Office of the Minnesota Secretary of State

CAMPAIGN FINANCIAL REPORT CERTIFICATION OF FILING

Instructions

Campaign Information

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).

Name of candidate or committee	Day Backer
Name of candidate or committee Office sought by candidate (if applicable)(County Commissioner
Identification of ballot question (if applicable)	
Certification	
Select the appropriate choice below, and sign:	
I do swear (or affirm) that all campa $211A.02$ have been submitted to the	aign financial reports required by Minnesota Statutes e filing officer.
I do swear (or affirm) that campaign \$750 in the calendar year.	n contributions or disbursements did not exceed
Signature of candidate or committee treasurer	Bee
Date (1/1 0/14	

CAMPAIGN FINANCIAL REPORT

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

THE SOUGHT OF DAIL	ot question	Countr	Jay Backer Commissioner Distr	rict	1
	ot question	-oun.y	Distr		
Type of		_ Candidate repo		d of time	covered by report:
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0			corporation report from	Suno'r	1 to Nov 14
-		_ Final report			
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Give the total for all o	contributions red	ceived during the	period of time covered by this report.	Contribu	itions should be listed by t
money or in-kind) rat	her than contrib	utor. See note or	contribution limits on the back of this	form. Use	a separate sheet to itemize
contributions from a s	ingle source tha	t exceeded \$100 c	uring the calendar year. This itemizatio	n must inc	clude name, address, emplo
or occupation if self-er	nployed, amoun	t and date for the			x -
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N-KIND	+	\$			
TOTAL AMOUNT RE	CEIVED -	· -			
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			EXPENDITURES		
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Attach additional sh	eets if necessa	ry.			
Date			Purpose		Amount
6/3/14	Filing	Foe			30.00
10/30/14	Printing	is Mailine	7		989.92
117/14	Adver	Hising	7		62.40
		J			
				TOTAL	402.32
		CORPORA	TE PROJECT EXPENDITURES		
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Corporations must	list any media	project or corp	orate message project for which con project. Attach additional sheets	if necessa	arv.
			Project. Attach additional sheets	II IICCCSSC	
Project title or desc	ription				
Date	P	urpose	Name and Address		Expenditure or
			of Recipient		Contribution
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		1		TOTAL	
		AND THE RESIDENCE OF THE PARTY			
certify that this is	a full and true	statement.	Ausee		11/10/14
I certify that this is	a full and true :	statement.	Signature		11/10/14 Date
Certify that this is	a full and true:	statement.	Signature Selephone 605-860-1417 Em Cracov: llo MN	ail (if ava	Date backers pr

Fo. Jice Use Only Name