

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation TODD HOWARD HAY

Office sought or ballot question CHAPEWA COUNTY COMMISSIONER-District 5

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

Period of time covered by report:

from 6/1/14 to 10/3/14

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 \$ 350.00 TOTAL CASH-ON-HAND \$ -0-
 IN-KIND + \$ 50.00
 TOTAL AMOUNT RECEIVED = \$ 400.00

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
9/18	NEWSPAPER AD	\$97.25
9/24	NEWSPAPER AD	\$583.50
10/2	NEWSPAPER AD	\$206.50
TOTAL		\$887.25

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. T. H. Hay 3 OCT 14
 Signature Date

Printed Name TODD HOWARD HAY Telephone 320-226-5865 Email (if available) thay2244@charter.net

Address 118 BUCKEYE DRIVE, MONTEVIDEO, MN 56265

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 Todd Howard Hay

Office sought or ballot question Chippewa County Commissioner District 5

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

Period of time covered by report:
 from 10/03/2014 to 10/31/2014

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 \$ 460.00 TOTAL CASH-ON-HAND \$ 0
 IN-KIND + \$ 0
 TOTAL AMOUNT RECEIVED = \$ 460.00

DISBURSEMENTS

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

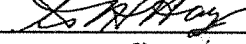
Date	Purpose	Amount
10/03/2014	BANNERS on the CHEAP	\$ 107.58
10/06/2014	D. C. SIGNS, INC.	\$ 172.07
10/28/2014	KDMA/KMGM/KKRC RADIO	\$ 449.28
TOTAL		\$ 728.93

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.  10/31/2014
 Signature Date

Printed Name Todd Howard Hay Telephone (320) 226-5865 Email (if available) thay2244@charter.net
 Address 118 Buckeye Drive, Montevideo, MN 56265

Report
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CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Todd Howard Hay

Office sought or ballot question Chippewa County Commissioner District 5

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

Period of time covered by report:
 from 10/31/2014 to 11/12/2014

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 \$ 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
11/12/2014	MONTEVIDEO AMERICAN NEWS	\$ 42.50
	TOTAL	\$ 42.50

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.  11/12/2014
 Signature Date

Printed Name Todd Howard Hay Telephone (320) 226-5865 Email (if available) thay2244@charter.net
 Address 118 Buckeye Drive, Montevideo, MN 56265

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