

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation BRADLEY A. ANDERSON
 Office sought or ballot question GO. CO. COMMISSIONER District 2

Type of report X Candidate report Period of time covered by report:
 _____ Campaign committee report
 _____ Association or corporation report from 6-5-14 to 7-14-14
 _____ Final report

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

EXPENDITURES

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

Date	Purpose	Amount
6-30-14	WRITE ON SHIRTS	211.40
6-15-14	CANNON VALLEY FAIR PARADE REG.	50.00
7-2-14	WRITE ON SIGNS	782.86
7-2-14	CANNON FALLS BEACON TRADE LITERATURE	979.77
TOTAL		2023.03

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. BRAD ANDERSON 7-14-14
 Signature Date

Printed Name BRADLEY ANDERSON Telephone 651-308-7809 Email (if available) BRAD.ANDERSON@OUTLOOK.COM
 Address 10679 375TH ST. WAY CANNON FALLS MN 55009

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 BRADLEY A. ANDERSON

Office sought or ballot question GOULDFREE CO. COMMISSIONER District 2

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

Period of time covered by report:

from 7-5-14 to 8-2-14

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 \$ 95.00 TOTAL CASH-ON-HAND \$ 95.00
 IN-KIND + \$ _____
 TOTAL AMOUNT RECEIVED = \$ 95.00

EXPENDITURES

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

Date	Purpose	Amount
7-22-14	WRITE ON SIGNS	114.89
7-28-14	WRITE ON SIGNS	229.78
8-1-14	BALCON - CANNON FALLS NOTE PADS	191.31
8-31-14	BALCON AD	120.25
TOTAL		656.03

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. Bradley Anderson 8-2-14
 Signature Date

Printed Name BRADLEY ANDERSON Telephone 651-308-7829 Email (if available) BRADAND@SUNCFR.COM
 Address 10679 375TH ST. WAY CANNON FALLS MN 55009 OUTLOOK.COM

Report Office Name 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: BRADLEY ANDERSON
Office sought by candidate (if applicable): COUNTY COMMISSIONER DIST. 2
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: [Signature]
Date: 11-20-14

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation BRADLEY ANDERSON

Office sought or ballot question Goodhue Co. Commissioner District 2

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

Period of time covered by report:
 from 10/24/14 to 12/2/14

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 = \$ _____

EXPENDITURES

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

Date	Purpose	Amount
11-4	Beacon AD + POSTCARD CAMPAIGN CODE	738.21
	WEB PAGE	203.00
12-1	Beacon THANK YOU AD	123.75
	TOTAL	1065.96

CORPORATE PROJECT EXPENDITURES

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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. Bradley Anderson 12-2-14
 Signature Date

Printed Name BRADLEY ANDERSON Telephone 651-758-4462 Email (if available) _____

Address 10679 375TH ST. WAY CAHONN FALLS MN 55009

Report Office Name For Office Use Only: