

**FEC FORM 3**

**REPORT OF RECEIPTS AND DISBURSEMENTS**  
For An Authorized Committee

SECRETARY OF THE SENATE  
14 FEB -5 AM 10:29  
Office Use Only

12FE4M5

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines.

JULIANNE.MN

ADDRESS (number and street)

P.O. Box 173

Check if different than previously reported. (ACC)

Chaska MN 55318

2. FEC IDENTIFICATION NUMBER

C00548446

CITY

STATE

ZIP CODE

STATE DISTRICT

3. IS THIS REPORT



NEW (N)

OR

AMENDED (A)

MN

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on MM/DD/YYYY

in the State of

(c) 30-Day POST-Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on MM/DD/YYYY

in the State of

5. Covering Period

MM/DD/YYYY 10 01 2013

through

MM/DD/YYYY 12 31 2013

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Charles Erickson

Signature of Treasurer

Charles Erickson

*Charles Erickson*

Date

MM/DD/YYYY 01 30 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office Use Only

FEC FORM 3 (Revised 02/2003)

14020120001

**SUMMARY PAGE**  
of Receipts and Disbursements

Write or Type Committee Name

JULIANNE.MN

Report Covering the Period: From:

M M / D D / Y Y Y Y  
10 / 01 / 2013

To:

M M / D D / Y Y Y Y  
12 / 31 / 2013

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e)).....	114963.63	234429.63
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	0.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	114963.63	234429.63
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	88965.62	120310.52
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	0.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	88965.62	120310.52
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	<b>114119.11</b>	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	<b>0.00</b>	

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

14020120002

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 61

Write or Type Committee Name

JULIANNE.MN

Report Covering the Period: From: 10 / 01 / 2013 To: 12 / 31 / 2013

I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
<b>11. CONTRIBUTIONS (other than loans) FROM:</b>		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	79360.00	178110.00
(ii) Unitemized.....	35603.63	56319.63
(iii) TOTAL of contributions from individuals ▶	114963.63	234429.63
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	114963.63	234429.63
<b>12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES .....</b>	0.00	0.00
<b>13. LOANS:</b>		
(a) Made or Guaranteed by the Candidate.....	0.00	0.00
(b) All Other Loans.....	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b)).....	0.00	0.00
<b>14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.) .....</b>	0.00	0.00
<b>15. OTHER RECEIPTS (Dividends, Interest, etc.).....</b>	0.00	0.00
<b>16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶</b>	114963.63	234429.63

14020120003

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	88965.62	120310.52
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans .....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	0.00
21. OTHER DISBURSEMENTS.....	0.00	0.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	88965.62	120310.52

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	88121.10
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	114963.63
25. SUBTOTAL (add Line 23 and Line 24).....	203084.73
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	88965.62
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	114119.11

14020120004

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 61
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**JULIANNE.MN**

Full Name (Last, First, Middle Initial) <b>Roger Anderson</b>		Date of Receipt MM / DD / YYYY 12 / 15 / 2013
Mailing Address 55 Echo Bay Drive		Transaction ID : NA11A1.7983
City Excelsior	State MN	Zip Code 55331
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer retired	Occupation Retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) <b>William Anderson</b>		Date of Receipt MM / DD / YYYY 11 / 08 / 2013
Mailing Address 333 Texas Street		Transaction ID : NA11A1.7970
City Shreveport	State LA	Zip Code 71101
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 500.00
Name of Employer self employed	Occupation oil and gas	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>Mark &amp; Angelique Anthony</b>		Date of Receipt MM / DD / YYYY 10 / 02 / 2013
Mailing Address 1540 Bridgewater Rd		Transaction ID : NA11A1.7984
City Golden Valley	State MN	Zip Code 55422
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer Information requested	Occupation Information requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1050.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020120005

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 61	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**JULIANNE.MN**

Full Name (Last, First, Middle Initial) <b>Sheri Auclair</b>			Date of Receipt M M / D D / Y Y . Y Y 11 04 2013	
Mailing Address 11650 Cedar Pass			Transaction ID : SA11A1.7989	
City Minnetonka	State MN	Zip Code 55305	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Information requested		Occupation Information requested		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>Kevin Baines</b>			Date of Receipt M M / D D / Y Y . Y Y 12 23 2013	
Mailing Address 457 South Marengo Unit 21			Transaction ID : SA11A1.8052	
City Pasadena	State CA	Zip Code 91101	Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Lopez & Best		Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 275.00		

Full Name (Last, First, Middle Initial) <b>Christian Bame</b>			Date of Receipt M M / D D / Y Y . Y Y 12 17 2013	
Mailing Address 9899 Actra Ave			Transaction ID : SA11A1.7942	
City Monticello	State MN	Zip Code 55362	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Lubo-Tech		Occupation President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3225.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020120006

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 7 OF 61		
	(check only one)	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**JULIANNE.MN**

Full Name (Last, First, Middle Initial) <b>DONALD BARBERIE</b>			Date of Receipt MM / DD / YYYY 11 / 14 / 2013	
Mailing Address <b>PO BOX 7725</b>			Transaction ID : SA11A17998	
City <b>BURBANK</b>	State <b>CA</b>	Zip Code <b>91510</b>	Amount of Each Receipt this Period <b>250.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer <b>olympic insurance agency</b>		Occupation <b>insurance agent</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>250.00</b>		

Full Name (Last, First, Middle Initial) <b>DONALD BARBERIE</b>			Date of Receipt MM / DD / YYYY 11 / 14 / 2013	
Mailing Address <b>PO BOX 7725</b>			Transaction ID : SA11A17999	
City <b>BURBANK</b>	State <b>CA</b>	Zip Code <b>91510</b>	Amount of Each Receipt this Period <b>250.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer <b>olympic insurance agency</b>		Occupation <b>insurance agent</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>500.00</b>		

Full Name (Last, First, Middle Initial) <b>William Hatchelder</b>			Date of Receipt MM / DD / YYYY 10 / 02 / 2013	
Mailing Address <b>PO Box 1</b>			Transaction ID : SA11A17985	
City <b>Bemidji</b>	State <b>MN</b>	Zip Code <b>56619</b>	Amount of Each Receipt this Period <b>250.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer <b>Self</b>		Occupation <b>Information requested</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>250.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>750.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

14020120007

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 8 OF 61	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**JULIANNE.MN**

Full Name (Last, First, Middle Initial) <b>Perry Beaton</b>			Date of Receipt MM / DD / YYYY <b>12 / 03 / 2013</b>	
Mailing Address <b>853 Vanderbilt Beach Rd #249</b>			Transaction ID : <b>SA11A18008</b>	
City <b>Naples</b>	State <b>FL</b>	Zip Code <b>34108</b>	Amount of Each Receipt this Period <b>250.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer <b>self</b>		Occupation <b>restaurantour</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>350.00</b>		

Full Name (Last, First, Middle Initial) <b>David and Christine Billion</b>			Date of Receipt MM / DD / YYYY <b>12 / 12 / 2013</b>	
Mailing Address <b>3401 W. 41st</b>			Transaction ID : <b>SA11A17933</b>	
City <b>Sioux Falls</b>	State <b>SD</b>	Zip Code <b>57106</b>	Amount of Each Receipt this Period <b>10400.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer <b>Billion Automotive</b>		Occupation <b>Auto Dealer</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>10400.00</b>		

Full Name (Last, First, Middle Initial) <b>Mark Bongard</b>			Date of Receipt MM / DD / YYYY <b>12 / 16 / 2013</b>	
Mailing Address <b>7391 Ridgohill Road</b>			Transaction ID : <b>SA11A18012</b>	
City <b>Excelsior</b>	State <b>MN</b>	Zip Code <b>55331</b>	Amount of Each Receipt this Period <b>250.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer <b>retired</b>		Occupation <b>Retired</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>250.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>10900.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

14020120008



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**JULIANNE.MN**

Full Name (Last, First, Middle Initial) <b>Calvin Brandt</b>		Date of Receipt M / M / D D / Y Y - Y Y <b>12 / 30 / 2013</b>
Mailing Address <b>2561 - 72nd St SE</b>		Transaction ID : <b>SA11A18023</b>
City <b>Oclato</b>	State <b>MN</b>	Zip Code <b>55328</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>Calbrandt Inc.</b>	Occupation <b>Self Employed</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250.00</b>	

Full Name (Last, First, Middle Initial) <b>David Brockpahler</b>		Date of Receipt M / M / D D / Y Y - Y Y <b>12 / 26 / 2013</b>
Mailing Address <b>6835 Goose Lake Drive</b>		Transaction ID : <b>SA11A17982</b>
City <b>Waconia</b>	State <b>MN</b>	Zip Code <b>55387</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer <b>DayCo Concrete Company</b>	Occupation <b>President</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500.00</b>	

Full Name (Last, First, Middle Initial) <b>Irving Budlong</b>		Date of Receipt M / M / D D / Y Y - Y Y <b>10 / 09 / 2013</b>
Mailing Address <b>447 N Doheny Dr. #403</b>		Transaction ID : <b>SA11A17936</b>
City <b>Beverly Hills</b>	State <b>CA</b>	Zip Code <b>90210</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2600.00</b>
Name of Employer <b>Information requested</b>	Occupation <b>Information requested</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2600.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>3350.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

14020120009

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**JULIANNE.MN**

<b>A.</b> Full Name (Last, First, Middle Initial) Giuseppe Cecchi			Date of Receipt M M / D D / Y Y Y Y 12 / 25 / 2013	
Mailing Address 1700 N Moore St			Transaction ID : SA11A17959	
City	State	Zip Code		
Arlington	VA	22209		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 1000.00	
Name of Employer IDI Group Companies		Occupation President		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00		

<b>B.</b> Full Name (Last, First, Middle Initial) John (Jack) Corrado			Date of Receipt M M / D D / Y Y Y Y 12 / 11 / 2013	
Mailing Address 315 Hearststone Mews			Transaction ID : SA11A18007	
City	State	Zip Code		
Alexandria	VA	22314		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 250.00	
Name of Employer Self		Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Kevin Crystal			Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2013	
Mailing Address 940 Saddlebrook Curve			Transaction ID : SA11A17987	
City	State	Zip Code		
Chanhassen	MN	55317		
FEC ID number of contributing federal political committee.			Amount of Each Receipt this Period 500.00	
Name of Employer N/A		Occupation Retired engineer		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1750.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020120010

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 11 OF 61	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**JULIANNE.MN**

Full Name (Last, First, Middle Initial) <b>Richard Cunniff</b>			Date of Receipt MM / DD / YYYY <b>11 / 05 / 2013</b>	
Mailing Address <b>360 West 43Rd Street</b>			Transaction ID : <b>SA11A1.7994</b>	
City <b>New York</b>	State <b>NY</b>	Zip Code <b>10036</b>	Amount of Each Receipt this Period <b>250.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Name of Employer Information requested	
Name of Employer Information requested			Occupation Information requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>250.00</b>		

Full Name (Last, First, Middle Initial) <b>Dick &amp; Karen Dee</b>			Date of Receipt MM / DD / YYYY <b>10 / 27 / 2013</b>	
Mailing Address <b>1201 Hesso Farm Circle</b>			Transaction ID : <b>SA11A1.7990</b>	
City <b>Chaska</b>	State <b>MN</b>	Zip Code <b>55318</b>	Amount of Each Receipt this Period <b>250.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Name of Employer Information requested	
Name of Employer Information requested			Occupation Information requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>250.00</b>		

Full Name (Last, First, Middle Initial) <b>Dennis &amp; Megan Doyle</b>			Date of Receipt MM / DD / YYYY <b>11 / 10 / 2013</b>	
Mailing Address <b>9924 Dell Road</b>			Transaction ID : <b>SA11A1.7994</b>	
City <b>Edon Prairie</b>	State <b>MN</b>	Zip Code <b>55347</b>	Amount of Each Receipt this Period <b>750.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>			Name of Employer Information requested	
Name of Employer Information requested			Occupation Information requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>750.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1250.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

14020120011

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 61		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**JULIANNE.MN**

Full Name (Last, First, Middle Initial) <b>William Emmons</b>			Date of Receipt M M / D D / Y Y Y Y 10 / 23 / 2013		
A. Mailing Address 223 Terrace Creek Ct			Transaction ID : SA11A1808D		
City Richmond	State TX	Zip Code 77406	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 350.00		
Name of Employer Retired		Occupation Retired	Election Cycle-to-Date 350.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

Full Name (Last, First, Middle Initial) <b>Gregory Lingargiola</b>			Date of Receipt M M / D D / Y Y Y Y 12 / 15 / 2013		
B. Mailing Address 6765 Glen Mawr			Transaction ID : SA11A17974		
City El Cerrito	State CA	Zip Code 94530	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 500.00		
Name of Employer Information requested		Occupation Information requested	Election Cycle-to-Date 500.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

Full Name (Last, First, Middle Initial) <b>Jim Fogarty</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 15 / 2013		
C. Mailing Address 8636 Bluebird Lane			Transaction ID : SA11A1808D		
City Brozy Point	State MN	Zip Code 56472	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 250.00		
Name of Employer Information requested		Occupation Information requested	Election Cycle-to-Date 250.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

SUBTOTAL of Receipts This Page (optional).....	850.00
TOTAL This Period (last page this line number only).....	

14020120012

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**JULIANNE.MN**

Full Name (Last, First, Middle Initial) <b>William Foussard</b>			Date of Receipt MM / DD / YYYY <b>11 / 17 / 2013</b>	
Mailing Address <b>1060 South Prior Avenue</b>			Transaction ID: <b>SA11A17953</b>	
City <b>St. Paul</b>	State <b>MN</b>	Zip Code <b>55116</b>	Amount of Each Receipt this Period <b>1000.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer <b>Best Western</b>		Occupation <b>Hotel Owner</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>1000.00</b>		

Full Name (Last, First, Middle Initial) <b>Harry Frankman</b>			Date of Receipt MM / DD / YYYY <b>12 / 29 / 2013</b>	
Mailing Address <b>220 South 6th Street</b>			Transaction ID: <b>SA11A18018</b>	
City <b>Minneapolis</b>	State <b>MN</b>	Zip Code <b>55402</b>	Amount of Each Receipt this Period <b>250.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer <b>Leland J. Frankman Law Offices</b>		Occupation <b>Attorney</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>1000.00</b>		

Full Name (Last, First, Middle Initial) <b>Jim Gander</b>			Date of Receipt MM / DD / YYYY <b>12 / 30 / 2013</b>	
Mailing Address <b>1244 60th Ave NW</b>			Transaction ID: <b>SA11A18019</b>	
City <b>Rochester</b>	State <b>MN</b>	Zip Code <b>55901</b>	Amount of Each Receipt this Period <b>250.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer Information requested		Occupation Information requested		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>250.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

14020120013

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 61
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 15	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**JULIANNE.MN**

Full Name (Last, First, Middle Initial) <b>A. Alonzo Gates</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address 785 Burr Rd		Transaction ID : SA11A17944
City San Antonio	State TX	Zip Code 78209
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 2600.00
Name of Employer Self	Occupation Cattle Rancher/Oil & Gas Production	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) <b>B. Syd &amp; Aviva Ghermeian</b>		Date of Receipt M M / D D / Y Y Y Y 10 / 02 / 2013
Mailing Address 1 Meadowlands Plaza 6th Floor		Transaction ID : SA11A17949
City East Rutherford	State NJ	Zip Code 07073
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 1000.00
Name of Employer Information requested	Occupation Information requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>C. Kingdon Gould</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 23 / 2013
Mailing Address 7861 Murray Hill Rd		Transaction ID : SA11A17980
City Laurel	State MD	Zip Code 20723
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
Name of Employer Self	Occupation Lawyer	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4100.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020120014

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 OF 61

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
12	13a	13b	14
			15

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NAME OF COMMITTEE (In Full)  
**JULIANNE.MN**

Full Name (Last, First, Middle Initial) <b>Linda Grigerek</b>		Date of Receipt M M / D D / Y Y - Y Y <b>10 / 30 / 2013</b>
Mailing Address <b>6600 Colony Drive S</b>		Transaction ID : <b>SA11A17938</b>
City <b>St Petersburg</b>	State <b>FL</b>	Zip Code <b>33705</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2600.00</b>
Name of Employer <b>companions and homemakers</b>	Occupation <b>CEO/owner</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2600.00</b>	

Full Name (Last, First, Middle Initial) <b>Glen Haas</b>		Date of Receipt M M / D D / Y Y - Y Y <b>12 / 03 / 2013</b>
Mailing Address <b>880 Open Sky Court</b>		Transaction ID : <b>SA11A18110</b>
City <b>Allon</b>	State <b>TX</b>	Zip Code <b>75013</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>100.00</b>
Name of Employer <b>Aragio Solutions</b>	Occupation <b>engineer</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>300.00</b>	

Full Name (Last, First, Middle Initial) <b>Cal Haasken</b>		Date of Receipt M M / D D / Y Y - Y Y <b>10 / 13 / 2013</b>
Mailing Address <b>9480 Co Rd 43</b>		Transaction ID : <b>SA11A17987</b>
City <b>Chaska</b>	State <b>MN</b>	Zip Code <b>55318</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>Information requested</b>	Occupation <b>Information requested</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2950.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

14020120015

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 18 OF 61	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**JULIANNE.MN**

Full Name (Last, First, Middle Initial) <b>Peter Hafiz</b>			Date of Receipt MM / DD / YYYY <b>10 / 21 / 2013</b>	
Mailing Address <b>7080 Steepleview Road</b>			Transaction ID : <b>SA11A1.7937</b>	
City <b>Woodbury</b>	State <b>MN</b>	Zip Code <b>55125</b>	Amount of Each Receipt this Period <b>2600.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer <b>P.J. Hafiz Club Man, INC</b>		Occupation <b>President</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>2600.00</b>		

Full Name (Last, First, Middle Initial) <b>Richard and Margie Haig</b>			Date of Receipt MM / DD / YYYY <b>12 / 26 / 2013</b>	
Mailing Address <b>3430 Gulf Shore Blvd. N.</b>			Transaction ID : <b>SA11A1.7934</b>	
City <b>Naples</b>	State <b>FL</b>	Zip Code <b>34103</b>	Amount of Each Receipt this Period <b>7500.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer <b>Retired</b>		Occupation <b>NA</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>7500.00</b>		

Full Name (Last, First, Middle Initial) <b>Richard Hawkins</b>			Date of Receipt MM / DD / YYYY <b>12 / 16 / 2013</b>	
Mailing Address <b>2207 7th St NW</b>			Transaction ID : <b>SA11A1.9279</b>	
City <b>Rochester</b>	State <b>MN</b>	Zip Code <b>55901</b>	Amount of Each Receipt this Period <b>10.00</b>	
FEC ID number of contributing federal political committee. <b>C</b>				
Name of Employer <b>D&amp;R Vending</b>		Occupation <b>Information requested</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>310.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....			<b>10110.00</b>	
<b>TOTAL</b> This Period (last page this line number only).....				

14020120016



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 61
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**JULIANNE.MN**

A. Full Name (Last, First, Middle Initial) <b>John (Til) Hazel</b>			Date of Receipt 11 / 05 / 2013
Mailing Address <b>6254 Huntley Road</b>			Transaction ID : SA11A17940
City <b>Broad Run</b>	State <b>VA</b>	Zip Code <b>20137</b>	Amount of Each Receipt this Period <b>2600.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation Businessman		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2600.00</b>		

B. Full Name (Last, First, Middle Initial) <b>Lowell Hellervik</b>			Date of Receipt 12 / 29 / 2013
Mailing Address <b>59 West 4th Street Apartment 2500</b>			Transaction ID : SA11A17935
City <b>Saint Paul</b>	State <b>MN</b>	Zip Code <b>55102</b>	Amount of Each Receipt this Period <b>5200.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Information requested	Occupation Information requested		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>5200.00</b>		

C. Full Name (Last, First, Middle Initial) <b>John Himle</b>			Date of Receipt 11 / 26 / 2013
Mailing Address <b>13900 Emerald Ridge</b>			Transaction ID : SA11A18004
City <b>Mnnetonka</b>	State <b>MN</b>	Zip Code <b>55305</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Himle Rapp &amp; Co., Inc.</b>	Occupation Business Owner		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>8050.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

14020120017

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 61
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**JULIANNE.MN**

A. Full Name (Last, First, Middle Initial) <b>Kent Hodder</b>			Date of Receipt MM / DD / YYYY <b>11 / 18 / 2013</b>
Mailing Address <b>1201 Harmon Pl</b>			Transaction ID : <b>SA11A1.8001</b>
City <b>Minneapolis</b>	State <b>MN</b>	Zip Code <b>55403</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Information requested <b>Information requested</b>	Occupation Information requested <b>Information requested</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250.00</b>		

B. Full Name (Last, First, Middle Initial) <b>Brooks &amp; Deborah Holstein</b>			Date of Receipt MM / DD / YYYY <b>10 / 30 / 2013</b>
Mailing Address <b>286 Beauvoir Road Suite 200</b>			Transaction ID : <b>SA11A1.7982</b>
City <b>Biloxi</b>	State <b>MS</b>	Zip Code <b>39531</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation <b>Real Estate Developers</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250.00</b>		

C. Full Name (Last, First, Middle Initial) <b>William Hudlow</b>			Date of Receipt MM / DD / YYYY <b>12 / 18 / 2013</b>
Mailing Address <b>480 W. Paddock Circle</b>			Transaction ID : <b>SA11A1.8015</b>
City <b>Wynota</b>	State <b>MN</b>	Zip Code <b>55391</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Self	Occupation <b>Broker</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>750.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

14020120018

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 61
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**JULIANNE.MN**

Full Name (Last, First, Middle Initial) <b>Barb Jandric</b>			Date of Receipt M M / D D / Y Y Y Y <b>11 / 26 / 2013</b>
Mailing Address <b>5441 Carlson Rd</b>			Transaction ID : <b>SA11AL8005</b>
City <b>Shoreview</b>	State <b>MN</b>	Zip Code <b>55126</b>	Amount of Each Receipt this Period <b>250.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Edina Realty</b>	Occupation <b>Management Real Estate</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250.00</b>		

Full Name (Last, First, Middle Initial) <b>Scott &amp; Mary Jensen</b>			Date of Receipt M M / D D / Y Y Y Y <b>12 / 04 / 2013</b>
Mailing Address <b>9375 Pierson Lake Dr</b>			Transaction ID : <b>SA11AL7955</b>
City <b>Chaska</b>	State <b>MN</b>	Zip Code <b>55318</b>	Amount of Each Receipt this Period <b>1000.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Self/Catalyst Medicals</b>	Occupation <b>Doctor</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000.00</b>		

Full Name (Last, First, Middle Initial) <b>Walter Johnson</b>			Date of Receipt M M / D D / Y Y Y Y <b>11 / 18 / 2013</b>
Mailing Address <b>1000</b>			Transaction ID : <b>SA11AL7972</b>
City <b>Houston</b>	State <b>TX</b>	Zip Code <b>77058</b>	Amount of Each Receipt this Period <b>500.00</b>
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>Information requested</b>	Occupation <b>Information requested</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500.00</b>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1750.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

14020120019

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 11c
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**JULIANNE.MN**

Full Name (Last, First, Middle Initial) <b>John Knapp</b>			Date of Receipt MM / DD / YYYY 12 / 16 / 2013		
A. Mailing Address 225 South 6th Street Suite 3500			Transaction ID : SA11A18013		
City Minneapolis	State MN	Zip Code 55402	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			Name of Employer Winthrop and Weinstine		
Occupation Law Firm			Election Cycle-to-Date 250.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

Full Name (Last, First, Middle Initial) <b>Paul Kohls</b>			Date of Receipt MM / DD / YYYY 12 / 15 / 2013		
B. Mailing Address 2510 Auburn Drive			Transaction ID : SA11A18010		
City Victoria	State MN	Zip Code 55306	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			Name of Employer Information requested		
Occupation Information requested			Election Cycle-to-Date 250.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

Full Name (Last, First, Middle Initial) <b>Craig Langel</b>			Date of Receipt MM / DD / YYYY 11 / 19 / 2013		
C. Mailing Address 2700 Radio Way			Transaction ID : SA11A18002		
City Missoula	State MT	Zip Code 59808	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			Name of Employer self		
Occupation CPA/Restaurant Owner			Election Cycle-to-Date 250.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020120020

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 61

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**JULIANNE.MN**

Full Name (Last, First, Middle Initial) <b>Carl Larson</b>		Date of Receipt M - M / D - D / Y - Y - Y - Y <b>11 / 12 / 2013</b>
Mailing Address <b>316 E Cherry</b>		Transaction ID : <b>SA11A1.7971</b>
City <b>Fergus Falls</b>	State <b>MN</b>	Zip Code <b>56537</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer Information requested	Occupation Information requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500.00</b>	

Full Name (Last, First, Middle Initial) <b>Allen Lentzsch</b>		Date of Receipt M - M / D - D / Y - Y - Y - Y <b>12 / 25 / 2013</b>
Mailing Address <b>1129 Sibley Memorial Highway</b>		Transaction ID : <b>SA11A1.7981</b>
City <b>Saint Paul</b>	State <b>MN</b>	Zip Code <b>55118</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>500.00</b>
Name of Employer Northland Auto Enterprises, Inc.	Occupation CEO and Owner	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500.00</b>	

Full Name (Last, First, Middle Initial) <b>Alice Leuthner</b>		Date of Receipt M - M / D - D / Y - Y - Y - Y <b>12 / 01 / 2013</b>
Mailing Address <b>7085 Red Cedar Cove</b>		Transaction ID : <b>SA11A1.8031</b>
City <b>Excelsior</b>	State <b>MN</b>	Zip Code <b>55331</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>200.00</b>
Name of Employer self	Occupation homemaker	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>300.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1200.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

14020120021

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 61
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**JULIANNE.MN**

Full Name (Last, First, Middle Initial) <b>A. Nancy Lindberg</b>		Date of Receipt MM / DD / YYYY 12 / 17 / 2013
Mailing Address 530 Marino St. S		Transaction ID : SA11A17955
City Maplewood	State MN	Zip Code 55119
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer Information requested	Occupation Information requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>B. Craig Loger</b>		Date of Receipt MM / DD / YYYY 12 / 15 / 2013
Mailing Address 8115 Trillium Circle		Transaction ID : SA11A18009
City Victoria	State MN	Zip Code 55386
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer Lester Building Systems	Occupation Sales Manager	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>C. Pat Lynch</b>		Date of Receipt MM / DD / YYYY 12 / 30 / 2013
Mailing Address 1816 Blackberry Cir		Transaction ID : SA11A17946
City Sartell	State MN	Zip Code 56377
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00
Name of Employer Self	Occupation Business Owner	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3050.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020120022

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 OF 61  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**JULIANNE.MN**

**A.** Full Name (Last, First, Middle Initial)  
**Betty and Merritt Marguadt**

Mailing Address **1654 Woxford Court**

City <b>Wuxdury</b>	State <b>MN</b>	Zip Code <b>55125</b>
------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>retired</b>	Occupation <b>Retired</b>
------------------------------------	------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 / 16 / 2013**

Transaction ID : **SA11A1.8014**

Amount of Each Receipt this Period  
**250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Stacy Martin**

Mailing Address **4120 Lakewood Road**

City <b>Excelsior</b>	State <b>MN</b>	Zip Code <b>55331</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>Parallel Technologies</b>	Occupation <b>Sales</b>
--	----------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 / 15 / 2013**

Transaction ID : **SA11A1.8011**

Amount of Each Receipt this Period  
**250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Raymond (Bill) Mason**

Mailing Address **6950 Dylan Ln**

City <b>Maple Plain</b>	State <b>MN</b>	Zip Code <b>55359</b>
----------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C**

Name of Employer <b>retired</b>	Occupation <b>retired</b>
------------------------------------	------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 / 20 / 2013**

Transaction ID : **SA11A1.7957**

Amount of Each Receipt this Period  
**1000.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

14020120023

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 24 OF 61	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**JULIANNE.MN**

<b>A.</b> Full Name (Last, First, Middle Initial) Katherine McCorkle			Date of Receipt M M / D D / Y Y Y Y 10 / 31 / 2013	
Mailing Address 306 Jeffery Ln			Transaction ID : SA11A1.7993	
City Northfield	State IL	Zip Code 60093	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			Name of Employer mccorkle litigation service	
Occupation court reporter			Amount of Each Receipt this Period 250.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Election Cycle-to-Date 250.00	

<b>B.</b> Full Name (Last, First, Middle Initial) Chris Neaton			Date of Receipt M M / D D / Y Y Y Y 12 / 30 / 2013	
Mailing Address 3480 County Rd 21			Transaction ID : SA11A1.8024	
City Maycr	State MN	Zip Code 55360	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			Name of Employer Self	
Occupation Neaton Brothers Erosion Control			Amount of Each Receipt this Period 750.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Election Cycle-to-Date 750.00	

<b>C.</b> Full Name (Last, First, Middle Initial) Colleen Nelson			Date of Receipt M M / D D / Y Y Y Y 11 / 04 / 2013	
Mailing Address 17012 Grays Bay Blvd.			Transaction ID : SA11A1.7939	
City Wayzata	State MN	Zip Code 55391	Amount of Each Receipt this Period 2600.00	
FEC ID number of contributing federal political committee. C			Name of Employer Self	
Occupation Information requested			Amount of Each Receipt this Period 2600.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			Election Cycle-to-Date 2600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3100.00
<b>TOTAL</b> This Period (last page this line number only).....	3100.00

14020120024



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 25 OF 61	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**JULIANNE.MN**

Full Name (Last, First, Middle Initial) <b>Mary and Robert Newman</b>			Date of Receipt MM / DD / YYYY 12 / 15 / 2013	
A. Mailing Address 5230 Moadville Street			Transaction ID : SA11A1.7973	
City Greenwood	State MN	Zip Code 55331	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Information requested		Occupation Information requested		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>Leonard Northcutt</b>			Date of Receipt MM / DD / YYYY 10 / 30 / 2013	
B. Mailing Address P.O. Box 1506			Transaction ID : SA11A1.7991	
City Enid	State OK	Zip Code 73702-1506	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Northcutt Auto Group		Occupation Self Auto Dealer Chevrolet, Buick and		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>Greg Osterdyk</b>			Date of Receipt MM / DD / YYYY 12 / 30 / 2013	
C. Mailing Address 840 Ramsey Ave			Transaction ID : SA11A1.8021	
City Carver	State MN	Zip Code 55315	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Information requested		Occupation Information requested		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....			1000.00	
TOTAL This Period (last page this line number only).....				

14020120025

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 26 OF 61	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**JULIANNE.MN**

Full Name (Last, First, Middle Initial) <b>John Peck</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 03 / 2013
Mailing Address <b>PO Box 829</b>		Transaction ID : <b>SA11A17941</b>
City <b>Rancho Santa Fe</b>	State <b>CA</b>	Zip Code <b>92067</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>2600.00</b>
Name of Employer <b>Peck Enterprises</b>	Occupation <b>Owner</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>2600.00</b>	

Full Name (Last, First, Middle Initial) <b>Lowell Penz</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 29 / 2013
Mailing Address <b>3775 Willow Ridge Dr. SW</b>		Transaction ID : <b>SA11A17963</b>
City <b>Rochester</b>	State <b>MN</b>	Zip Code <b>55902</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer <b>Information requested</b>	Occupation <b>Information requested</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000.00</b>	

Full Name (Last, First, Middle Initial) <b>Jim Phillips</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 08 / 2013
Mailing Address <b>101 Bull St</b>		Transaction ID : <b>SA11A17996</b>
City <b>Charleston</b>	State <b>SC</b>	Zip Code <b>29401</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer <b>self</b>	Occupation <b>Dermatopathologist</b>	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>3850.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

14020120026

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 61
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**JULIANNE.MN**

Full Name (Last, First, Middle Initial) <b>Eric Pratt</b>			Date of Receipt M M / D D / Y Y Y Y 12 / 12 / 2013
A. Mailing Address 14604 Suncy Lane			Transaction ID : SA11A18008
City Prior Lake	State MN	Zip Code 55372	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Information requested	Occupation Information requested		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>John Remick</b>			Date of Receipt M M / D D / Y Y Y Y 12 / 29 / 2013
B. Mailing Address 3232 Fox Hollow Ct SW			Transaction ID : SA11A17861
City Rochester	State MN	Zip Code 55902	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Information requested	Occupation Information requested		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>Joseph Repya</b>			Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2013
C. Mailing Address 9086 Shadow Glen Way			Transaction ID : SA11A17988
City Fort Myers	State FL	Zip Code 33913	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Retired	Occupation Retired US Army		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1500.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020120027

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 OF 61  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**JULIANNE.MN**

**A.** Full Name (Last, First, Middle Initial)  
**Clifford Ribner**

Mailing Address **320 South Boston, Ste. 1130**

City **Tulsa** State **OK** Zip Code **74103**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self** Occupation **Lawyer**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **11 / 07 / 2013**  
Transaction ID : **SA11A1.7995**

Amount of Each Receipt this Period **250.00**

**B.** Full Name (Last, First, Middle Initial)  
**Donald Roberts**

Mailing Address **2012 Wyckham Plaza**

City **Norman** State **OK** Zip Code **73072**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Self** Occupation **Pediatric Dentist**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **12 / 23 / 2013**  
Transaction ID : **SA11A1.8018**

Amount of Each Receipt this Period **250.00**

**C.** Full Name (Last, First, Middle Initial)  
**Kathryn Rominski**

Mailing Address **2301 River Rd S**

City **Lakeland** State **MN** Zip Code **55043**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Hubbard Broadcasting Inc.** Occupation **Broadcaster**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **11 / 19 / 2013**  
Transaction ID : **SA11A1.7954**

Amount of Each Receipt this Period **1000.00**

**SUBTOTAL** of Receipts This Page (optional) ..... **1500.00**

**TOTAL** This Period (last page this line number only).....

14020120028

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 61
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**JULIANNE.MN**

<b>A.</b> Full Name (Last, First, Middle Initial) Daniel Rosen			Date of Receipt M M / D D / Y Y Y Y 10 / 27 / 2013	
Mailing Address 888 Colwell Building, 123 N. 3Rd S			Transaction ID : SA11A17985	
City Minneapolis	State MN	Zip Code 55401		
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period 500.00	
Name of Employer Self		Occupation Attorney		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		

<b>B.</b> Full Name (Last, First, Middle Initial) William Rutledge			Date of Receipt M M / D D / Y Y Y Y 12 / 20 / 2013	
Mailing Address 5109 Madison Creek Dr			Transaction ID : SA11A17978	
City Fort Collins	State CO	Zip Code 80528		
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period 500.00	
Name of Employer USAF Retired		Occupation Retired US Air Force		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		

<b>C.</b> Full Name (Last, First, Middle Initial) Ellen Ryan			Date of Receipt M M / D D / Y Y Y Y 12 / 28 / 2013	
Mailing Address 320 Ridge Cir			Transaction ID : SA11A19032	
City Wayzata	State MN	Zip Code 55391		
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period 25.00	
Name of Employer Retired		Occupation Retired		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2625.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1025.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020120029

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 30 OF 61	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**JULIANNE MN**

Full Name (Last, First, Middle Initial) <b>Thomas Ryan</b>			Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2013	
Mailing Address 2350 Longview Cir.			Transaction ID : SA11A17950	
City Orono	State MN	Zip Code 55356	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 1000.00	
Name of Employer Ryan Leasing, INC		Occupation Information requested	Amount of Each Receipt this Period 1000.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00	Amount of Each Receipt this Period 1000.00	

Full Name (Last, First, Middle Initial) <b>Dale &amp; Beite Schenian</b>			Date of Receipt M M / D D / Y Y Y Y 11 / 01 / 2013	
Mailing Address P.O. Box 26922			Transaction ID : SA11A17968	
City South Saint Paul	State MN	Zip Code 55075	Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 500.00	
Name of Employer Information requested		Occupation Information requested	Amount of Each Receipt this Period 500.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00	Amount of Each Receipt this Period 500.00	

Full Name (Last, First, Middle Initial) <b>Jocelyn &amp; James Schwartz</b>			Date of Receipt M M / D D / Y Y Y Y 10 / 31 / 2013	
Mailing Address 16380 High Bluff Cir			Transaction ID : SA11A17951	
City Carver	State MN	Zip Code 55315	Amount of Each Receipt this Period 1000.00	
FEC ID number of contributing federal political committee. C			Amount of Each Receipt this Period 1000.00	
Name of Employer Information requested		Occupation Information requested	Amount of Each Receipt this Period 1000.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00	Amount of Each Receipt this Period 1000.00	

SUBTOTAL of Receipts This Page (optional).....			2500.00	
TOTAL This Period (last page this line number only).....				

14020120030

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 31 OF 61	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**JULIANNE.MN**

Full Name (Last, First, Middle Initial) <b>Scott &amp; Vicki Seymour</b>			Date of Receipt M M / D D / Y Y Y Y 10 / 15 / 2013	
Mailing Address 696 Acadia Way			Transaction ID : SA11A17989	
City Vernona	State WI	Zip Code 53593	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Information requested		Occupation Information requested		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>Robert Stevens</b>			Date of Receipt M M / D D / Y Y Y Y 12 / 30 / 2013	
Mailing Address 1636 Woodlawn Circle			Transaction ID : SA11ALB028	
City Waconia	State MN	Zip Code 55387	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Ridgeview medical center		Occupation Hospital CEO		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>Robert &amp; Cynthia Stevens</b>			Date of Receipt M M / D D / Y Y Y Y 10 / 10 / 2013	
Mailing Address 1636 Woodlawn Circle			Transaction ID : SA11A17989	
City Waconia	State MN	Zip Code 55387	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Information requested		Occupation Information requested		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		

SUBTOTAL of Receipts This Page (optional).....			750.00	
TOTAL This Period (last page this line number only).....				

14020120031

**SCHEDULE A (FEC Form 3)**  
**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE 32 OF 61
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**JULIANNE.MN**

Full Name (Last, First, Middle Initial) <b>A. Suzanne Swan</b>		Date of Receipt MM / DD / YYYY <b>12 / 27 / 2013</b>
Mailing Address <b>1320 Riverside Lane, Unit #410</b>		Transaction ID : <b>SA11AL8017</b>
City <b>Mendota Heights</b>	State <b>MN</b>	Zip Code <b>55118</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer Information requested	Occupation Information requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250.00</b>	

Full Name (Last, First, Middle Initial) <b>B. James Tracy</b>		Date of Receipt MM / DD / YYYY <b>11 / 25 / 2013</b>
Mailing Address <b>1320 Riverside Lane, Apt. 410</b>		Transaction ID : <b>SA11AL8003</b>
City <b>Mendota Heights</b>	State <b>MI</b>	Zip Code <b>55118</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>250.00</b>
Name of Employer University of Minnesota	Occupation retired	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>350.00</b>	

Full Name (Last, First, Middle Initial) <b>C. Trevor Traina</b>		Date of Receipt MM / DD / YYYY <b>11 / 07 / 2013</b>
Mailing Address <b>2825 Broadway Street</b>		Transaction ID : <b>SA11AL7952</b>
City <b>San Francisco</b>	State <b>CA</b>	Zip Code <b>94115-1060</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>1000.00</b>
Name of Employer Traina Interactive	Occupation ceo	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1500.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

14020120032



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 OF 61  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**JULIANNE.MN**

**A.** Full Name (Last, First, Middle Initial)  
**Ken Vasseur**

Mailing Address **40646 277th Ave**

City **Staples** State **MN** Zip Code **56479**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Staples/Motley** Occupation **Retired**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 / 17 / 2013**

Transaction ID : **SA11AL7976**

Amount of Each Receipt this Period  
**500.00**

**B.** Full Name (Last, First, Middle Initial)  
**Claudia E. Wiens**

Mailing Address **8565 136Th Street North**

City **Hugo** State **MN** Zip Code **55038**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Information requested** Occupation **Information requested**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 / 23 / 2013**

Transaction ID : **SA11AL7965**

Amount of Each Receipt this Period  
**500.00**

**C.** Full Name (Last, First, Middle Initial)  
**John Zander**

Mailing Address **29565 38Th Street**

City **Janesville** State **MN** Zip Code **56048**

FEC ID number of contributing federal political committee. **C**

Name of Employer **Information requested** Occupation **Information requested**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 / 01 / 2013**

Transaction ID : **SA11AL7948**

Amount of Each Receipt this Period  
**2000.00**

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**3000.00**

**79360.00**

14020120033

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 61
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**JULIANNE MN**

Full Name (Last, First, Middle Initial) <b>A. Best Buy</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013
Mailing Address 11600 Lcona Rd		Amount of Each Disbursement this Period 1115.62 Transaction ID : \$B17.7334
City Eden Prairie	State MN	
Purpose of Disbursement Office Supplies		001 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. BizStory</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address 7401 Nicollet Ave.		Amount of Each Disbursement this Period 600.00 Transaction ID : \$B17.7478
City Richfield	State MN	
Purpose of Disbursement Advertising		004 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. Mike Burton</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 03 / 2013
Mailing Address 1475 White Oak Drive		Amount of Each Disbursement this Period 903.75 Transaction ID : \$B17.7634
City Chaska	State MN	
Purpose of Disbursement Consulting (Q3 Commission)		003 Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2619.37
<b>TOTAL</b> This Period (last page this line number only).....	

14020120034

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 35 OF 61

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**JULIANNE MN**

Full Name (Last, First, Middle Initial) <b>A. Capitol Resources, Inc.</b>		Date of Disbursement MM / DD / YYYY 12 / 11 / 2013
Mailing Address 109 West Front Street		Amount of Each Disbursement this Period 4617.95 Transaction ID : \$317.7485
City Brooklyn	State IA	
Zip Code 52211	Purpose of Disbursement Consulting	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) <b>B. Chaska PO</b>		Date of Disbursement MM / DD / YYYY 11 / 15 / 2013
Mailing Address 300 N Pine St		Amount of Each Disbursement this Period 235.00 Transaction ID : \$317.7429
City Chaska	State MN	
Zip Code 55318	Purpose of Disbursement Postage	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) <b>C. Chaska PO</b>		Date of Disbursement MM / DD / YYYY 11 / 25 / 2013
Mailing Address 300 N Pine St		Amount of Each Disbursement this Period 92.00 Transaction ID : \$317.7450
City Chaska	State MN	
Zip Code 55318	Purpose of Disbursement Postage	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

SUBTOTAL of Disbursements This Page (optional).....	4945.75
TOTAL This Period (last page this line number only).....	

14020120035

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 36 OF 61

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)  
**JULIANNE MN**

Full Name (Last, First, Middle Initial)

**A. Chaska PO**

Date of Disbursement

Mailing Address 300 N Pine St

M M / D D / Y Y Y Y  
11 / 25 / 2013

City Chaska State MN Zip Code 55318

Amount of Each Disbursement this Period

Purpose of Disbursement Postage

230.00

Candidate Name

003  
Category/  
Type

Transaction ID : SH17.7451

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

**B. Chaska PO**

Date of Disbursement

Mailing Address 300 N Pine St

M M / D D / Y Y Y Y  
12 / 03 / 2013

City Chaska State MN Zip Code 55318

Amount of Each Disbursement this Period

Purpose of Disbursement Postage

3.44

Candidate Name

003  
Category/  
Type

Transaction ID : SH17.7402

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

**C. Chaska PO**

Date of Disbursement

Mailing Address 300 N Pine St

M M / D D / Y Y Y Y  
12 / 05 / 2013

City Chaska State MN Zip Code 55318

Amount of Each Disbursement this Period

Purpose of Disbursement Postage

506.00

Candidate Name

003  
Category/  
Type

Transaction ID : SH17.7403

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....

739.44

**TOTAL** This Period (last page this line number only).....

14020120036

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 37 OF 61

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**JULIANNE MN**

Full Name (Last, First, Middle Initial)

**A. Chaska PO**

Mailing Address 300 N Pino St

City Chaska State MN Zip Code 55318

Purpose of Disbursement Postage

003

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
12 / 05 / 2013

Amount of Each Disbursement this Period

4.76

Transaction ID : 0317.7478

**B. Chaska PO**

Mailing Address 300 N Pino St

City Chaska State MN Zip Code 55318

Purpose of Disbursement Postage

003

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
12 / 13 / 2013

Amount of Each Disbursement this Period

353.00

Transaction ID : 0317.7488

**C. City of Chaska**

Mailing Address P.O. Box 81

City Chaska State MN Zip Code 55318

Purpose of Disbursement Utilities

001

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
12 / 10 / 2013

Amount of Each Disbursement this Period

50.92

Transaction ID : 0317.7481

**SUBTOTAL** of Disbursements This Page (optional).....

408.68

**TOTAL** This Period (last page this line number only).....

14020120037

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 30 OF 61

17     18     19a     19b  
20a    20b    20c    21

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NAME OF COMMITTEE (In Full)  
**JULIANNE MN**

Full Name (Last, First, Middle Initial)

**A. Comcast**

Date of Disbursement

Mailing Address PO Box 34227

M M / D D / Y Y Y Y  
11 / 13 / 2013

City State Zip Code  
Seattle WA 98124

Amount of Each Disbursement this Period

Purpose of Disbursement  
Internet/Phone

001

100.12

Candidate Name

Category/  
Type

Transaction ID : 8317.7423

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. Comcast**

Date of Disbursement

Mailing Address PO Box 34227

M M / D D / Y Y Y Y  
11 / 13 / 2013

City State Zip Code  
Seattle WA 98124

Amount of Each Disbursement this Period

Purpose of Disbursement  
Internet/Phone

001

371.05

Candidate Name

Category/  
Type

Transaction ID : 8317.7424

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C. Cuzzy's Brickhouse**

Date of Disbursement

Mailing Address 2880 Chaska Blvd

M M / D D / Y Y Y Y  
11 / 21 / 2013

City State Zip Code  
Chaska MN 55318

Amount of Each Disbursement this Period

Purpose of Disbursement  
Staff/Volunteer Food/Beverage

007

92.91

Candidate Name

Category/  
Type

Transaction ID : 8317.7443

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....

652.00

**TOTAL** This Period (last page this line number only).....

14020120038

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 39 OF 61

17     18     19a     19b  
20a    20b    20c    21

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NAME OF COMMITTEE (In Full)  
**JULIANNE MN**

Full Name (Last, First, Middle Initial)

**A. Cuzzy's Brickhouse**

Mailing Address 2880 Chaska Blvd

City Chaska State MN Zip Code 55318

Purpose of Disbursement  
Staff/Volunteer Food/Beverage

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
12 19 2013

Amount of Each Disbursement this Period

58.72

Transaction ID : 8317.7495

Full Name (Last, First, Middle Initial)

**B. Cuzzy's Brickhouse**

Mailing Address 2880 Chaska Blvd

City Chaska State MN Zip Code 55318

Purpose of Disbursement  
Staff/Volunteer Food/Beverage

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
12 19 2013

Amount of Each Disbursement this Period

62.19

Transaction ID : 8317.7620

Full Name (Last, First, Middle Initial)

**C. Cuzzy's Brickhouse**

Mailing Address 2880 Chaska Blvd

City Chaska State MN Zip Code 55318

Purpose of Disbursement  
Staff/Volunteer Food/Beverage

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
12 20 2013

Amount of Each Disbursement this Period

32.60

Transaction ID : 8317.7499

SUBTOTAL of Disbursements This Page (optional).....

153.51

TOTAL This Period (last page this line number only).....

14020120039

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 40 OF 61

17     18     19a     19b  
20a    20b    20c    21

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NAME OF COMMITTEE (In Full)  
**JULIANNE MN**

Full Name (Last, First, Middle Initial) <b>A. Dorok Brigham Design LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 02 / 2013
Mailing Address 10925 55th Ave. North		Amount of Each Disbursement this Period 812.00 Transaction ID : \$B17.7513
City Plymouth	State MN	
Zip Code 55442	Purpose of Disbursement Advertising	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:    District:		

Full Name (Last, First, Middle Initial) <b>B. Dorok Brigham Design LLC</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 05 / 2013
Mailing Address 10925 55th Ave. North		Amount of Each Disbursement this Period 600.00 Transaction ID : \$B17.7476
City Plymouth	State MN	
Zip Code 55442	Purpose of Disbursement Advertising	Category/ Type 004
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:    District:		

Full Name (Last, First, Middle Initial) <b>C. Edina Country Club</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013
Mailing Address 5100 Wooddale Ave.		Amount of Each Disbursement this Period 433.79 Transaction ID : \$B17.7422
City Edina	State MN	
Zip Code 55424	Purpose of Disbursement Event Fees	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:    District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1845.79
<b>TOTAL</b> This Period (last page this line number only) .....	

14020120040



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 41 OF 61

17     18     19a     19b  
20a    20b    20c    21

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NAME OF COMMITTEE (In Full)

JULIANNE MN

Full Name (Last, First, Middle Initial)

**A. Facebook**

Date of Disbursement

M M / D D / Y Y Y Y  
11 / 23 / 2013

Mailing Address 1601 S. California

Amount of Each Disbursement this Period

251.10

City State Zip Code  
Palo Alto CA 94304

Transaction ID : SB17.7583

Purpose of Disbursement  
Advertising

004

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. Facebook**

Date of Disbursement

M M / D D / Y Y Y Y  
12 / 01 / 2013

Mailing Address 1601 S. California

Amount of Each Disbursement this Period

403.67

City State Zip Code  
Palo Alto CA 94304

Transaction ID : SB17.7457

Purpose of Disbursement  
Advertising

004

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C. Frontier Airlines**

Date of Disbursement

M M / D D / Y Y Y Y  
11 / 09 / 2013

Mailing Address 555 Air Cargo Way

Amount of Each Disbursement this Period

50.00

City State Zip Code  
Milwaukee WI 53207

Transaction ID : SB17.7573

Purpose of Disbursement  
Travel Fees

002

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....

704.77

TOTAL This Period (last page this line number only).....

14020120041

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 42 OF 61

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**JULIANNE.MN**

Full Name (Last, First, Middle Initial)

**A. Groenor and Hook**

Date of Disbursement

M M / D D / Y Y Y Y  
10 / 02 / 2013

Mailing Address 901 King St.  
Suite 400

Amount of Each Disbursement this Period

1139.70

City Alexandria State VA Zip Code 22304

Transaction ID : SH17.7514

Purpose of Disbursement  
Advertising

004

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

**B. Groenor and Hook**

Date of Disbursement

M M / D D / Y Y Y Y  
11 / 13 / 2013

Mailing Address 901 King St.  
Suite 400

Amount of Each Disbursement this Period

169.51

City Alexandria State VA Zip Code 22304

Transaction ID : SH17.7414

Purpose of Disbursement  
Advertising

004

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

**C. Greenwox Printing**

Date of Disbursement

M M / D D / Y Y Y Y  
11 / 18 / 2013

Mailing Address 316 North Main Street

Amount of Each Disbursement this Period

785.59

City Corsicana State TX Zip Code 75110

Transaction ID : SH17.7437

Purpose of Disbursement  
Advertising

004

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....

2094.80

**TOTAL** This Period (last page this line number only).....

14020120042

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**JULIANNE MN**

Full Name (Last, First, Middle Initial)

**A. H.J Distincstions LLC**

Date of Disbursement

MM / DD / YYYY  
11 / 15 / 2013

Mailing Address 1116 Falls Curve

Amount of Each Disbursement this Period

1000.00

Transaction ID: 8317.7431

City Chaska State MN Zip Code 55318

Purpose of Disbursement  
Consulting

003

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. H.J Distincstions LLC (Hannah Mohs)**

Date of Disbursement

MM / DD / YYYY  
11 / 27 / 2013

Mailing Address 1116 Falls Curve

Amount of Each Disbursement this Period

1000.00

Transaction ID: 8317.7455

City Chaska State MN Zip Code 55318

Purpose of Disbursement  
Consulting

003

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C. H.J Distincstions**

Date of Disbursement

MM / DD / YYYY  
12 / 05 / 2013

Mailing Address 1116 Falls Curve

Amount of Each Disbursement this Period

348.25

Transaction ID: 8317.7488

City Chaska State MN Zip Code 55318

Purpose of Disbursement  
Reimbursement (Supplies)

001

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....

2348.25

**TOTAL** This Period (last page this line number only).....

14020120043

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 44 OF 61

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

JULIANNE MN

Full Name (Last, First, Middle Initial)

**A. H.J Distinctions LLC**

Date of Disbursement

M M / D D / Y Y Y Y  
12 / 16 / 2013

Mailing Address 1116 Falls Curve

Amount of Each Disbursement this Period

1000.00

City Chaska State MN Zip Code 55318

Transaction ID : 8317.7492

Purpose of Disbursement Consulting

003

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. Holiday Stationstore**

Date of Disbursement

M M / D D / Y Y Y Y  
10 / 09 / 2013

Mailing Address Hwy 41& Engler

Amount of Each Disbursement this Period

80.50

City Chaska State MN Zip Code 55318

Transaction ID : 8317.7537

Purpose of Disbursement Staff/Volunteer Food/Beverage

007

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C. Holiday Stationstore**

Date of Disbursement

M M / D D / Y Y Y Y  
10 / 14 / 2013

Mailing Address Hwy 41& Engler

Amount of Each Disbursement this Period

74.50

City Chaska State MN Zip Code 55318

Transaction ID : 8317.7342

Purpose of Disbursement Automotive

002

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....

1155.00

TOTAL This Period (last page this line number only).....

14020120044

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**JULIANNE MN**

Full Name (Last, First, Middle Initial) <b>A. Holiday Stationstore</b>		Date of Disbursement MM / DD / YY 10 / 21 / 2013
Mailing Address Hwy 41& Engler		Amount of Each Disbursement this Period 76.36 Transaction ID : \$17.7367
City Chaska	State MN	
Purpose of Disbursement Automotive	Candidate Name	002 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Holiday Stationstore</b>		Date of Disbursement MM / DD / YY 10 / 28 / 2013
Mailing Address Hwy 41& Engler		Amount of Each Disbursement this Period 74.32 Transaction ID : \$17.7372
City Chaska	State MN	
Purpose of Disbursement Automotive	Candidate Name	002 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Holiday Stationstore</b>		Date of Disbursement MM / DD / YY 11 / 11 / 2013
Mailing Address Hwy 41& Engler		Amount of Each Disbursement this Period 48.61 Transaction ID : \$17.7408
City Chaska	State MN	
Purpose of Disbursement Automotive	Candidate Name	002 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

**SUBTOTAL** of Disbursements This Page (optional).....

199.29

**TOTAL** This Period (last page this line number only).....

14020120045

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**JULIANNE MN**

Full Name (Last, First, Middle Initial) <b>A. Holiday Stationstore</b>		Date of Disbursement MM / DD / YYYY 11 / 17 / 2013
Mailing Address Hwy 41& Engler		Amount of Each Disbursement this Period 47.92 Transaction ID : 8817.7435
City Chaska	State MN	
Zip Code 55318	Purpose of Disbursement Automotive	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) <b>B. Holiday Stationstore</b>		Date of Disbursement MM / DD / YYYY 11 / 21 / 2013
Mailing Address Hwy 41& Engler		Amount of Each Disbursement this Period 67.79 Transaction ID : 8817.7440
City Chaska	State MN	
Zip Code 55318	Purpose of Disbursement Automotive	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) <b>C. Holiday Stationstore</b>		Date of Disbursement MM / DD / YYYY 12 / 13 / 2013
Mailing Address Hwy 41& Engler		Amount of Each Disbursement this Period 46.26 Transaction ID : 8817.7608
City Chaska	State MN	
Zip Code 55318	Purpose of Disbursement Automotive	Category/ Type 002
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	161.97
<b>TOTAL</b> This Period (last page this line number only).....	

14020120046

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 47 OF 61

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)

JULIANNE MN

Full Name (Last, First, Middle Initial)

**A. Holiday Stationstore**

Date of Disbursement

M M / D D / Y Y Y Y  
12 / 13 / 2013

Mailing Address Hwy 41& Engler

Amount of Each Disbursement this Period

16.46

City Chaska State MN Zip Code 55318

Purpose of Disbursement  
Staff/Volunteer Food/Beverage

007

Transaction ID : 6017.7009

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

**B. Holiday Stationstore**

Date of Disbursement

M M / D D / Y Y Y Y  
12 / 16 / 2013

Mailing Address 441 W 79th St

Amount of Each Disbursement this Period

126.27

City Chanhassen State MN Zip Code 55317

Purpose of Disbursement  
Automotive

002

Transaction ID : 6017.7613

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

**C. Holiday Stationstore**

Date of Disbursement

M M / D D / Y Y Y Y  
12 / 24 / 2013

Mailing Address 441 W 79th St

Amount of Each Disbursement this Period

73.72

City Chanhassen State MN Zip Code 55317

Purpose of Disbursement  
Automotive

002

Transaction ID : 6017.7023

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....

216.45

TOTAL This Period (last page this line number only).....

14020120047

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 48 OF 61

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**JULIANNE MN**

Full Name (Last, First, Middle Initial) <b>A. Kwik Trip</b>		Date of Disbursement M M / D D / Y Y - Y Y 10 / 09 / 2013
Mailing Address 8921 Crossroads Blvd.		Amount of Each Disbursement this Period 52.63 Transaction ID : \$017.7335
City Chanhassen	State MN	
Purpose of Disbursement Automotive	Zip Code 55317	Category/ Type 002
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. Kwik Trip</b>		Date of Disbursement M M / D D / Y Y - Y Y 11 / 13 / 2013
Mailing Address 8921 Crossroads Blvd.		Amount of Each Disbursement this Period 40.00 Transaction ID : \$017.7577
City Chanhassen	State MN	
Purpose of Disbursement Automotive	Zip Code 55317	Category/ Type 002
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. Mackrill Modia</b>		Date of Disbursement M M / D D / Y Y - Y Y 10 / 03 / 2013
Mailing Address 7801 La Vista Dr		Amount of Each Disbursement this Period 7110.00 Transaction ID : \$017.7522
City La Vista	State NE	
Purpose of Disbursement Advertising	Zip Code 68128	Category/ Type 004
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	7202.63
<b>TOTAL</b> This Period (last page this line number only).....	

14020120048



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 49 OF 61

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**JULIANNE MN**

Full Name (Last, First, Middle Initial) <b>A. Midwest Public Affairs, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 02 / 2013
Mailing Address 953 Scott Lane		Amount of Each Disbursement this Period 3250.00 Transaction ID : \$B17.7504
City Belle Plaine	State MN	
Zip Code 56011	Purpose of Disbursement Consulting	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) <b>B. Midwest Public Affairs, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 14 / 2013
Mailing Address 953 Scott Lane		Amount of Each Disbursement this Period 2647.28 Transaction ID : \$B17.7348
City Belle Plaine	State MN	
Zip Code 56011	Purpose of Disbursement Reimbursement (Technology services)	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

Full Name (Last, First, Middle Initial) <b>C. Midwest Public Affairs, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 16 / 2013
Mailing Address 953 Scott Lane		Amount of Each Disbursement this Period 3250.00 Transaction ID : \$B17.7358
City Belle Plaine	State MN	
Zip Code 56011	Purpose of Disbursement Consulting	Category/ Type 003
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	9147.28
<b>TOTAL</b> This Period (last page this line number).....	

14020120049

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
JULIANNE.MN

Full Name (Last, First, Middle Initial)

**A. Midwest Public Affairs, LLC**

Date of Disbursement

Mailing Address 953 Scott Lane

MM/DD/YYYY  
11/01/2013

City State Zip Code  
Belle Plaine MN 56011

Amount of Each Disbursement this Period

Purpose of Disbursement  
Consulting

003

3250.00

Candidate Name

Transaction ID: 8817.7379

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify)

Category/  
Type

State: District:

Full Name (Last, First, Middle Initial)

**B. Midwest Public Affairs, LLC**

Date of Disbursement

Mailing Address 953 Scott Lane

MM/DD/YYYY  
11/15/2013

City State Zip Code  
Belle Plaine MN 56011

Amount of Each Disbursement this Period

Purpose of Disbursement  
Consulting

003

3250.00

Candidate Name

Transaction ID: 8817.7432

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify)

Category/  
Type

State: District:

Full Name (Last, First, Middle Initial)

**C. Midwest Public Affairs, LLC**

Date of Disbursement

Mailing Address 953 Scott Lane

MM/DD/YYYY  
11/27/2013

City State Zip Code  
Belle Plaine MN 56011

Amount of Each Disbursement this Period

Purpose of Disbursement  
Consulting

003

3250.00

Candidate Name

Transaction ID: 8817.7453

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify)

Category/  
Type

State: District:

SUBTOTAL of Disbursements This Page (optional).....

9750.00

TOTAL This Period (last page this line number only).....

14020120050

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)

JULIANNE MN

Full Name (Last, First, Middle Initial)

**A. Midwest Public Affairs, LLC**

Mailing Address 953 Scott Lane

City State Zip Code  
Belle Plaine MN 56011

Purpose of Disbursement  
Consulting

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
12 16 2013

Amount of Each Disbursement this Period

3250.00

Transaction ID : SH17.7490

003  
Category/  
Type

**B. Minuto Man Press**

Mailing Address 1463 White Oak Drive

City State Zip Code  
Chaska MN 55318

Purpose of Disbursement  
Advertising

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
10 02 2013

Amount of Each Disbursement this Period

2118.63

Transaction ID : SH17.7512

004  
Category/  
Type

**C. Minuto Man Press**

Mailing Address 1463 White Oak Drive

City State Zip Code  
Chaska MN 55318

Purpose of Disbursement  
Advertising

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
11 04 2013

Amount of Each Disbursement this Period

265.03

Transaction ID : SH17.7385

004  
Category/  
Type

SUBTOTAL of Disbursements This Page (optional).....

5633.66

TOTAL This Period (last page this line number only).....

14020120051

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 52 OF 61

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)

JULIANNE MN

Full Name (Last, First, Middle Initial)

**A. Minute Man Press**

Mailing Address 1463 White Oak Drive

City Chaska State MN Zip Code 55318

Purpose of Disbursement Advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
11 / 04 / 2013

Amount of Each Disbursement this Period

948.49

Transaction ID : S317.7386

004  
Category/  
Type

**B. Minute Man Press**

Mailing Address 1463 White Oak Drive

City Chaska State MN Zip Code 55318

Purpose of Disbursement Advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
11 / 25 / 2013

Amount of Each Disbursement this Period

1707.46

Transaction ID : S317.7449

004  
Category/  
Type

**C. Minute Man Press**

Mailing Address 1463 White Oak Drive

City Chaska State MN Zip Code 55318

Purpose of Disbursement Advertising

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
12 / 16 / 2013

Amount of Each Disbursement this Period

1708.61

Transaction ID : S317.7487

004  
Category/  
Type

SUBTOTAL of Disbursements This Page (optional).....

4364.56

TOTAL This Period (last page this line number only).....

14020120052

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 53 OF 61

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)  
**JULIANNE MN**

Full Name (Last, First, Middle Initial)

**A. Hannah Mohs**

Mailing Address 1116 Falls Curve

City Chaska State MN Zip Code 55318

Purpose of Disbursement  
Consulting

003  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
10 / 17 / 2013

Amount of Each Disbursement this Period

1000.00

Transaction ID : 0017.7360

**B. Hannah Mohs**

Mailing Address 1116 Falls Curve

City Chaska State MN Zip Code 55318

Purpose of Disbursement  
Consulting

003  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
11 / 01 / 2013

Amount of Each Disbursement this Period

1000.00

Transaction ID : 0017.7381

**C. Hannah Mohs**

Mailing Address 1116 Falls Curve

City Chaska State MN Zip Code 55318

Purpose of Disbursement  
Reimbursements- Office Supplies

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
11 / 12 / 2013

Amount of Each Disbursement this Period

60.71

Transaction ID : 0017.7570

**SUBTOTAL** of Disbursements This Page (optional).....

2060.71

**TOTAL** This Period (last page this line number only).....

14020120053

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 54 OF 61

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**JULIANNE MN**

Full Name (Last, First, Middle Initial) <b>A. National Sports Center</b>		Date of Disbursement MM / DD / YYYY 10 / 29 / 2013
Mailing Address 1700 105th Ave. NE		Amount of Each Disbursement this Period 307.37 Transaction ID : 0017.7556
City Blaino	State MN	
Zip Code 55449	Purpose of Disbursement Staff/Volunteer Food/Beverage	Category/ Type 007
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. Office Max</b>		Date of Disbursement MM / DD / YYYY 11 / 25 / 2013
Mailing Address 960 West 78th St		Amount of Each Disbursement this Period 374.05 Transaction ID : 0017.7448
City Chanhassen	State MN	
Zip Code 55317	Purpose of Disbursement Office Supplies	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. Office Max</b>		Date of Disbursement MM / DD / YYYY 12 / 13 / 2013
Mailing Address 960 West 78th St		Amount of Each Disbursement this Period 162.43 Transaction ID : 0017.7607
City Chanhassen	State MN	
Zip Code 55317	Purpose of Disbursement Office Supplies	Category/ Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	843.85
<b>TOTAL</b> This Period (last page this line number only).....	

14020120054

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 55 OF 61

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**JULIANNE MN**

Full Name (Last, First, Middle Initial)

**A. Julianno Ortman**

Mailing Address 8525 Mission Hills Lane

City Chanhassen State MN Zip Code 55317

Purpose of Disbursement Reimbursement (Travel, Supplies, Staff/volunteer food/Bverage)

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
10 / 14 / 2013

Amount of Each Disbursement this Period

875.62  
Transaction ID : 5317.7344

002  
Category/  
Type

**B. Julianno Ortman**

Mailing Address 8525 Mission Hills Lane

City Chanhassen State MN Zip Code 55317

Purpose of Disbursement Reimbursement (Transportation)

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
12 / 05 / 2013

Amount of Each Disbursement this Period

26.00  
Transaction ID : 5317.7464

002  
Category/  
Type

**C. Julianno Ortman**

Mailing Address 8525 Mission Hills Lane

City Chanhassen State MN Zip Code 55317

Purpose of Disbursement Reimbursement (Travel, technology services, Staff/volunteer food/beverage)

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
12 / 20 / 2013

Amount of Each Disbursement this Period

1062.28  
Transaction ID : 5317.7498

002  
Category/  
Type

SUBTOTAL of Disbursements This Page (optional).....

1963.90

TOTAL This Period (last page this line number only).....

14020120055

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 56 OF 61

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)  
**JULIANNE MN**

Full Name (Last, First, Middle Initial)

**A. Ray Ortman**

Mailing Address 8525 Mission Hills Lane

City Charhassen State MN Zip Code 55317

Purpose of Disbursement Reimbursement (Technology services, i.e. Verizon Cell service)

001  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
10 / 14 / 2013

Amount of Each Disbursement this Period

2167.79

Transaction ID : SH17.7346

**B. Patron Mexican Restaurant**

Mailing Address 207 N Chestnut St.

City Chaska State MN Zip Code 55318

Purpose of Disbursement Staff/Volunteer Food/Beverage

007  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
12 / 29 / 2013

Amount of Each Disbursement this Period

90.71

Transaction ID : SH17.7632

**C. Political Equity Consulting**

Mailing Address 3213 Duke St. #685

City Alexandria State VA Zip Code 22314

Purpose of Disbursement Consulting

003  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
11 / 03 / 2013

Amount of Each Disbursement this Period

2709.67

Transaction ID : SH17.7383

**SUBTOTAL** of Disbursements This Page (optional).....

4968.17

**TOTAL** This Period (last page this line number only).....

14020120056



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 57 OF 61	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**JULIANNE MN**

Full Name (Last, First, Middle Initial) <b>A. Political Equity Consulting</b>		Date of Disbursement MM / DD / YYYY 12 / 05 / 2013	
Mailing Address 3213 Duke St. #685		Amount of Each Disbursement this Period 6216.67 Transaction ID: \$17.7477	
City Alexandria	State VA	Zip Code 22314	Category/ Type 003
Purpose of Disbursement Consulting			
Candidate Name		Disbursement For: 2014	
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. Ryan Auto Mall</b>		Date of Disbursement MM / DD / YYYY 10 / 15 / 2013	
Mailing Address 911 Minnesota 55		Amount of Each Disbursement this Period 1403.64 Transaction ID: \$17.7355	
City Buffalo	State MN	Zip Code 55313	Category/ Type 002
Purpose of Disbursement Automotive			
Candidate Name		Disbursement For: 2014	
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

Full Name (Last, First, Middle Initial) <b>C. Ryan Auto Mall</b>		Date of Disbursement MM / DD / YYYY 11 / 25 / 2013	
Mailing Address 911 Minnesota 55		Amount of Each Disbursement this Period 659.25 Transaction ID: \$17.7452	
City Buffalo	State MN	Zip Code 55313	Category/ Type 002
Purpose of Disbursement Automotive			
Candidate Name		Disbursement For: 2014	
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	8279.56
<b>TOTAL</b> This Period (last page this line number only).....	

14020120057

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 58 OF 61

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**JULIANNE MN**

Full Name (Last, First, Middle Initial)

**A. Jim Sarborn**

Mailing Address 308 5th St W

City Waconia State MN Zip Code 55387

Purpose of Disbursement  
Consulting

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
10 / 09 / 2013

Amount of Each Disbursement this Period

1000.00

Transaction ID : 5817.7337

003  
Category/  
Type

**B. State Farm**

Mailing Address 600 Market St

City Chanhassen State MN Zip Code 55317

Purpose of Disbursement  
Insurance

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
11 / 20 / 2013

Amount of Each Disbursement this Period

113.85

Transaction ID : 5817.7578

001  
Category/  
Type

**C. State Farm**

Mailing Address 600 Market St

City Chanhassen State MN Zip Code 55317

Purpose of Disbursement  
Insurance

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
12 / 16 / 2013

Amount of Each Disbursement this Period

113.85

Transaction ID : 5817.7014

001  
Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional).....

1227.70

**TOTAL** This Period (last page this line number only).....

14020120058

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 59 OF 61

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**JULIANNE MN**

Full Name (Last, First, Middle Initial)

**A. Targeted Creative Communications, INC**

Date of Disbursement

M M / D D / Y Y Y Y  
11 / 13 / 2013

Mailing Address 106 S Columbus St

Amount of Each Disbursement this Period

1469.00

City Alexandria State VA Zip Code 22314

Transaction ID : 5017.7420

Purpose of Disbursement Advertising

004

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. The Propcor Group Corporation**

Date of Disbursement

M M / D D / Y Y Y Y  
11 / 14 / 2013

Mailing Address 435 E. Main St.  
Suite 250

Amount of Each Disbursement this Period

5211.75

City Greenwood State IN Zip Code 46143

Transaction ID : 5017.7427

Purpose of Disbursement Advertising

004

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C. TravLOCITY**

Date of Disbursement

M M / D D / Y Y Y Y  
10 / 29 / 2013

Mailing Address 3150 Sabre Drive

Amount of Each Disbursement this Period

415.64

City Southlake State TX Zip Code 76092

Transaction ID : 5017.7554

Purpose of Disbursement Travel Fees

002

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....

7097.19

**TOTAL** This Period (last page this line number only).....

14020120059

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 60 OF 61

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**JULIANNE MN**

Full Name (Last, First, Middle Initial)

**A. TravLOCITY**

Mailing Address 3150 Sabro Drive

City Southlake State TX Zip Code 76092

Purpose of Disbursement  
Travel Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
10 / 29 / 2013

Amount of Each Disbursement this Period

30.00  
Transaction ID : SH17.7557

002  
Category/  
Type

**B. TravLOCITY**

Mailing Address 3150 Sabro Drive

City Southlake State TX Zip Code 76092

Purpose of Disbursement  
Travel Fees

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
10 / 29 / 2013

Amount of Each Disbursement this Period

7.50  
Transaction ID : SH17.7558

002  
Category/  
Type

**C. V&H Properties LLC**

Mailing Address 5601 Oaklawn Ave

City Edina State MN Zip Code 55424

Purpose of Disbursement  
Rent

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
10 / 09 / 2013

Amount of Each Disbursement this Period

1000.00  
Transaction ID : SH17.7339

001  
Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional).....

1037.50

**TOTAL** This Period (last page this line number only).....

14020120060

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)  
**JULIANNE MN**

**A. V&H Properties LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 5601 Oaklawn Ave

City Edina State MN Zip Code 55424

Purpose of Disbursement Rent

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 12 / 2013

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SH17.7410

Category/Type: 001

**B. V& H Properties LLC**

Full Name (Last, First, Middle Initial)

Mailing Address 5601 Oaklawn Ave

City Edina State MN Zip Code 55424

Purpose of Disbursement Rent

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 10 / 2013

Amount of Each Disbursement this Period: 1000.00

Transaction ID : SH17.7480

Category/Type: 001

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 2000.00

**TOTAL** This Period (last page this line number only)..... 83822.74

14020120061

14020120062

ckson  
d  
MN 55387-9515

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE



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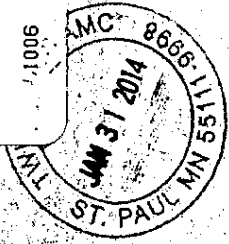
7011 3500 0001 7803 3825

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JAN 31, 14  
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Label 107R, January 2008

Label 107R, January 2008

JANCY ERICKSON  
SECRETARY

DANA K. MCCALLUM  
SUPERINTENDENT  
HART SENATE OFFICE BUILDING  
SUITE 232  
WASHINGTON, DC 20510-7115  
PHONE: (202) 224-0322

# United States Senate

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OFFICE OF PUBLIC RECORDS

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Date of Receipt

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Postmark **1-31-14**

USPS PRIORITY MAIL \_\_\_\_\_  
Postmark  
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

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FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

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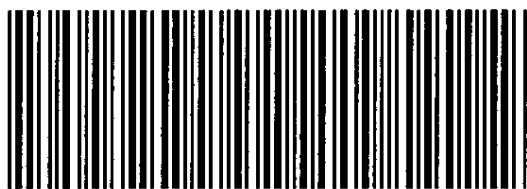
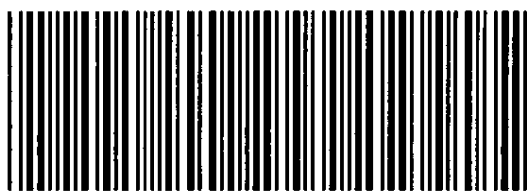
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PREPARER **DH** DATE PREPARED **2-5-14**

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