

## 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 GREG OLSON  
Office sought by candidate (if applicable) COUNTY COMMISSIONER DIST # 4  
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 campaign contributions or disbursements did not exceed \$750 in the calendar year.

Signature of candidate or committee treasurer Derek Johnson  
Date 12/1/16

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation GREG (SKIP) OLSON

Office sought or ballot question COUNTY COMMISSIONER District #4

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

Period of time covered by report:  
 from 10/29/16 to 12/1/16

## 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
11/3/16	Facebook - Advertising	75.17
11/11/16	Fasty Prints - Brochures	513.32
11/9/16	Facebook - Advertising	202.58
<b>TOTAL</b>		<b>791.07</b>

## 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
<b>TOTAL</b>			

I certify that this is a full and true statement. Darla Grover 12/1/16  
 Signature Date

Printed Name DARLA GROVER Telephone 507-429-7628 Email (if available) \_\_\_\_\_  
 Address 116 W 2<sup>ND</sup> ST WINONA MN 55987

Report

Office

For Office Use Only: Name

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Greg (Skip) Olson

Office sought or ballot question County Commissioner District 4

Type of report 2 Candidate report  
 Campaign committee report  
 Association or corporation report  
 Final report

Period of time covered by report:  
 from 01-01-16 to 10-28-16

## 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
10-14-16	T-Shirts - Parade	127.57
10-13-16	Candy - Parade	57.52
	<b>TOTAL</b>	<b>185.09</b>

## 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
		<b>TOTAL</b>	

I certify that this is a full and true statement. [Signature] 10/28/16  
 Signature Date

Printed Name Greg Olson Telephone 507-450-9819 Email (if available) golson@hbcic.com  
 Address 216 Grand Winona MN 55987

Report

Office

Name

For Office Use Only: