

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Jim Uttermerck  
 Office sought or ballot question Maya County Commission District 3

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

Period of time covered by report:  
 from Aug 15 to Nov 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 \$ 300.00 TOTAL CASH-ON-HAND \$ 0.00  
 IN-KIND + \$ \_\_\_\_\_  
 TOTAL AMOUNT RECEIVED = \$ 300.00

## 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
9/6	CAMPAIGN SIGNS	500.00
	Registered voter list	35.00
10/14	PHOTO PRESS ADS	1341.00
	<b>TOTAL</b>	<b>1,876.00</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. \_\_\_\_\_ 11/10/16

Signature Date

Printed Name Jim Uttermerck Telephone 507-236-3942 Email (if available) \_\_\_\_\_

Address 117 Lake Anne Place Forest MN 55051

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 Kathy A. Smith

Office sought or ballot question County Commissioner District Three

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

Period of time covered by report: from 8/15/16 to 11/1/16

## 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 \$ 2523.00 TOTAL CASH-ON-HAND \$ 56.45  
 IN-KIND + \$ 0.00  
 TOTAL AMOUNT RECEIVED = \$ 2523.00

## 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
9/1/16	Advertising - Brochures	583.36
9/2/16	" - Labels	209.65
9/5/16	" - Brochure	100.00
10/11/16	"	118.50
10/11/16	"	249.15
10/14/16	" - Sentinel	270.00
10/25/16	" - Brochures + Signs	337.14
10/27/16	" - Photo Press	598.15
<b>TOTAL</b>		<u>2466.55</u>

\$ 2466.55

## 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. Kathy A. Smith 11/15/2016  
 Signature Date

Printed Name Kathy A. Smith Telephone 507-236-3489 Email (if available) Kathyannsmith047@gmail.com  
 Address 529 Budd Lake Drive, Fairmont, MN 56031

Report Office Name For Office Use Only:

# CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Steven O. Flohrs

Office sought or ballot question Commissioner District 5

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

Period of time covered by report:

from 1/1/16 to 12/31/16

## 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 \$ 100 TOTAL CASH-ON-HAND \$ \_\_\_\_\_  
 IN-KIND + \$ \_\_\_\_\_  
 TOTAL AMOUNT RECEIVED = \$ 100

## 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
5/16/16	Martin Co. Aud.	50.00
8/26/16	Fetts	443.44
11/15/16	Sentinel	90.00
<b>TOTAL</b>		<b>583.44</b>

## CORPORATE PROJECT EXPENDITURES

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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. Steven O. Flohrs 12/21/16  
 Signature Date

Printed Name Steven O. Flohrs Telephone 507-236-5885 Email (if available) steve.flohrs@co.martin  
 Address 1086 220th St Ormsby, Mo 66162 .MN, US.

Report

Office

For Office Use Only: Name