

CAMPAIGN FINANCIAL REPORT

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

Name of candidate, committee or corporation Fred Arnold
 Office sought or ballot question Houston Co. Commis^{10th} District 5

Type of report: Candidate report Period of time covered by report:
 Campaign committee report
 Association or corporation report
 Final report
 from 1-1-16 to 10-28-16

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 \$ 90.00 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. Fr. other side

Date	Purpose	Amount
7-20-16	Advertising N.P. Ads	184.00
8-30-16	" Signs	1384.00
9-12-16	" N.P. Ads	500.00
16	" "	350.00
TOTAL		2818.00

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. Fred R. Arnold 10-28-16
 Signature Date

Printed Name Fred R. Arnold Telephone 512-498-3284 Email (if available) arnold@springgrove
 Address 15283 State 44, Caledonia, MN 55921 1000P

Report
Office
Name
For Office Use Only:

Cont on ~~Reverse~~
Other side

10-16-16 N.P. Ads 200.00
 N.P. Ads " 200.00

Campaign Finance and Public Disclosure Board



Suite 190, Centennial Building, 658 Cedar Street, St. Paul, MN 55155-1603 (651) 539-1180 www.cfboard.state.mn.us

Original Statement of Economic Interest for County Commissioners

(elected on or after January 1, 2014)

Filing Instructions

General instructions for completing the form are on the next page.

- The statement must be received by the Campaign Finance and Public Disclosure Board within 60 days after your first day in office.
- Late fees will accrue for a statement not received by the due date.
- This form may be filed by mail to the address above, by email to cfb.eis@state.mn.us, or by fax to 651-539-1196 or 800-357-4114. Fax filers: Keep the original and a fax confirmation notice as proof of timely filing.
- All information on this statement is public information and may be published on the Board's website.
- It is unlawful to use information filed with the Board for commercial purposes.
- Board staff may be reached by telephone at (651) 539-1184 or (800) 657-3889 or by email at cfb.eis@state.mn.us

Individual Information

Employment Information

Name <i>Fred R. Arnold</i>		Occupation <i>retired</i>
Address at which you wish to receive mail from the Board (You may use either a home or business address) <i>15283 State 44</i>		Name of employer - indicate if self-employed or not employed (include employer as a source of compensation on page 3)
City, state, zip <i>Caledonia, Mn, 55921</i>		Business address (this is the address that will be posted on the Board's website)
Telephone (daytime) <i>507-498-3284</i> <i>C. 507-458-9996</i>		City, state, zip of business
County <i>Houston</i>	District # <i>5</i>	Email Address <i>farnold@springgrove.coop</i>

Certification

I, *Fred Arnold*, (print or type name), certify that the information contained on this form, including information on the schedules on page 3, is complete, true, and correct.

Fred R. Arnold
Signature

11-15-2016
Date

Notice: Any person who signs and certifies to be true a statement which the person knows contains false information or 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.

This document is available in alternative formats to individuals with disabilities by calling 651-539-1180 or 800-657-3889 or through the Minnesota Relay Service at 800-627-3529.

Attach additional pages if necessary to complete any of these schedules.

Sources of Compensation

----- Check each applicable box -----

Name of source	Director	Officer	Owner	Member	Partner	Employer	Employee	Honorarium

Business or Professional Activity Categories

----- Check the applicable box -----

Business or professional activity category	Employee - \$50 in income in a month and owns 25% or more of business	Independent contractor -- more than \$2,500 in compensation

Securities

Name of business in which security is held or name of mutual fund	Name of business in which security is held or name of mutual fund
Eaton Vance	
ING	
Ivy Fund	
Prudential	

Real Property

----- Check one -----

County	Street address and city; or section, township, and range	Own	Mortgage (held as seller)	Contract for deed (as buyer or seller)	Option to buy - option value greater than \$2,500	Option to buy - property value greater than \$50,000	Acreage if applicable
Houston	15784 Gubervd Hill Dr						
	Spring Grove, Mm 55974			buyer			240

Pari-Mutuel Horse Racing Interests

----- Check one -----

	Partial interest	Full interest	Description of interest (horse, stable, etc.)
Official direct interest			
Official indirect interest			
Family interest			

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 Fred R. Arnold
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 campaign financial reports required 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 Fred R. Arnold

Date 11-15-16