

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

from 9.22.20 to 10.23.20

Address 8688 Jamaca Av N, Grant MN 55082

For Office Use Only:

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:

Tom Carr

Office sought by candidate (if applicable):

Grant City Council

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:

10-13-2020

CAMPAIGN FINANCIAL REPORT (Photocopy version)

Received
10/19/20

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Wayne Sarappo
Office sought or holder of office Grant City Council District

Type of report: Candidate report
 Campaign committee report
 Association or corporation report
 Final report
Period of time covered by report
from 01/01/20 to 10/16/2020

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 exceeds \$100 during the calendar year. This itemization must include name, address, employer or occupation if self-employed, amount and date for these contributions.

CASH \$ 0 TOTAL CASH-ON-HAND \$ 0
IN-KIND \$ 0
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
10/11/2020	Campaign signs	\$1,064.09
	TOTAL	\$1,064.09

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.

Date	Purpose	Name and Address of Recipient	Expenditure or Contribution Amount
		TOTAL	0

I certify that this is a full and true statement.

Wayne Sarappo
Signature

10/16/2020
Date

Printed Name Wayne Sarappo

Telephone (651) 653-0192

Email (if available)

Address 8770 105th St. N, Mahomed, MN 55115 wayne.sarappo@gmail.com

CAMPAIGN FINANCIAL REPORT (Photocopy version)

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation ALL AROUND GRANT

Office sought or ballot question local ballot District

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

Period of time covered by report:
 from 10/1/20 to 11/4/20

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
11/3/20	Voting Guide	1336 ¹² / ₁₀₀
	TOTAL	1336 ¹² / ₁₀₀

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
11/3/20	Voters Guide	Local Residents	1336 ¹²/₁₀₀
11/3/20	Voters Guide	Local Residents	1336 ¹² / ₁₀₀
		TOTAL	

I certify that this is a full and true statement.

Signature Loren Sederstrom

Date 11/5/20

Printed Name Loren Sederstrom

Telephone 651-653-4442

Email (if available)

Address 9330 107th St N, Stillwater MN 55082

CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING

Instructions

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Campaign Information

Name of candidate or committee Wayne F. Sarappo

Office sought by candidate (if applicable) City Council, Grant, MN

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 Wayne F. Sarappo

Date November 9, 2020

Office of the Minnesota Secretary of State

CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING

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Campaign Information

Name of candidate or committee:

Jeff Schafer

Office sought by candidate (if applicable):

Grant, MN City Council

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:

Jeffrey M. Schafer

Date:

11-8-2020

For Office Use Only:

Address 8688 Jamaca Av N. Grant MN 55082

CAMPAIGN FINANCIAL REPORT (Photocopy version)

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Larry Lanoix
Office sought or ballot question M2400 District 39 B

Type of report X Candidate report
____ Campaign committee report
____ Association or corporation report
____ Final report
Period of time covered by report:
from _____ to _____

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 \$ 0
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
Sept 15 20	Labels	74.00
	TOTAL	74.00

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
		TOTAL	

I certify that this is a full and true statement.

Signature

Date

Printed Name

Address

Larry Lanoix

Telephone 651-485-7574 Email (if available) _____

9711 Meswick AVE Stillwater MN 55082

CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING

Instructions

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Campaign Information

Name of candidate or committee Larry Lanoux
Office sought by candidate (if applicable) Mayor City of Gurnee, IL
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

Larry Lanoux

Date 11-10-20

CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING

Instructions

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Campaign Information

Name of candidate or committee Jeff Huber

Office sought by candidate (if applicable) Mayor of Grant

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 

Date 9-2-20

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

from 8-8-20 to 9-8-20

\$ _____

Date	Purpose	Amount
9/8/2020	Sigma with tax	
	TOTAL	760.59

<i>Date</i>	<i>Purpose</i>	<i>Name and Address of Recipient</i>	<i>Expenditure or Contribution Amount</i>
		Total	

4600 Keswick Ave, NST, LL Water, MN 55082

For Office Use Only:

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Type of report X Candidate report
 _____ Campaign committee report
 _____ Association or corporation report
 _____ Final report

Period of time covered by report:
 from 9-1-20 to 9-21-20

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.

Include the amount, date and purpose for all disbursements made during the period of time covered by report. Attach additional sheets if necessary.

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.

Printed Name Jeff Schafer Telephone 6516530743 Email (if available) _____
Address 8688 Jamaca Av N. Grant MN 55082