

CAMPAIGN FINANCIAL REPORT
CERTIFICATION OF FILING

Each county, municipal or school district level 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 no later than seven days after the general or special election. (Minnesota Statutes 211A.05, subdivision 1).

Name of candidate or committee Brycen Christensen

Office sought by candidate School Board
(if applicable)

or

Identification of ballot question _____ (if applicable)

Check appropriate box below:

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 campaign contributions or disbursements did not exceed \$750 in the calendar year.

Brycen Christensen
(Signature of candidate or committee treasurer)

11-21-16
(Date)

Telephone 507-766-4671

Email, if available bcagboy@gmail.com

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Name of candidate or committee Joseph Sullivan

Office sought by candidate School Board
(if applicable)

or

Identification of ballot question _____ (if applicable)

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I do swear (or affirm) that campaign contributions or disbursements did not exceed \$750 in the calendar year.

[Signature]
(Signature of candidate or committee treasurer)

11-15-2006
(Date)

Telephone 320-212-3406

Email, if available j.sully19@vetmed.wisc.edu

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Name of candidate or committee Angie Lemming

Office sought by candidate School Board
(if applicable)

or

Identification of ballot question _____ (if applicable)

Check appropriate box below:

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I do swear (or affirm) that campaign contributions or disbursements did not exceed \$750 in the calendar year.

Angie Lemming
(Signature of candidate or committee treasurer)

(Date)

Telephone _____

Email, if available _____

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Name of candidate or committee TIM SANDGREN

Office sought by candidate SCHOOL BOARD
(if applicable)

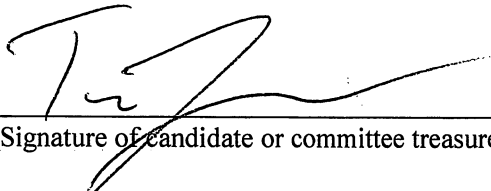
or

Identification of ballot question _____ (if applicable)

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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)

11/15/16
(Date)

Telephone 509 557 8873

Email, if available _____

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Name of candidate or committee ASH HERBEL

Office sought by candidate SCHOOL BOARD
(if applicable)

or

Identification of ballot question _____ (if applicable)

Check appropriate box below:

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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)

13 NOV 2018

(Date)

Telephone 513-289-3409

Email, if available AHERBEL@CEDARMT.ORG

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Name of candidate or committee DOUG MATHROWETZ

Office sought by candidate SCHOOL BOARD
(if applicable)

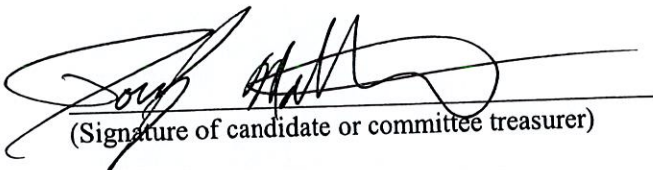
or

Identification of ballot question _____ (if applicable)

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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)

11-13-18
(Date)

Telephone 507-430-0989

Email, if available DMATHROWETZ@CBOARMT.ORG

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Name of candidate or committee JENNIFER ROSE

Office sought by candidate SCHOOL BOARD
(if applicable)

or

Identification of ballot question _____ (if applicable)

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I do swear (or affirm) that campaign contributions or disbursements did not exceed \$750 in the calendar year.

Jennifer Rose
(Signature of candidate or committee treasurer)

11-13-18
(Date)

Telephone 507-276-2164

Email, if available JROSE@CEDARMT.ORG