

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 MARK CHAD
Office sought by candidate (if applicable) TOWN SUPERVISOR
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 11-7-18

Office of the Minnesota Secretary of State

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Campaign Information

Name of candidate or committee

David Odus

Office sought by candidate (if applicable)

Superior

Identification of ballot question (if applicable)

Certification

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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

11-9-2018 David Odus

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Campaign Information

Name of candidate or committee *LEE D. BRANNVILLE*

Office sought by candidate (if applicable) *SUPERVISOR*

Identification of ballot question (if applicable)

Certification

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Signature of candidate or committee treasurer



Date

11/9/2018

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Campaign Information

Name of candidate or committee *Richard Sather*
Office sought by candidate (if applicable) *Township supervisor*
Identification of ballot question (if applicable)

Certification

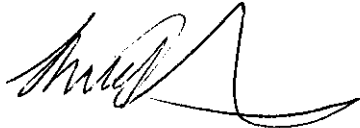
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Signature of candidate or committee treasurer

Date *11-9-18*



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Campaign Information

Name of candidate or committee *Heidi M. Coldagelli*
Office sought by candidate (if applicable) *Clerk/Treasurer*
Identification of ballot question (if applicable)

Certification

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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 *Heidi M. Coldagelli*
Date *11-8-2018*