

Campaign Finance and Public Disclosure Board



Suite 190 - Centennial Office Building - 658 Cedar Street - St. Paul MN 55155-1603 - www.cfboard.state.mn.us
Email: cf.board@state.mn.us

12/1/10 AM 9:5

Report of Receipts and Expenditures

Principal Campaign Committee

Period Covered: January 1 through December 31, 2011

REPORT DUE DATE IS January 31, 2012

FILING INSTRUCTIONS

- This report may be emailed to cf.board@state.mn.us or faxed to (651) 296-1722 or (800) 357-4114
- All information on this report is public information and may be published on the Board's website at www.cfboard.state.mn.us
- It is unlawful to use this information for commercial purposes.
- Board staff may be reached by phone at (651) 296-5148 or (800) 657-3889 or by email at cf.board@state.mn.us

COMMITTEE INFORMATION

Committee name Citizens for Ernie Leidiger		Registration number 17163
Candidate name Ernie Leidiger		Candidate email address ernie@leidiger.com
Treasurer name Steven Nielsen		Treasurer email address sandbnielsen@earthlink.net
Treasurer address 1202 Hickory Cir		
Treasurer city, state, zip Waconia, MN 55387		Treasurer telephone (optional) 952-442-8678

REPORT OPTION

Check one of the report option boxes below *only if applicable* and provide the requested information.

No change statement

Check this box only if your committee received *no* contributions and made *no* expenditures since your last reporting period. Do not use this statement if there was any monetary change. If there was no change:

Provide the current cash balance: \$ _____, and sign here

I, the treasurer deputy treasurer, or candidate (check one) _____ Date _____
certify there has been no change and that this report is complete, true and correct.

Amendment

Check this box if your committee is filing this report to amend a report previously filed report.

Provide date of the report being amended: _____

Termination

Check this box if your committee has dissolved. Do not check this box unless the committee has settled all its debts and disposed all its assets in excess of \$100.

This document is available in alternative formats to individuals with disabilities by calling (651)296-5148 or (800)657-3889; or through the Minnesota Relay Service at (800)627-3529.

For office use only		
<input type="checkbox"/> Checked in	<input type="checkbox"/> Scanned	<input type="checkbox"/> Data entered

COMMITTEE TRANSACTION SUMMARY

1	Beginning cash balance 1/1/11 (Should be the same as the 12/31/10 ending cash balance)	\$66.94
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A RECEIPTS:			Cash (Col. 1)	Blank (Col. 2)	In-kind (Col. 3)	Total (Col. 4)
2	Individual contributions	Sch. A1 - IND	\$ 5,229. ⁵⁰		\$	\$ 5,229. ⁵⁰
3	Lobbyist contributions	Sch. A1 - LOB	\$ 200. ⁰⁰		\$	\$ 200. ⁰⁰
4	Political committee and political fund contributions	Sch. A1 - PCF	\$ 100. ⁰⁰		\$	\$ 100. ⁰⁰
5	Political party & terminating principal campaign committee contributions	Sch. A1 - PTY/TERM PCC	\$ 0		\$	\$ 0
6	Other contributions	Sch. A1 - OTH	\$ 0		\$	\$ 0
7	Receipts from loans payable	Sch. A2 - LP	\$ 0		\$	\$ 0
8	Miscellaneous income	Sch. A2 - MISC	\$ 0		\$	\$ 0
9	TOTAL RECEIPTS	Sum #2 to #8	\$5,529.⁵⁰		\$	\$5,529.⁵⁰

B DISBURSEMENTS:			Cash (Col. 1)	Unpaid bills (Col. 2)	In-kind (Col. 3)	Total Col. 4)
10	Campaign expenditures	Sch. B1 - CE	\$ 525. ⁰⁰	\$	\$	\$ 525. ⁰⁰
11	State ballot question expenditures (Not local referendums)	Sch. B1 - BQ	\$ 0	\$	\$	\$ 0
12	TOTAL CAMPAIGN EXPENDITURES	Sum #10 to #11	\$ 525.⁰⁰	\$	\$	\$ 525.⁰⁰
13	Noncampaign disbursements	Sch. B1-NCD	\$ 3,863. ²⁴	\$	\$	\$ 3,863. ²⁴
14	Contributions to other principal campaign committees	Sch. B2 - PCC	\$ 0		\$	\$ 0
15	Contributions to political parties	Sch. B2 - PTY	\$ 275. ⁰⁰		\$	\$ 275. ⁰⁰
16	Contributions to political committees and political funds	Sch. B2 -PCF	\$ 0		\$	\$ 0
17	Other disbursements	Sch B3	\$ 0	\$	\$	\$ 0
18	TOTAL EXPENDITURES AND DISBURSEMENTS	Sum #12 to #17	\$ 4,663.²⁴	\$	\$	\$4663.²⁴
19	Ending cash balance at 12/31/2011	#1 + #9 - #18	\$ 933. ²⁰			

NOTES, LOANS, and UNPAID BILLS SUMMARY

1	Notes or loans payable	Sch. C - Col. 1	\$
2	Unpaid bills	Sch. D - Col. 1	\$
3	TOTAL AMOUNT OUTSTANDING	Sum #1 to #2	\$

CERTIFICATION

I, STEVE NIELSEN certify that this report is complete, true, and correct.
 (Print or type name)

Steve Nielsen
 Signature of candidate treasurer deputy treasurer (check one)

1-30-2012
 Date

17163
 Registration #

Any person who signs and certifies to be true a report or statement which the person knows contains false information, or who knowingly omits required information, is subject to a civil penalty imposed by the Board of up to \$3,000 and is subject to criminal prosecution for a gross misdemeanor.

SCHEDULE A1 - IND - CONTRIBUTIONS FROM INDIVIDUALS

Make photocopies of this page if additional space is needed.

Date received	Name and full address of contributor Name of employer (if self-employed, list "self" & disclose the occupation)	Col. 1 Cash	Col. 2 In-kind (list item and fair market value)	Col. 3 Total (cash & in-kind)
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
		\$	\$	\$
Total of non-itemized receipts		\$ 529. ⁰⁰	\$	\$ 529. ⁰⁰
TOTALS		\$ 529. ⁰⁰	\$	\$ 529. ⁰⁰
		To pg. 3, line 2, col. 1	To pg. 3, line 2, col. 3	To pg. 3, line 2, col. 4

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SCHEDULE A1 - LOB - CONTRIBUTIONS FROM LOBBYISTS

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Date received	Lobbyist registration number	Name and full address of lobbyist Name of employer (if self-employed, list "self" & disclose the occupation)	Col. 1 Cash	Col. 2 In-kind (list item and fair market value)	Col. 3 Total (cash & in-kind)
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
Total of non-itemized receipts			\$ 200.00	\$	\$ 200.00
TOTALS			\$ 200.00	\$	\$ 200.00
			To pg. 3, line 3, col. 1	To pg. 3, line 3, col. 3	To pg. 3, line 3, col. 4

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SCHEDULE A1 - PCF - Contributions from Political Committees and Political Funds

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Date received	Comm./fund registration number	Name and full address of political committee or political fund	Col. 1 Cash	Col. 2 In-kind (list item and fair market value)	Col. 3 Total (cash & in-kind)
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
Total of non-itemized receipts			\$ <u>100.00</u>	\$	\$ <u>100.00</u>
TOTALS			\$ <u>100.00</u>	\$	\$ <u>100.00</u>
			To pg. 3, line 4, col. 1	To pg. 3, line 4, col. 3	To pg. 3, line 4, col. 4

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SCHEDULE B1 - CE - Campaign Expenditures

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Date	Name and full address of payee	Specific purpose of expenditure (e.g. flyers for fund raiser)	Col. 1 Cash	Col. 2 Unpaid bills	Col. 3 In-kind (list item & fair market value)	Col. 4 Total
2-18-11	Corporate Graphics Int'l. PO Box 8964 Northbrook, MN 56003	Printings of stationery and envelopes	\$180.65	\$	\$	\$180.65
			\$	\$	\$	\$
			\$	\$	\$	\$
			\$	\$	\$	\$
			\$	\$	\$	\$
			\$	\$	\$	\$
			\$	\$	\$	\$
Total of non-itemized expenditures/deductions			\$ 344.35	\$	\$	\$ 344.35
TOTALS			\$ 525.00	\$	\$	\$ 525.00
			To pg. 3, line 10, col. 1	To pg. 3, line 10, col. 2	To pg. 3, line 10, col. 3	To pg. 3, line 10, col. 4

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SCHEDULE B1 - NCD - Noncampaign Disbursements

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Date	Name and full address of payee	Specific purpose and number of disbursement (definition list, page 30)	Col. 1 Cash	Col. 2 Unpaid bills	Col. 3 In-kind (list item & fair market value)	Col. 4 Total
7-1-11	Hennepin County 7009 York Ave So. Edina, MN 557435	Transportation	\$ 178.00	\$ -	\$ -	\$ 178.00
6-11-11	Kahl, Jerry 9225 Hackney Dr Cologne, MN 55322	Band for Fundraiser	\$ 225.00	\$ -	\$ -	\$ 225.00
12-30-11	Ladison, Eunice 7770 Tacoma Ave Mayou, MN 55360	Roper loan	\$ 1453.49	\$ -	\$ -	\$ 1453.49
6-11-11	Nielsen, Steve 1202 Hickory Circle Waconia, MN 55387	Reimburse for Fundraiser expenses	\$ 604.76	\$ -	\$ -	\$ 604.76
		Printing for fundraiser Franklin Printing 2571st St West Waconia, MN 55387	(\$ 207.96 - Memo)	\$ -	\$ -	\$ -
		Postage for fundraiser Postmaster for Waconia Post Office Waconia, MN 55387	\$ 696.80	Memo	\$ -	\$ -
6-11-11	Sun Patriot Newspapers 8 Elm St S. Waconia, MN 55387	Advertising for fundraiser	\$ 102.89	\$ -	\$ -	\$ 102.89
Total of non-itemized expenditures/disbursements			\$	\$	\$	\$
TOTALS			\$	\$	\$	\$
			To pg. 3, line 13, col. 1	To pg. 3, line 13, col. 2	To pg. 3, line 13, col. 3	To pg. 3, line 13, col. 4

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SCHEDULE B1 - NCD - Noncampaign Disbursements

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Date	Name and full address of payee	Specific purpose and number of disbursement (definition list, page 30)	Col. 1 Cash	Col. 2 Unpaid bills	Col. 3 In-kind (list item & fair market value)	Col. 4 Total
6-28-11	Sun Patriot Newspapers 8 Elm St S. Waconia, MN 55387	Annual subscription	\$16,199	\$	\$	\$16,199
6-11-11	Walters, Tim 11520 Knowlton Lane Cologne, MN 55302	Reimbursement for Supra-sonford expense Esco Foods 710 Fayer Rd N. Newport Youngs America MN 55368	\$37,245	\$	\$	\$37,245
			\$	\$	\$	
			\$	\$	\$	
			\$	\$	\$	
			\$	\$	\$	
			\$	\$	\$	
			\$	\$	\$	
Total of non-itemized expenditures/disbursements			\$ 759,666	\$	\$	\$ 759,666
TOTALS			\$ 386,724	\$	\$	\$ 386,724
			To pg. 3, line 13, col. 1	To pg. 3, line 13, col. 2	To pg. 3, line 13, col. 3	To pg. 3, line 13, col. 4

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SCHEDULE B2 – PCC – Contributions to Other Principal Campaign Committees

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Date	Committee registration number	Name and full address recipient (for approved expenditure; also list name and full address of vendor paid)	Col. 1 Cash	Col. 2 In-kind (list item & fair market value)	Col. 3 Total
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
Total of non-itemized expenditures/disbursements			\$	\$	\$
TOTALS			\$	\$	\$
			To pg. 3, line 14, col. 1	To pg. 3, line 14, col. 3	To pg. 3, line 14, col. 4

SCHEDULE B2 – PTY – Contributions to Political Party Units

Date	Committee registration number	Name and full address recipient (for approved expenditure; also list name and full address of vendor paid)	Col. 1 Cash	Col. 2 In-kind (list item & fair market value)	Col. 3 Total
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
	#		\$	\$	\$
Total of non-itemized Expenditures/disbursements			\$ 275. ⁰⁰	\$	\$ 275. ⁰⁰
TOTALS			\$ 275. ⁰⁰	\$	\$ 275. ⁰⁰
			To pg. 3, line 15, col. 1	To pg. 3, line 15, col. 3	To pg. 3, line 15, col. 4

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