/ / _

CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING Instructions

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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) NA
Certification
Select the appropriate choice below, and sign:
I do swear (or affirm) that all campaign financial reports required to date by Minnesota Statutes <u>211A.02</u> have been submitted to the filing officer.
l do swear (or affirm) that campaign contributions or disbursements did not exceed \$750 in the calendar year.
Signature of candidate or committee treasurer Robert & Burns Date 2/19/19

CAMPAIGN FINANCIAL REPORT (Photocopy version)

CAMPAIGN FINANCIAL REPORT

(All of the information in this report is public information) Name of candidate, committee or corporation Office sought or ballot question Period of time covered by report: Candidate report Type of Campaign committee report report from 11/7/18 to 2/12/19 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. TOTAL CASH-ON-HAND CASH 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. Amount Date Add - Caledonia Argus 1-10-19 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 Expenditure or Name and Address Purpose Date Contribution of Recipient *Amount* Marrie TOTAL For Office Use Only: I certify that this is a full and true statement. Mn <5921 Email (if available) burns beb 1952

Ogmail Cum DUYNS Telephone 567

CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING Instructions

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<u>Campaign Information</u>
Name of candidate or committee Take & Sulman
Office sought by candidate (if applicable) County Commissioner
Identification of ballot question (if applicable)
Certification
Select the appropriate choice below, and sign:
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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
Date 3/22/19