

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
REPUBLICAN PARTY OF MINNESOTA

ADDRESS (number and street) 525 PARK STREET
SUITE 250
 Check if different than previously reported. (ACC)
ST PAUL MN 55103-2145

2. **FEC IDENTIFICATION NUMBER** C00001313
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on _____ in the State of _____

5. Covering Period 08 01 2005 through 08 31 2005

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 Marina Taubenberger

Signature of Treasurer Electronically Filed by Marina Taubenberger Date 02 20 2007

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
REPUBLICAN PARTY OF MINNESOTA

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	5

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>5</td></tr></table>	Y	Y	Y	Y	2	0	0	5		117845.96
Y	Y	Y	Y							
2	0	0	5							
(b) Cash on Hand at Beginning of Reporting Period	561601.26									
(c) Total Receipts (from Line 19)	241439.01	2577249.32								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	803040.27	2695095.28								
7. Total Disbursements (from Line 31)	286636.96	2178691.97								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	516403.31	516403.31								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
REPUBLICAN PARTY OF MINNESOTA

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	5

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	35800.00	306920.00
(i) Itemized (use Schedule A)	133119.24	1807515.38
(ii) Unitemized	168919.24	2114435.38
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	168919.24	2114435.38
12. Transfers From Affiliated/Other Party Committees	20000.00	39259.67
13. All Loans Received	0.00	35000.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	1193.21	8109.86
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	1326.56	39776.13
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	50000.00	335668.28
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	50000.00	335668.28
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	241439.01	2577249.32
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	191439.01	2241581.04

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	22691.55	168336.45
(ii) Non-Federal Share.....	85363.42	633272.52
(b) Other Federal Operating Expenditures.....	155981.99	1228804.76
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	264036.96	2030413.73
22. Transfers to Affiliated/Other Party Committees.....	22500.00	22500.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	50000.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	200.00
(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 28(a), (b), and (c))	0.00	200.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	100.00	75578.24
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	100.00	75578.24
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	286636.96	2178691.97
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	201273.54	1545419.45

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	168919.24	2114435.38
34. Total Contribution Refunds (from Line 28(d))	0.00	200.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	168919.24	2114235.38
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	178673.54	1397141.21
37. Offsets to Operating Expenditures (from Line 15, page 3)	1193.21	8109.86
38. Net Operating Expenditures (subtract Line 37 from Line 36)	177480.33	1389031.35

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 / 121						
	(check only one)							
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16

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)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial)
Allen Christy

Mailing Address 2600 Cherrywood Rd

City State Zip Code
Minnetonka MN 55305

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

Name of Employer Mackall Crouse Moore Occupation Attorney

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 16 / 2005

Transaction ID: SA11A1.34659

Amount of Each Receipt this Period
5000.00

B. Full Name (Last, First, Middle Initial)
Mr. Vernon Heath

Mailing Address 4725 Hibiscus Ave.

City State Zip Code
Minneapolis MN 55435

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

Name of Employer Rosemont Inc. Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 16 / 2005

Transaction ID: SA11A1.34661

Amount of Each Receipt this Period
10000.00

C. Full Name (Last, First, Middle Initial)
Mr. Les Knoke, Jr.

Mailing Address 8911 Legends Club Drive

City State Zip Code
Prior Lake MN 55372

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

Name of Employer Knoke & Associates Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 24 / 2005

Transaction ID: SA11A1.34662

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)	▶	20000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 121
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) Kenneth Knuth Mailing Address 1014 140th Ave City Slayton State MN Zip Code 56172 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 08 / 19 / 2005 Transaction ID: SA11A1.34663 Amount of Each Receipt this Period 250.00
Name of Employer Finberg Eng Occupation Engineer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) Mr. Thomas Kordonowy Mailing Address 20500 Lakeview Avenue City Excelsior State MN Zip Code 55331 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 08 / 19 / 2005 Transaction ID: SA11A1.34665 Amount of Each Receipt this Period 5000.00
Name of Employer Retired Occupation INFORMATION REQUESTED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

C. Full Name (Last, First, Middle Initial) Mary Malevich Mailing Address PO Box 46654 City Eden Prairie State MN Zip Code 55344 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 08 / 19 / 2005 Transaction ID: SA11A1.34666 Amount of Each Receipt this Period 50.00
Name of Employer retired Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	5300.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 121
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Laura McGinn		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 2 / 2 0 0 5	
Mailing Address 1630 Iowa Ave E		Transaction ID: SA11A1.34667	
City State Zip Code Saint Paul MN 55106	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Homemaker	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Thomas Menne		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 5 / 2 0 0 5	
Mailing Address 7733 E Viking Blvd		Transaction ID: SA11A1.34669	
City State Zip Code Chisago City MN 55013	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Premier Marine	Occupation VP		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Brian Sullivan		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 0 1 / 2 0 0 5	
Mailing Address 3125 Fox St		Transaction ID: SA11A1.34671	
City State Zip Code Orono MN 55356	Amount of Each Receipt this Period 10000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer self	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 10000.00		

SUBTOTAL of Receipts This Page (optional) ▶	10500.00
TOTAL This Period (last page this line number only) ▶	35800.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 121
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial)
 REPUBLICAN NATIONAL COMMITTEE - RNC

Mailing Address **310 FIRST STREET S.E.**

City **WASHINGTON** State **DC** Zip Code **20003**

FEC ID number of contributing federal political committee. **C C00003418**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **7888.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
08 / 02 / 2005

Transaction ID: SA12.34674

Amount of Each Receipt this Period
6000.00

Transfer

B. Full Name (Last, First, Middle Initial)
 REPUBLICAN NATIONAL COMMITTEE - RNC

Mailing Address **310 FIRST STREET S.E.**

City **WASHINGTON** State **DC** Zip Code **20003**

FEC ID number of contributing federal political committee. **C C00003418**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **21888.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
08 / 17 / 2005

Transaction ID: SA12.34672

Amount of Each Receipt this Period
14000.00

Transfer from affiliate

SUBTOTAL of Receipts This Page (optional)	20000.00
TOTAL This Period (last page this line number only)	20000.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 121
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input checked="" type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial)
 Dwight Tostenson

Mailing Address 5137 William Ave

City State Zip Code
 Edina MN 55436

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 5965.57

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 19 / 2005

Transaction ID: SA15.34658

Amount of Each Receipt this Period
 1193.21

Cobra

SUBTOTAL of Receipts This Page (optional)	▶	1193.21
TOTAL This Period (last page this line number only)	▶	1193.21

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 11 / 121
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Alliance Bank		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 3 0 / 2 0 0 5
Mailing Address 444 Cedar St		Transaction ID: SA17.34675
City State Zip Code St Paul MN 55101	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 165.11
Name of Employer	Occupation	Interest Income
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 35808.93	

Full Name (Last, First, Middle Initial) B. Minnesota Department of Revenue		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 5 / 2 0 0 5
Mailing Address PO Box 821		Transaction ID: SA17.34673
City State Zip Code St Paul MN 55115	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1161.45
Name of Employer	Occupation	Tax check-off
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 38967.20	

SUBTOTAL of Receipts This Page (optional)	▶	1326.56
TOTAL This Period (last page this line number only)	▶	1326.56

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Alliance Bank		Transaction ID: SB21B.34623	
Mailing Address 444 Cedar St		Date of Disbursement 08 / 15 / 2005	
City St Paul	State MN	Zip Code 55101	Amount of Each Disbursement this Period 18661.61
Purpose of Disbursement Payroll taxes		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Alliance Bank		Transaction ID: SB21B.34624	
Mailing Address 444 Cedar St		Date of Disbursement 08 / 30 / 2005	
City St Paul	State MN	Zip Code 55101	Amount of Each Disbursement this Period 18304.88
Purpose of Disbursement Payroll taxes		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Christopher Alt		Transaction ID: SB21B.34238	
Mailing Address 2210 Bloomington Ave		Date of Disbursement 08 / 05 / 2005	
City Minneapolis	State MN	Zip Code 55404	Amount of Each Disbursement this Period 265.49
Purpose of Disbursement Salary		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	37231.98
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 13 / 121

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Christopher Alt		Transaction ID: SB21B.34418 Date of Disbursement MM / DD / YYYY 08 / 19 / 2005
Mailing Address 2210 Bloomington Ave		Amount of Each Disbursement this Period 357.24
City Minneapolis State MN Zip Code 55404		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. American Express Financial		Transaction ID: SB21B.34616 Date of Disbursement MM / DD / YYYY 08 / 25 / 2005	
Mailing Address P.O. Box 5167		Amount of Each Disbursement this Period 670.00	
City Westborough State MA Zip Code 01581			
Purpose of Disbursement IRA's Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Michael J. Anderson		Transaction ID: SB21B.34240 Date of Disbursement MM / DD / YYYY 08 / 05 / 2005	
Mailing Address 475 Dayton Ave #1 #228		Amount of Each Disbursement this Period 267.95	
City St Paul State MN Zip Code 55102			
Purpose of Disbursement Salary Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	1295.19
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Michael J. Anderson		Transaction ID: SB21B.34416 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 5
Mailing Address 475 Dayton Ave #1 #228		Amount of Each Disbursement this Period 335.89
City St Paul State MN Zip Code 55102	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Peter Aurich		Transaction ID: SB21B.34268 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 5
Mailing Address 3391 Oxford Bay		Amount of Each Disbursement this Period 929.69
City Woodbury State MN Zip Code 55125	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Peter Aurich		Transaction ID: SB21B.34466 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 5
Mailing Address 3391 Oxford Bay		Amount of Each Disbursement this Period 929.69
City Woodbury State MN Zip Code 55125	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2195.27
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Peter Aurich		Transaction ID: SB21B.34467 Date of Disbursement 08 / 31 / 2005	
Mailing Address 3391 Oxford Bay		Amount of Each Disbursement this Period 1033.42	
City Woodbury State MN Zip Code 55125	Purpose of Disbursement Salary Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Auto Owner's Insurance		Transaction ID: SB21B.34625 Date of Disbursement 08 / 01 / 2005	
Mailing Address PO Box 30278		Amount of Each Disbursement this Period 1001.48	
City Lansing State MI Zip Code 48909	Purpose of Disbursement Insurance Expense Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Patrick Beezley		Transaction ID: SB21B.34217 Date of Disbursement 08 / 05 / 2005	
Mailing Address 577 Grand Ave		Amount of Each Disbursement this Period 331.85	
City St Paul State MN Zip Code 55102	Purpose of Disbursement Salary Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2366.75
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Patrick Beezley		Transaction ID: SB21B.34436 Date of Disbursement 08 / 19 / 2005
Mailing Address 577 Grand Ave		Amount of Each Disbursement this Period 263.72
City St Paul	State MN	
Zip Code 55102		
Purpose of Disbursement Salary		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Blue Cross Blue Shield of Minnesota		Transaction ID: SB21B.34454 Date of Disbursement 08 / 01 / 2005
Mailing Address P.O. Box 64179		Amount of Each Disbursement this Period 6694.00
City St. Paul	State MN	
Zip Code 55164-0179		
Purpose of Disbursement Insurance Expense		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Christe Capistrant		Transaction ID: SB21B.34259 Date of Disbursement 08 / 05 / 2005
Mailing Address 111 E Kellogg Blvd #2911		Amount of Each Disbursement this Period 344.18
City St Paul	State MN	
Zip Code 55101		
Purpose of Disbursement Salary		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	7301.90
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) 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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Christe Capistrant		Transaction ID: SB21B.34397 Date of Disbursement MM / DD / YYYY 08 / 19 / 2005
Mailing Address 111 E Kellogg Blvd #2911		Amount of Each Disbursement this Period 336.22
City St Paul State MN Zip Code 55101	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Joel Cary		Transaction ID: SB21B.34271 Date of Disbursement MM / DD / YYYY 08 / 15 / 2005
Mailing Address 1290 Loma Linda Ln		Amount of Each Disbursement this Period 2396.15
City Mound State MN Zip Code 55364	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Joel Cary		Transaction ID: SB21B.34471 Date of Disbursement MM / DD / YYYY 08 / 31 / 2005
Mailing Address 1290 Loma Linda Ln		Amount of Each Disbursement this Period 2396.15
City Mound State MN Zip Code 55364	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	5128.52
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Joel Chavez		Transaction ID: SB21B.34242	
Mailing Address 475 Dayton Ave Apt 1		Date of Disbursement MM / DD / YYYY 08 / 05 / 2005	
City St Paul	State MN	Zip Code 55102	Amount of Each Disbursement this Period 634.79
Purpose of Disbursement Salary		<input type="checkbox"/> Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Joel Chavez		Transaction ID: SB21B.34414	
Mailing Address 475 Dayton Ave Apt 1		Date of Disbursement MM / DD / YYYY 08 / 19 / 2005	
City St Paul	State MN	Zip Code 55102	Amount of Each Disbursement this Period 611.28
Purpose of Disbursement Salary		<input type="checkbox"/> Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Ryan Childers		Transaction ID: SB21B.34446	
Mailing Address 680 Stewart Ave RC		Date of Disbursement MM / DD / YYYY 08 / 19 / 2005	
City St Paul	State MN	Zip Code 55102	Amount of Each Disbursement this Period 347.05
Purpose of Disbursement Salary		<input type="checkbox"/> Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	1593.12
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) 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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Gina Countyman		Transaction ID: SB21B.34273 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 5
Mailing Address 2458 County Road I # 305		Amount of Each Disbursement this Period 1079.19
City Mounds View State MN Zip Code 55112		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Gina Countyman		Transaction ID: SB21B.34473 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 5
Mailing Address 2458 County Road I # 305		Amount of Each Disbursement this Period 1079.19
City Mounds View State MN Zip Code 55112		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Christian Darouni		Transaction ID: SB21B.34228 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 5 / 2 0 0 5
Mailing Address 758 Reaney Ave		Amount of Each Disbursement this Period 691.09
City St Paul State MN Zip Code 55106		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2849.47
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Christian Darouni		Transaction ID: SB21B.34425 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 5
Mailing Address 758 Reaney Ave		Amount of Each Disbursement this Period 708.05
City St Paul State MN Zip Code 55106	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Patty Daugherty		Transaction ID: SB21B.34258 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 5 / 2 0 0 5
Mailing Address 1395a Farrington		Amount of Each Disbursement this Period 499.81
City St Paul State MN Zip Code 55104	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Patty Daugherty		Transaction ID: SB21B.34398 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 5
Mailing Address 1395a Farrington		Amount of Each Disbursement this Period 583.90
City St Paul State MN Zip Code 55104	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1791.76
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) 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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Janice Duncan		Transaction ID: SB21B.34538 Date of Disbursement MM / DD / YYYY 08 / 02 / 2005
Mailing Address SPO 2180 - 700 College Drive Luther College		Amount of Each Disbursement this Period 350.00
City Decorah State IA Zip Code 52101		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Amber Dupre		Transaction ID: SB21B.34208 Date of Disbursement MM / DD / YYYY 08 / 05 / 2005
Mailing Address 53 W 7th St		Amount of Each Disbursement this Period 296.52
City Richfield State MN Zip Code 55423		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Amber Dupre		Transaction ID: SB21B.34443 Date of Disbursement MM / DD / YYYY 08 / 19 / 2005
Mailing Address 53 W 7th St		Amount of Each Disbursement this Period 272.12
City Richfield State MN Zip Code 55423		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	918.64
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Nick Erickson		Transaction ID: SB21B.34272 Date of Disbursement 08 / 15 / 2005	
Mailing Address 9344 134th Street		Amount of Each Disbursement this Period 130.55	
City Savage State MN Zip Code 55378	Purpose of Disbursement Salary Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Nick Erickson		Transaction ID: SB21B.34472 Date of Disbursement 08 / 31 / 2005	
Mailing Address 9344 134th Street		Amount of Each Disbursement this Period 130.55	
City Savage State MN Zip Code 55378	Purpose of Disbursement Salary Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Thomas Erickson		Transaction ID: SB21B.34277 Date of Disbursement 08 / 15 / 2005	
Mailing Address 680 Stewart Ave eri		Amount of Each Disbursement this Period 130.55	
City St Paul State MN Zip Code 55102	Purpose of Disbursement Salary Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	391.65
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Thomas Erickson		Transaction ID: SB21B.34477 Date of Disbursement 08 / 31 / 2005
Mailing Address 680 Stewart Ave eri		Amount of Each Disbursement this Period 130.55
City St Paul State MN Zip Code 55102		
Purpose of Disbursement Salary Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Pamela Finney		Transaction ID: SB21B.34434 Date of Disbursement 08 / 19 / 2005
Mailing Address 441 Wheeler St N #1		Amount of Each Disbursement this Period 98.74
City St Paul State MN Zip Code 55104		
Purpose of Disbursement Salary Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Kent Fitch		Transaction ID: SB21B.34229 Date of Disbursement 08 / 05 / 2005
Mailing Address 936 Armstrong Ave		Amount of Each Disbursement this Period 272.67
City St Paul State MN Zip Code 55102		
Purpose of Disbursement Salary Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	501.96
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) 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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Clinton Foster		Transaction ID: SB21B.34254 Date of Disbursement 08 / 05 / 2005	
Mailing Address 386 Sterling St S		Amount of Each Disbursement this Period 409.54	
City St Paul State MN Zip Code 55119	Purpose of Disbursement Salary Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Clinton Foster		Transaction ID: SB21B.34402 Date of Disbursement 08 / 19 / 2005	
Mailing Address 386 Sterling St S		Amount of Each Disbursement this Period 457.01	
City St Paul State MN Zip Code 55119	Purpose of Disbursement Salary Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Benjamin Golnik		Transaction ID: SB21B.34275 Date of Disbursement 08 / 15 / 2005	
Mailing Address 76 Western Ave Apt 2		Amount of Each Disbursement this Period 1815.21	
City St Paul State MN Zip Code 55102	Purpose of Disbursement Salary Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2681.76
TOTAL This Period (last page this line number only) ▶	[Empty Box]

**SCHEDULE B (FEC Form 3X)
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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Benjamin Golnik		Transaction ID: SB21B.34475
Mailing Address 76 Western Ave Apt 2		Date of Disbursement MM / DD / YYYY 08 / 31 / 2005
City St Paul	State MN	Zip Code 55102
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 1815.21
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) B. Steven Goodwin		Transaction ID: SB21B.34214
Mailing Address 744 Randolph Ave		Date of Disbursement MM / DD / YYYY 08 / 05 / 2005
City St Paul	State MN	Zip Code 55102
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 577.67
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) C. Steven Goodwin		Transaction ID: SB21B.34438
Mailing Address 744 Randolph Ave		Date of Disbursement MM / DD / YYYY 08 / 19 / 2005
City St Paul	State MN	Zip Code 55102
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 538.71
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

SUBTOTAL of Disbursements This Page (optional)	2931.59
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. William Gunlogson		Transaction ID: SB21B.34227 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 5 / 2 0 0 5
Mailing Address 680 Stewart Ave WG		Amount of Each Disbursement this Period 422.18
City St Paul State MN Zip Code 55102	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. William Gunlogson		Transaction ID: SB21B.34426 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 5
Mailing Address 680 Stewart Ave WG		Amount of Each Disbursement this Period 233.86
City St Paul State MN Zip Code 55102	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Dallas Hansen		Transaction ID: SB21B.34224 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 5 / 2 0 0 5
Mailing Address 11210 Partridge St DH		Amount of Each Disbursement this Period 228.92
City Coon Rapids State MN Zip Code 55433	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	884.96
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) 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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Joseph Hansen		Transaction ID: SB21B.34218 Date of Disbursement MM / DD / YYYY 08 / 05 / 2005
Mailing Address 1879 LaCrosse Ave		Amount of Each Disbursement this Period 356.98
City St Paul State MN Zip Code 55119		
Purpose of Disbursement Salary Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Joseph Hansen		Transaction ID: SB21B.34435 Date of Disbursement MM / DD / YYYY 08 / 19 / 2005
Mailing Address 1879 LaCrosse Ave		Amount of Each Disbursement this Period 266.49
City St Paul State MN Zip Code 55119		
Purpose of Disbursement Salary Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Sarah Hansen-Jones		Transaction ID: SB21B.34253 Date of Disbursement MM / DD / YYYY 08 / 05 / 2005
Mailing Address 505 E Hoyt Ave		Amount of Each Disbursement this Period 520.94
City St Paul State MN Zip Code 55105		
Purpose of Disbursement Salary Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1144.41
TOTAL This Period (last page this line number only) ▶	[]

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Sarah Hansen-Jones		Transaction ID: SB21B.34404
Mailing Address 505 E Hoyt Ave		Date of Disbursement MM / DD / YYYY 08 / 19 / 2005
City St Paul	State MN	Zip Code 55105
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 464.36
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Aaron Heidebrink		Transaction ID: SB21B.34252
Mailing Address 1975 W University Ave #242		Date of Disbursement MM / DD / YYYY 08 / 05 / 2005
City St Paul	State MN	Zip Code 55105
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 1033.77
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Aaron Heidebrink		Transaction ID: SB21B.34405
Mailing Address 1975 W University Ave #242		Date of Disbursement MM / DD / YYYY 08 / 19 / 2005
City St Paul	State MN	Zip Code 55105
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 893.36
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	2391.49
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) 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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Thomas Hoffman		Transaction ID: SB21B.34226 Date of Disbursement MM / DD / YYYY 08 / 05 / 2005
Mailing Address 6051 Courtyly Alcove #E		Amount of Each Disbursement this Period 234.63
City Woodbury State MN Zip Code 55125		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Thomas Hoffman		Transaction ID: SB21B.34427 Date of Disbursement MM / DD / YYYY 08 / 19 / 2005	
Mailing Address 6051 Courtyly Alcove #E		Amount of Each Disbursement this Period 224.79	
City Woodbury State MN Zip Code 55125			
Purpose of Disbursement Salary Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Andrew Holmgren		Transaction ID: SB21B.34250 Date of Disbursement MM / DD / YYYY 08 / 05 / 2005	
Mailing Address 545 N Snelling Ave Apt 227		Amount of Each Disbursement this Period 726.21	
City St Paul State MN Zip Code 55107			
Purpose of Disbursement Salary Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	1185.63
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Andrew Holmgren		Transaction ID: SB21B.34407
Mailing Address 545 N Snelling Ave Apt 227		Date of Disbursement MM / DD / YYYY 08 / 19 / 2005
City St Paul	State MN	Zip Code 55107
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 717.52
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Eric Hoplin		Transaction ID: SB21B.34286
Mailing Address 13612 Bryant Pl		Date of Disbursement MM / DD / YYYY 08 / 15 / 2005
City Burnsville	State MN	Zip Code 55337
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 1861.61
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Eric Hoplin		Transaction ID: SB21B.34485
Mailing Address 13612 Bryant Pl		Date of Disbursement MM / DD / YYYY 08 / 31 / 2005
City Burnsville	State MN	Zip Code 55337
Purpose of Disbursement Salary		Amount of Each Disbursement this Period 1861.61
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	4440.74
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Rachel Horn		Transaction ID: SB21B.34279	
Mailing Address 10109 Zenith Road		Date of Disbursement 08 / 15 / 2005	
City Bloomington	State MN	Zip Code 55431	Amount of Each Disbursement this Period 709.98
Purpose of Disbursement Salary		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Rachel Horn		Transaction ID: SB21B.34478	
Mailing Address 10109 Zenith Road		Date of Disbursement 08 / 31 / 2005	
City Bloomington	State MN	Zip Code 55431	Amount of Each Disbursement this Period 709.98
Purpose of Disbursement Salary		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Ronald Huettl		Transaction ID: SB21B.34264	
Mailing Address 70 Virginia St #1		Date of Disbursement 08 / 15 / 2005	
City St Paul	State MN	Zip Code 55107	Amount of Each Disbursement this Period 1204.99
Purpose of Disbursement Salary		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	2624.95
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3X)
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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Ronald Huettl		Transaction ID: SB21B.34462 Date of Disbursement 08 / 31 / 2005	
Mailing Address 70 Virginia St #1		Amount of Each Disbursement this Period 1204.99	
City St Paul State MN Zip Code 55107	Purpose of Disbursement Salary Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Heidi Hunstad		Transaction ID: SB21B.34233 Date of Disbursement 08 / 05 / 2005	
Mailing Address 9431 Indian Blvd		Amount of Each Disbursement this Period 111.01	
City Cottage Grove State MN Zip Code 55016	Purpose of Disbursement Salary Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Kathleen Hupalo		Transaction ID: SB21B.34237 Date of Disbursement 08 / 05 / 2005	
Mailing Address 684 Delaware Ave		Amount of Each Disbursement this Period 355.40	
City St Paul State MN Zip Code 55107	Purpose of Disbursement Salary Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1671.40
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) 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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Kathleen Hupalo		Transaction ID: SB21B.34419 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 5
Mailing Address 684 Delaware Ave		Amount of Each Disbursement this Period 373.49
City St Paul State MN Zip Code 55107		
Purpose of Disbursement Salary Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Steven Jepsen		Transaction ID: SB21B.34274 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 5
Mailing Address 5805 Eastview Drive		Amount of Each Disbursement this Period 1045.72
City Edina State MN Zip Code 55436		
Purpose of Disbursement Salary Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Steven Jepsen		Transaction ID: SB21B.34474 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 5
Mailing Address 5805 Eastview Drive		Amount of Each Disbursement this Period 1045.72
City Edina State MN Zip Code 55436		
Purpose of Disbursement Salary Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	2464.93
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) 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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Megan Johnson		Transaction ID: SB21B.34280 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 5
Mailing Address 1140 Northwood Drive # 227		Amount of Each Disbursement this Period 683.47
City Eagan State MN Zip Code 55121	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Megan Johnson		Transaction ID: SB21B.34479 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 5
Mailing Address 1140 Northwood Drive # 227		Amount of Each Disbursement this Period 683.47
City Eagan State MN Zip Code 55121	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Todd D Johnson		Transaction ID: SB21B.34230 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 5 / 2 0 0 5
Mailing Address 569 Grand Ave		Amount of Each Disbursement this Period 929.36
City St Paul State MN Zip Code 55102	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2296.30
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) 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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Todd D Johnson		Transaction ID: SB21B.34269 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 5
Mailing Address 569 Grand Ave		Amount of Each Disbursement this Period 1188.01
City St Paul State MN Zip Code 55102	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Todd D Johnson		Transaction ID: SB21B.34468 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 5
Mailing Address 569 Grand Ave		Amount of Each Disbursement this Period 1188.01
City St Paul State MN Zip Code 55102	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Todd D Johnson		Transaction ID: SB21B.34469 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 5
Mailing Address 569 Grand Ave		Amount of Each Disbursement this Period 1248.91
City St Paul State MN Zip Code 55102	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3624.93
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Angela Kaiser		Transaction ID: SB21B.34213	
Mailing Address 1772 Oakdale Ave #108		Date of Disbursement MM / DD / YYYY 08 / 05 / 2005	
City W. St Paul	State MN	Zip Code 55118	Amount of Each Disbursement this Period 242.88
Purpose of Disbursement Salary		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Angela Kaiser		Transaction ID: SB21B.34439	
Mailing Address 1772 Oakdale Ave #108		Date of Disbursement MM / DD / YYYY 08 / 19 / 2005	
City W. St Paul	State MN	Zip Code 55118	Amount of Each Disbursement this Period 231.91
Purpose of Disbursement Salary		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Angela Kaiser		Transaction ID: SB21B.34617	
Mailing Address 1772 Oakdale Ave #108		Date of Disbursement MM / DD / YYYY 08 / 28 / 2005	
City W. St Paul	State MN	Zip Code 55118	Amount of Each Disbursement this Period 274.45
Purpose of Disbursement Salary		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	749.24
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) 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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Daniel Katz		Transaction ID: SB21B.34247 Date of Disbursement MM / DD / YYYY 08 / 05 / 2005
Mailing Address 731 21st, Ave. - Campus Box 1465		Amount of Each Disbursement this Period 369.25
City Minneapolis State MN Zip Code 55454		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Daniel Katz		Transaction ID: SB21B.34410 Date of Disbursement MM / DD / YYYY 08 / 19 / 2005
Mailing Address 731 21st, Ave. - Campus Box 1465		Amount of Each Disbursement this Period 215.61
City Minneapolis State MN Zip Code 55454		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. James Klein		Transaction ID: SB21B.34231 Date of Disbursement MM / DD / YYYY 08 / 05 / 2005
Mailing Address 520 Sunningdale Dr		Amount of Each Disbursement this Period 689.45
City Gross Pointe Woods State MI Zip Code 48236		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1274.31
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. James Klein		Transaction ID: SB21B.34424 Date of Disbursement MM / DD / YYYY 08 / 19 / 2005	
Mailing Address 520 Sunningdale Dr		Amount of Each Disbursement this Period 635.27	
City Gross Pointe Woods State MI Zip Code 48236	Purpose of Disbursement Salary Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Crystal Lachermeier		Transaction ID: SB21B.34281 Date of Disbursement MM / DD / YYYY 08 / 15 / 2005	
Mailing Address 1011 13th Ave SE		Amount of Each Disbursement this Period 736.49	
City Minneapolis State MN Zip Code 55414	Purpose of Disbursement Salary Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Crystal Lachermeier		Transaction ID: SB21B.34480 Date of Disbursement MM / DD / YYYY 08 / 31 / 2005	
Mailing Address 1011 13th Ave SE		Amount of Each Disbursement this Period 736.49	
City Minneapolis State MN Zip Code 55414	Purpose of Disbursement Salary Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2108.25
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) 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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Jessica Lawler		Transaction ID: SB21B.34206 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 5 / 2 0 0 5
Mailing Address 223 Bates St #707		Amount of Each Disbursement this Period 302.03
City St Paul State MN Zip Code 55102	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jessica Lawler		Transaction ID: SB21B.34445 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 5
Mailing Address 223 Bates St #707		Amount of Each Disbursement this Period 318.02
City St Paul State MN Zip Code 55102	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Nicholas Leonetti		Transaction ID: SB21B.34239 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 5 / 2 0 0 5
Mailing Address 968 Lawson Ave. E.		Amount of Each Disbursement this Period 285.20
City St. Paul State MN Zip Code 55106	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	905.25
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Nicholas Leonetti		Transaction ID: SB21B.34417 Date of Disbursement 08 / 19 / 2005	
Mailing Address 968 Lawson Ave. E.		Amount of Each Disbursement this Period 315.64	
City St. Paul State MN Zip Code 55106	Purpose of Disbursement Salary Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Alexander Lindorff		Transaction ID: SB21B.34210 Date of Disbursement 08 / 05 / 2005	
Mailing Address 2338 S Shore Blvd		Amount of Each Disbursement this Period 112.80	
City White Bear Lake State MN Zip Code 55110	Purpose of Disbursement Salary Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Hans Lindstrom		Transaction ID: SB21B.34244 Date of Disbursement 08 / 05 / 2005	
Mailing Address 1721 Nebraska Ave E		Amount of Each Disbursement this Period 386.42	
City St Paul State MN Zip Code 55106	Purpose of Disbursement Salary Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	814.86
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Hans Lindstrom		Transaction ID: SB21B.34413 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 5
Mailing Address 1721 Nebraska Ave E		Amount of Each Disbursement this Period 283.19
City St Paul State MN Zip Code 55106	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Barbara Linert		Transaction ID: SB21B.34265 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 5
Mailing Address 4282 Braddock Trl		Amount of Each Disbursement this Period 887.79
City Eagan State MN Zip Code 55123	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Barbara Linert		Transaction ID: SB21B.34463 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 5
Mailing Address 4282 Braddock Trl		Amount of Each Disbursement this Period 887.79
City Eagan State MN Zip Code 55123	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2058.77
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) 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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Jennifer Lubich		Transaction ID: SB21B.34209 Date of Disbursement MM / DD / YYYY 08 / 05 / 2005
Mailing Address 3571 Bailey Ridge Bay		Amount of Each Disbursement this Period 314.35
City Woodbury State MN Zip Code 55125	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jennifer Lubich		Transaction ID: SB21B.34442 Date of Disbursement MM / DD / YYYY 08 / 19 / 2005
Mailing Address 3571 Bailey Ridge Bay		Amount of Each Disbursement this Period 343.30
City Woodbury State MN Zip Code 55125	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Donna Magee		Transaction ID: SB21B.34234 Date of Disbursement MM / DD / YYYY 08 / 05 / 2005
Mailing Address 680 Stewart Ave DM		Amount of Each Disbursement this Period 246.48
City St Paul State MN Zip Code 55102	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	904.13
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Donna Magee		Transaction ID: SB21B.34422 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 5
Mailing Address 680 Stewart Ave DM		Amount of Each Disbursement this Period 574.09
City St Paul State MN Zip Code 55102		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jeannette Manning		Transaction ID: SB21B.34257 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 5 / 2 0 0 5
Mailing Address 749 Ottawa Ave		Amount of Each Disbursement this Period 534.29
City St Paul State MN Zip Code 55104		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jeannette Manning		Transaction ID: SB21B.34399 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 5
Mailing Address 749 Ottawa Ave		Amount of Each Disbursement this Period 510.24
City St Paul State MN Zip Code 55104		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1618.62
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) 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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Jessica McGlaulin		Transaction ID: SB21B.34282 Date of Disbursement 08 / 15 / 2005	
Mailing Address 1500 St. Olaf Ave.		Amount of Each Disbursement this Period 709.98	
City Northfield State MN Zip Code 55057	Purpose of Disbursement Salary Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Jessica McGlaulin		Transaction ID: SB21B.34481 Date of Disbursement 08 / 31 / 2005	
Mailing Address 1500 St. Olaf Ave.		Amount of Each Disbursement this Period 709.98	
City Northfield State MN Zip Code 55057	Purpose of Disbursement Salary Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Landrey McKinzie		Transaction ID: SB21B.34245 Date of Disbursement 08 / 05 / 2005	
Mailing Address 7338 Jewel Ave S		Amount of Each Disbursement this Period 285.57	
City Cottage Grove State MN Zip Code 55016	Purpose of Disbursement Salary Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1705.53
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Landrey McKinzie		Transaction ID: SB21B.34412 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 5
Mailing Address 7338 Jewel Ave S		Amount of Each Disbursement this Period 295.84
City Cottage Grove	State MN	
Zip Code 55016		
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. William Milbach		Transaction ID: SB21B.34256 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 5 / 2 0 0 5
Mailing Address 1438 N Pascal		Amount of Each Disbursement this Period 1535.25
City St Paul	State MN	
Zip Code 55102		
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. William Milbach		Transaction ID: SB21B.34400 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 5
Mailing Address 1438 N Pascal		Amount of Each Disbursement this Period 1094.69
City St Paul	State MN	
Zip Code 55102		
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	2925.78
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Minn UC Fund		Transaction ID: SB21B.34564 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 9 / 2 0 0 5
Mailing Address PO Box 821		Amount of Each Disbursement this Period 24.61
City Minneapolis State MN Zip Code 55480	Purpose of Disbursement Payroll taxes Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. Adam Mohler		Transaction ID: SB21B.34248 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 5 / 2 0 0 5
Mailing Address 3924 Cedar Grove Pkwy Apt 207		Amount of Each Disbursement this Period 1036.41
City Eagan State MN Zip Code 55122	Purpose of Disbursement Salary Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. Adam Mohler		Transaction ID: SB21B.34409 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 5
Mailing Address 3924 Cedar Grove Pkwy Apt 207		Amount of Each Disbursement this Period 925.42
City Eagan State MN Zip Code 55122	Purpose of Disbursement Salary Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	1986.44
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Melissa Nielsen		Transaction ID: SB21B.34223 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 5 / 2 0 0 5
Mailing Address 6181 Tahoe Ct		Amount of Each Disbursement this Period 200.40
City Woodbury State MN Zip Code 55125		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Melissa Nielsen		Transaction ID: SB21B.34429 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 5
Mailing Address 6181 Tahoe Ct		Amount of Each Disbursement this Period 209.25
City Woodbury State MN Zip Code 55125		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Harry Niezgocki		Transaction ID: SB21B.34494 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 5
Mailing Address 8261 Red Oak Dr		Amount of Each Disbursement this Period 1134.00
City Stillwater State MN Zip Code 55082		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1543.65
TOTAL This Period (last page this line number only) ▶	[]

**SCHEDULE B (FEC Form 3X)
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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Harry Niezgocki		Transaction ID: SB21B.34586 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 7 / 2 0 0 5
Mailing Address 8261 Red Oak Dr		Amount of Each Disbursement this Period 882.00
City Stillwater State MN Zip Code 55082	Purpose of Disbursement Salary Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Richard Oien		Transaction ID: SB21B.34220 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 5 / 2 0 0 5
Mailing Address 2370 Co Rd I #104		Amount of Each Disbursement this Period 259.00
City Mounds View State MN Zip Code 55112	Purpose of Disbursement Salary Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Richard Oien		Transaction ID: SB21B.34432 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 5
Mailing Address 2370 Co Rd I #104		Amount of Each Disbursement this Period 216.78
City Mounds View State MN Zip Code 55112	Purpose of Disbursement Salary Candidate Name Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1357.78
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Jeremy Olson		Transaction ID: SB21B.34236 Date of Disbursement MM / DD / YYYY 08 / 05 / 2005
Mailing Address 680 Stewart Ave. ols		Amount of Each Disbursement this Period 318.01
City St. Paul State MN Zip Code 55102		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jeremy Olson		Transaction ID: SB21B.34420 Date of Disbursement MM / DD / YYYY 08 / 19 / 2005	
Mailing Address 680 Stewart Ave. ols		Amount of Each Disbursement this Period 362.05	
City St. Paul State MN Zip Code 55102			
Purpose of Disbursement Salary Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) C. Paul Ostasiewicz		Transaction ID: SB21B.34221 Date of Disbursement MM / DD / YYYY 08 / 05 / 2005	
Mailing Address 1485 E 7th St #304		Amount of Each Disbursement this Period 327.93	
City St Paul State MN Zip Code 55106			
Purpose of Disbursement Salary Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:			Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	1007.99
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) 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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Paul Ostasiewicz		Transaction ID: SB21B.34431 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 5
Mailing Address 1485 E 7th St #304		Amount of Each Disbursement this Period 308.75
City St Paul State MN Zip Code 55106	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Mark Ostendorf		Transaction ID: SB21B.34219 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 5 / 2 0 0 5
Mailing Address 667 Holly Ave		Amount of Each Disbursement this Period 439.20
City St Paul State MN Zip Code 55104	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Mark Ostendorf		Transaction ID: SB21B.34433 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 5
Mailing Address 667 Holly Ave		Amount of Each Disbursement this Period 545.83
City St Paul State MN Zip Code 55104	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1293.78
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) 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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Dana Payne		Transaction ID: SB21B.34262 Date of Disbursement MM / DD / YYYY 08 / 05 / 2005
Mailing Address 8601 Edenbrook Crossing		Amount of Each Disbursement this Period 1188.90
City Minneapolis State MN Zip Code 55402	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dana Payne		Transaction ID: SB21B.34395 Date of Disbursement MM / DD / YYYY 08 / 19 / 2005
Mailing Address 8601 Edenbrook Crossing		Amount of Each Disbursement this Period 1050.77
City Minneapolis State MN Zip Code 55402	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Tracy Phernetton		Transaction ID: SB21B.34212 Date of Disbursement MM / DD / YYYY 08 / 05 / 2005
Mailing Address 208 Burnsville Circle		Amount of Each Disbursement this Period 94.45
City Burnsville State MN Zip Code 55337	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2334.12
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Tracy Phernetton		Transaction ID: SB21B.34440	
Mailing Address 208 Burnsville Circle		Date of Disbursement 08 / 19 / 2005	
City Burnsville	State MN	Zip Code 55337	Amount of Each Disbursement this Period 57.03
Purpose of Disbursement Salary		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Lori-Anne Pizzella		Transaction ID: SB21B.34241	
Mailing Address 680 Stewart Ave LP		Date of Disbursement 08 / 05 / 2005	
City St Paul	State MN	Zip Code 55102	Amount of Each Disbursement this Period 435.17
Purpose of Disbursement Salary		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Lori-Anne Pizzella		Transaction ID: SB21B.34415	
Mailing Address 680 Stewart Ave LP		Date of Disbursement 08 / 19 / 2005	
City St Paul	State MN	Zip Code 55102	Amount of Each Disbursement this Period 353.06
Purpose of Disbursement Salary		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	845.26
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Larissa Presho		Transaction ID: SB21B.34267 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 5
Mailing Address 2608 Plymouth Ave N		Amount of Each Disbursement this Period 899.78
City Minneapolis State MN Zip Code 55411		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Larissa Presho		Transaction ID: SB21B.34465 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 5
Mailing Address 2608 Plymouth Ave N		Amount of Each Disbursement this Period 992.53
City Minneapolis State MN Zip Code 55411		
Purpose of Disbursement Salary Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Principal Life Insurance Company		Transaction ID: SB21B.34499 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 5
Mailing Address 11100 Wayzata Blvd. # 211		Amount of Each Disbursement this Period 679.56
City Minnetonka State MN Zip Code 55305		
Purpose of Disbursement Insurance expense Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2571.87
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) 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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Christina Quick		Transaction ID: SB21B.34276	
Mailing Address 9917 Xebec St NE		Date of Disbursement MM / DD / YYYY 08 / 15 / 2005	
City Blaine	State MN	Zip Code 55014	Amount of Each Disbursement this Period 554.10
Purpose of Disbursement Salary		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Christina Quick		Transaction ID: SB21B.34476	
Mailing Address 9917 Xebec St NE		Date of Disbursement MM / DD / YYYY 08 / 31 / 2005	
City Blaine	State MN	Zip Code 55014	Amount of Each Disbursement this Period 554.10
Purpose of Disbursement Salary		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Chad Raschke		Transaction ID: SB21B.34261	
Mailing Address 2514 Woodlynn Ave		Date of Disbursement MM / DD / YYYY 08 / 05 / 2005	
City Maplewood	State MN	Zip Code 55109	Amount of Each Disbursement this Period 620.08
Purpose of Disbursement Salary		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	1728.28
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) 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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Chad Raschke		Transaction ID: SB21B.34394 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 5
Mailing Address 2514 Woodlynn Ave		Amount of Each Disbursement this Period 576.38
City State Zip Code Maplewood MN 55109	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Vickie Rasmussen		Transaction ID: SB21B.34222 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 5 / 2 0 0 5
Mailing Address 1870 Old Hudson Road		Amount of Each Disbursement this Period 520.91
City State Zip Code St. Paul MN 55119	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Vickie Rasmussen		Transaction ID: SB21B.34430 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 5
Mailing Address 1870 Old Hudson Road		Amount of Each Disbursement this Period 337.57
City State Zip Code St. Paul MN 55119	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1434.86
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Richard Reiss & Asso		Transaction ID: SB21B.34581 Date of Disbursement MM / DD / YYYY 08 / 10 / 2005
Mailing Address 8030 Cedar Ave S Ste 200		Amount of Each Disbursement this Period 649.47
City Minneapolis State MN Zip Code 55420	Purpose of Disbursement Payroll Service Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Jeffrey Richter		Transaction ID: SB21B.34251 Date of Disbursement MM / DD / YYYY 08 / 05 / 2005
Mailing Address 825 Kansas Ave		Amount of Each Disbursement this Period 293.38
City St Paul State MN Zip Code 55102	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Jeffrey Richter		Transaction ID: SB21B.34406 Date of Disbursement MM / DD / YYYY 08 / 19 / 2005
Mailing Address 825 Kansas Ave		Amount of Each Disbursement this Period 318.86
City St Paul State MN Zip Code 55102	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1261.71
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) 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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Shawn Ricks		Transaction ID: SB21B.34403 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 5
Mailing Address 1871 East 7th St. # 6		Amount of Each Disbursement this Period 115.00
City St. Paul State MN Zip Code 55115	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) B. Scott Rodbro		Transaction ID: SB21B.34235 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 5 / 2 0 0 5
Mailing Address 680 Stewart Ave. rod		Amount of Each Disbursement this Period 435.84
City St. Paul State MN Zip Code 55102	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

Full Name (Last, First, Middle Initial) C. Scott Rodbro		Transaction ID: SB21B.34421 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 5
Mailing Address 680 Stewart Ave. rod		Amount of Each Disbursement this Period 284.18
City St. Paul State MN Zip Code 55102	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	835.02
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) 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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Greg Rueff		Transaction ID: SB21B.34263 Date of Disbursement 08 / 15 / 2005
Mailing Address 3312 Lawrence Rd		Amount of Each Disbursement this Period 1475.60
City Minneapolis State MN Zip Code 55417	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Greg Rueff		Transaction ID: SB21B.34461 Date of Disbursement 08 / 31 / 2005
Mailing Address 3312 Lawrence Rd		Amount of Each Disbursement this Period 1475.60
City Minneapolis State MN Zip Code 55417	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. David Rupprecht		Transaction ID: SB21B.34255 Date of Disbursement 08 / 05 / 2005
Mailing Address 1550 Edgerton St Apt 303		Amount of Each Disbursement this Period 46.68
City St Paul State MN Zip Code 55105	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2997.88
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) 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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. David Rupprecht		Transaction ID: SB21B.34401 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 5
Mailing Address 1550 Edgerton St Apt 303		Amount of Each Disbursement this Period 145.12
City St Paul State MN Zip Code 55105		
Purpose of Disbursement Salary Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Jeff Sieck		Transaction ID: SB21B.34246 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 5 / 2 0 0 5
Mailing Address 120 Ruth Street Suite 1		Amount of Each Disbursement this Period 412.92
City St. Paul State MN Zip Code 55119		
Purpose of Disbursement Salary Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Jeff Sieck		Transaction ID: SB21B.34411 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 5
Mailing Address 120 Ruth Street Suite 1		Amount of Each Disbursement this Period 423.58
City St. Paul State MN Zip Code 55119		
Purpose of Disbursement Salary Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	981.62
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) 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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Joseph Slattery		Transaction ID: SB21B.34207 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 5 / 2 0 0 5
Mailing Address 223 Bates St #707		Amount of Each Disbursement this Period 402.95
City St Paul State MN Zip Code 55102		
Purpose of Disbursement Salary Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Joseph Slattery		Transaction ID: SB21B.34444 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 5
Mailing Address 223 Bates St #707		Amount of Each Disbursement this Period 270.57
City St Paul State MN Zip Code 55102		
Purpose of Disbursement Salary Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Duke Soby		Transaction ID: SB21B.34215 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 5 / 2 0 0 5
Mailing Address 614 Portland Ave #97		Amount of Each Disbursement this Period 176.87
City St Paul State MN Zip Code 55102		
Purpose of Disbursement Salary Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	850.39
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Vito Steingold		Transaction ID: SB21B.34225	
Mailing Address 200 Wilkin St #104		Date of Disbursement MM / DD / YYYY 08 / 05 / 2005	
City St Paul	State MN	Zip Code 55101	Amount of Each Disbursement this Period 508.61
Purpose of Disbursement Salary		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Vito Steingold		Transaction ID: SB21B.34428	
Mailing Address 200 Wilkin St #104		Date of Disbursement MM / DD / YYYY 08 / 19 / 2005	
City St Paul	State MN	Zip Code 55101	Amount of Each Disbursement this Period 408.83
Purpose of Disbursement Salary		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. John Suder		Transaction ID: SB21B.34249	
Mailing Address 680 Stewart Ave JS		Date of Disbursement MM / DD / YYYY 08 / 05 / 2005	
City St Paul	State MN	Zip Code 55102	Amount of Each Disbursement this Period 1037.87
Purpose of Disbursement Salary		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	1955.31
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. John Suder		Transaction ID: SB21B.34408 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 5
Mailing Address 680 Stewart Ave JS		Amount of Each Disbursement this Period 915.61
City St Paul State MN Zip Code 55102		
Purpose of Disbursement Salary Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. Anthony Sutton		Transaction ID: SB21B.34284 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 5
Mailing Address 914 Euclid St		Amount of Each Disbursement this Period 1638.27
City St Paul State MN Zip Code 55106		
Purpose of Disbursement Salary Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. Anthony Sutton		Transaction ID: SB21B.34483 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 5
Mailing Address 914 Euclid St		Amount of Each Disbursement this Period 1638.27
City St Paul State MN Zip Code 55106		
Purpose of Disbursement Salary Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	4192.15
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) 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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Marina Taubenger		Transaction ID: SB21B.34501 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 5	
Mailing Address 7 Bent Tree Ct		Amount of Each Disbursement this Period 4000.00	
City North Oaks	State MN Zip Code 55127		
Purpose of Disbursement Salary Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Dwight Tostenson		Transaction ID: SB21B.34266 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 5	
Mailing Address 5137 William Ave		Amount of Each Disbursement this Period 2148.96	
City Edina	State MN Zip Code 55436		
Purpose of Disbursement Salary Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Dwight Tostenson		Transaction ID: SB21B.34464 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 5	
Mailing Address 5137 William Ave		Amount of Each Disbursement this Period 2148.96	
City Edina	State MN Zip Code 55436		
Purpose of Disbursement Salary Candidate Name			Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	8297.92
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) 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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Matthew Vanatta		Transaction ID: SB21B.34232 Date of Disbursement MM / DD / YYYY 08 / 05 / 2005
Mailing Address 252 Cove Rd		Amount of Each Disbursement this Period 663.64
City Hudson State WI Zip Code 54016	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Matthew Vanatta		Transaction ID: SB21B.34423 Date of Disbursement MM / DD / YYYY 08 / 19 / 2005
Mailing Address 252 Cove Rd		Amount of Each Disbursement this Period 630.17
City Hudson State WI Zip Code 54016	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. William Walsh		Transaction ID: SB21B.34285 Date of Disbursement MM / DD / YYYY 08 / 15 / 2005
Mailing Address 15808 Foxhill Ave N		Amount of Each Disbursement this Period 2937.38
City Hugo State MN Zip Code 55038	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	4231.19
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) 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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. William Walsh		Transaction ID: SB21B.34484 Date of Disbursement 08 / 31 / 2005
Mailing Address 15808 Foxhill Ave N		Amount of Each Disbursement this Period 2937.38
City Hugo State MN Zip Code 55038	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Skyler Weinand		Transaction ID: SB21B.34260 Date of Disbursement 08 / 05 / 2005
Mailing Address 1269 Reaney Ave		Amount of Each Disbursement this Period 228.22
City St Paul State MN Zip Code 55104	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Skyler Weinand		Transaction ID: SB21B.34396 Date of Disbursement 08 / 19 / 2005
Mailing Address 1269 Reaney Ave		Amount of Each Disbursement this Period 163.87
City St Paul State MN Zip Code 55104	Purpose of Disbursement Salary Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3329.47
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Molly Weyant		Transaction ID: SB21B.34211 Date of Disbursement 08 / 05 / 2005	
Mailing Address 8772 Ironwood Tr N		Amount of Each Disbursement this Period 285.31	
City Lake Elmo State MN Zip Code 55042	Purpose of Disbursement Salary Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Molly Weyant		Transaction ID: SB21B.34441 Date of Disbursement 08 / 19 / 2005	
Mailing Address 8772 Ironwood Tr N		Amount of Each Disbursement this Period 142.51	
City Lake Elmo State MN Zip Code 55042	Purpose of Disbursement Salary Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Joseph Wheeler		Transaction ID: SB21B.34216 Date of Disbursement 08 / 05 / 2005	
Mailing Address 373 S Winthrop #274		Amount of Each Disbursement this Period 427.25	
City St Paul State MN Zip Code 55119	Purpose of Disbursement Salary Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	855.07
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) 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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Joseph Wheeler		Transaction ID: SB21B.34437 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 9 / 2 0 0 5
Mailing Address 373 S Winthrop #274		Amount of Each Disbursement this Period 356.96
City St Paul State MN Zip Code 55119	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Alexander Whitney		Transaction ID: SB21B.34270 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 5
Mailing Address 2915 Dean Parkway Apt 206		Amount of Each Disbursement this Period 138.52
City Minneapolis State MN Zip Code 55416	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Alexander Whitney		Transaction ID: SB21B.34470 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 3 1 / 2 0 0 5
Mailing Address 2915 Dean Parkway Apt 206		Amount of Each Disbursement this Period 138.52
City Minneapolis State MN Zip Code 55416	Category/ Type	
Purpose of Disbursement Salary Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	634.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

SCHEDULE B (FEC Form 3X) 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"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. Leslie Wilcox		Transaction ID: SB21B.34283 Date of Disbursement 08 / 15 / 2005	
Mailing Address 1818 Colby Lake Ct		Amount of Each Disbursement this Period 1061.45	
City Woodbury State MN Zip Code 55125	Purpose of Disbursement Salary Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Leslie Wilcox		Transaction ID: SB21B.34482 Date of Disbursement 08 / 31 / 2005	
Mailing Address 1818 Colby Lake Ct		Amount of Each Disbursement this Period 1061.45	
City Woodbury State MN Zip Code 55125	Purpose of Disbursement Salary Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional)

2122.90

TOTAL This Period (last page this line number only)

155622.70

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. 1ST. CONGRESSIONAL DISTRICT REPUBLICAN		Transaction ID: SB22.34604 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 3 / 2 0 0 5
Mailing Address 10743 County Raod I49 Sw		Amount of Each Disbursement this Period 2500.00
City Hayfield State MN Zip Code 55940		
Purpose of Disbursement Transfer to affiliate	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) B. 2ND CONGRESSIONAL DISTRICT REPUBLICAN		Transaction ID: SB22.34605 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 3 / 2 0 0 5
Mailing Address 16030 county Road 51		Amount of Each Disbursement this Period 2500.00
City Norwood State MN Zip Code 55368		
Purpose of Disbursement Transfer to affiliate	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

Full Name (Last, First, Middle Initial) C. 3RD. CONGRESSIONAL DISTRICT REPUBLICAN		Transaction ID: SB22.34582 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 5 / 2 0 0 5
Mailing Address 4808 Hibiscus Ave.		Amount of Each Disbursement this Period 5000.00
City Edina State MN Zip Code 55435		
Purpose of Disbursement Transfer to affiliate	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	10000.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
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 type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

Full Name (Last, First, Middle Initial) A. 4TH CONGRESSIONAL DISTRICT REPUBLICAN		Transaction ID: SB22.34606 Date of Disbursement
Mailing Address 480 Cedar Street Suite 580		<input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2005"/>
City St. Paul	State MN	Zip Code 55101
Purpose of Disbursement Transfer to affiliate		Amount of Each Disbursement this Period <input type="text" value="2500.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) B. 5TH CONGRESSIONAL DISTRICT		Transaction ID: SB22.34607 Date of Disbursement
Mailing Address 3747 Colfax Ave. N.		<input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2005"/>
City Minneapolis	State MN	Zip Code 55412
Purpose of Disbursement Transfer to affiliate		Amount of Each Disbursement this Period <input type="text" value="2500.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) C. 6TH CONGRESSIONAL DISTRICT REPUBLICAN		Transaction ID: SB22.34608 Date of Disbursement
Mailing Address 1749 118TH AVE NE		<input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2005"/>
City BLAINE	State MN	Zip Code 55449
Purpose of Disbursement Transfer to affiliate		Amount of Each Disbursement this Period <input type="text" value="2500.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="7500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial)
7TH CONGRESSIONAL DISTRICT REPUBLICAN

Mailing Address 1504 14th St. S.

City Moorhelad State MN Zip Code 56560

Purpose of Disbursement
Transfer to affiliate

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB22.34609

Date of Disbursement

08 / 23 / 2005

Amount of Each Disbursement this Period

2500.00

B. Full Name (Last, First, Middle Initial)
8TH CONGRESSIONAL DISTRICT

Mailing Address

City State Zip Code

Purpose of Disbursement
Transfer to affiliate

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB22.34610

Date of Disbursement

08 / 23 / 2005

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

22500.00

SCHEDULE H2 (FEC Form 3X) ALLOCATION RATIOS

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NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

RATIOS FOR ALLOCABLE FUNDRAISING EVENTS AND DIRECT CANDIDATE SUPPORT ACTIVITIES APPEARING ON THIS REPORT.

Methods of allocation :

- I. FUNDRAISING activities are allocated using the 'funds received method' where the federal proportion of expenses must equal the federal proportion of monies raised.
- II. Shared **DIRECT CANDIDATE SUPPORT** activities are allocated according to benefit expected to be derived, where the federal proportion of disbursements is based on the benefit derived by federal candidates from the activity.
For PACs Only : Direct candidate support includes public communications or voter drives that refer to both federal and nonfederal candidates, regardless of whether there is a reference to a political party. Such expenses are allocated using a time/space method.

ACTIVITY OR EVENT IDENTIFIER

Fundraising event 2005 (01/01/2005)

ACTIVITY IS:

Fundraising Direct Candidate Support

CHECK IF THE RATIO IS:

New Revised Same as Previously Reported

FEDERAL %

21.00 %

NONFEDERAL %

79.00 %

**Transaction ID:
H2.34570**

**SCHEDULE H3 (FEC Form 3X)
 TRANSFERS FROM NONFEDERAL ACCOUNTS FOR
 ALLOCATED FEDERAL / NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
 REPUBLICAN PARTY OF MINNESOTA

NAME OF ACCOUNT State Account	DATE OF RECEIPT M M / D D / Y Y Y Y 0 8 / 2 6 / 2 0 0 5	TOTAL AMOUNT TRANSFERRED 50000.00
----------------------------------	---	--------------------------------------

BREAKDOWN OF TRANSFER RECEIVED		50000.00
i) Total Administrative		Transaction ID: H3.34676
ii) Generic Voter Drive		Transaction ID:
iii) Exempt Activities		Transaction ID:
iv) Direct Fundraising (List Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred for Direct Fundraising		
v) Direct Candidate Support (List of Activity or Event Identifier)		
a) _____		Transaction ID:
b) _____		Transaction ID:
c) Total Amount Transferred For Direct Candidate Support		
vi) Public Communications Referring Only to Party (Made by PAC)		Transaction ID:

TOTALS FOR BREAKDOWN OF TRANSFER RECEIVED	
TOTAL This Period (Administrative)	50000.00
TOTAL This Period (Generic Voter Drive)	0.00
TOTAL This Period (Exempt Activities)	0.00
TOTAL This Period (Direct Fundraising)	0.00
TOTAL This Period (Direct Candidate Support)	0.00
TOTAL This Period (Public Communications Referring Only to Party)	0.00
TOTAL This Period (Total Amount Transferred)	50000.00

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) PC Solutions			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3839 Washington Ave N			Allocated Activity or Event Year-To-Date 512777.00		
City Minneapolis	State MN	Zip Code 55412	Date MM / DD / YYYY 08 / 01 / 2005		
Purpose of Disbursement: Separation roller			Category/Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.34455		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
44.63		167.91		212.54

B. Full Name (Last, First, Middle Initial) HUB Property Trust			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address REIT Management Research 330 2nd. Ave. S Suite 110			Allocated Activity or Event Year-To-Date 523862.25		
City Minneapolis	State MN	Zip Code 55401	Date MM / DD / YYYY 08 / 01 / 2005		
Purpose of Disbursement: Rent			Category/Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.34456		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2327.90		8757.35		11085.25

C. Full Name (Last, First, Middle Initial) Bachmans			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6010 Lyndale Ave S			Allocated Activity or Event Year-To-Date 524032.37		
City Minneapolis	State MN	Zip Code 55419	Date MM / DD / YYYY 08 / 01 / 2005		
Purpose of Disbursement: Flowers			Category/Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.34457		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
35.73		134.39		170.12

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2408.26		9059.65		11467.91

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) Barbara Linert			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4282 Braddock Trl			Allocated Activity or Event Year-To-Date 524241.35		
City	State	Zip Code	Category/ Type		
Eagan	MN	55123			
Purpose of Disbursement: Label maker,color paper			Date <input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2005"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.34458		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
43.89		165.09		208.98

B. Full Name (Last, First, Middle Initial) Office Depot			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1615 W. County Road C			Allocated Activity or Event Year-To-Date 0.00		
City	State	Zip Code	Category/ Type		
Roseville	MN	55113			
Purpose of Disbursement: Color paper			Date <input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2005"/>		
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: H4.34459		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
12.93		48.62		61.55

C. Full Name (Last, First, Middle Initial) Office Max			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1490 W. University Ave			Allocated Activity or Event Year-To-Date 0.00		
City	State	Zip Code	Category/ Type		
St. Paul	MN	55104			
Purpose of Disbursement: Label maker machine			Date <input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2005"/>		
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: H4.34488		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.96		116.47		147.43

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
43.89		165.09		208.98

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) Staples			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 9020			Allocated Activity or Event Year-To-Date 524296.64		
City	State	Zip Code	Category/ Type		
Des Moines	IA	50368			
Purpose of Disbursement: Paper and pens			Date <input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2005"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.34489		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
11.61		43.68		55.29

B. Full Name (Last, First, Middle Initial) Steven Jepsen			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5805 Eastview Drive			Allocated Activity or Event Year-To-Date 524381.10		
City	State	Zip Code	Category/ Type		
Edina	MN	55436			
Purpose of Disbursement: Mileage			Date <input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2005"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.34491		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.74		66.72		84.46

C. Full Name (Last, First, Middle Initial) Capitol Direct			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1270 Eagan Industrial Rd			Allocated Activity or Event Year-To-Date 524909.10		
City	State	Zip Code	Category/ Type		
St Paul	MN	55121			
Purpose of Disbursement: Business cards			Date <input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2005"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.34492		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
110.88		417.12		528.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
140.23		527.52		667.75

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) Corner Marking			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1174 7th St W			Allocated Activity or Event Year-To-Date 524957.14		
City St Paul	State MN	Zip Code 55102	Date MM / DD / YYYY 08 / 01 / 2005		
Purpose of Disbursement: Plaques			Category/Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.34493		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.09		37.95		48.04

B. Full Name (Last, First, Middle Initial) Joel Cary			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1290 Loma Linda Ln			Allocated Activity or Event Year-To-Date 528004.36		
City Mound	State MN	Zip Code 55364	Date MM / DD / YYYY 08 / 01 / 2005		
Purpose of Disbursement: computer, telephone and internet			Category/Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.34495		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
639.92		2407.30		3047.22

C. Full Name (Last, First, Middle Initial) Dell Direct Sales, LP			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Dept at 40140			Allocated Activity or Event Year-To-Date 0.00		
City Des Moines	State IA	Zip Code 50368	Date MM / DD / YYYY 08 / 01 / 2005		
Purpose of Disbursement: Computer			Category/Type		
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: H4.34496		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
547.82		2060.86		2608.68

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
650.01		2445.25		3095.26

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) Griggs Midway Building			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1821 University Ave			Allocated Activity or Event Year-To-Date 529561.05		
City	State	Zip Code	Category/ Type		
St Paul	MN	55104			
Purpose of Disbursement: Storage			Date M M / D D / Y Y Y Y 08 / 01 / 2005		
Activity or Event Identifier: Administrative			Transaction ID: H4.34502		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.35		106.65		135.00

B. Full Name (Last, First, Middle Initial) Trimble and Associates			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6381 Osgood Ave N			Allocated Activity or Event Year-To-Date 533373.35		
City	State	Zip Code	Category/ Type		
Hopkins	MN	55305			
Purpose of Disbursement: Legal fees			Date M M / D D / Y Y Y Y 08 / 01 / 2005		
Activity or Event Identifier: Administrative			Transaction ID: H4.34503		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
800.58		3011.72		3812.30

C. Full Name (Last, First, Middle Initial) Dominos Pizza			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Cedar Street and 9th Street			Allocated Activity or Event Year-To-Date 533399.89		
City	State	Zip Code	Category/ Type		
St. Paul	MN	55113			
Purpose of Disbursement: Pizza for meeting			Date M M / D D / Y Y Y Y 08 / 01 / 2005		
Activity or Event Identifier: Administrative			Transaction ID: H4.34504		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.57		20.97		26.54

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
834.50		3139.34		3973.84

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) The Pilgram Company			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 8040 Groveland Road			Allocated Activity or Event Year-To-Date 534580.13		
City Mounds View	State MN	Zip Code 55112	Date MM / DD / YYYY 08 / 01 / 2005		
Purpose of Disbursement: Work on database not spec. candidate			Transaction ID: H4.34657		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
247.85		932.39		1180.24

B. Full Name (Last, First, Middle Initial) Jessica McGlaulin			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1500 St. Olaf Ave.			Allocated Activity or Event Year-To-Date 534758.69		
City Northfield	State MN	Zip Code 55057	Date MM / DD / YYYY 08 / 02 / 2005		
Purpose of Disbursement: Mileage & office supplies			Transaction ID: H4.34505		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.50		141.06		178.56

C. Full Name (Last, First, Middle Initial) Mileage			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 525 Park Street suite 250			Allocated Activity or Event Year-To-Date 0.00		
City St. Paul	State MN	Zip Code 55103	Date MM / DD / YYYY 08 / 02 / 2005		
Purpose of Disbursement: mileage			Transaction ID: H4.34507		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
32.51		122.28		154.79

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
285.35		1073.45		1358.80

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) Office Max			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1490 W. University Ave			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">0.00</div>	
City St. Paul	State MN	Zip Code 55104	Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">08 / 02 / 2005</div>	
Purpose of Disbursement: Pens & notepads for fair				
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: H4.34509	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4.99		18.78		23.77

B. Full Name (Last, First, Middle Initial) Crystal Lachermeier			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1011 13th Ave SE			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">534909.17</div>	
City Minneapolis	State MN	Zip Code 55414	Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">08 / 02 / 2005</div>	
Purpose of Disbursement: Mileage & postage				
Activity or Event Identifier: Administrative			Transaction ID: H4.34510	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.60		118.88		150.48

C. Full Name (Last, First, Middle Initial) Mileage			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 525 Park Street suite 250			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">0.00</div>	
City St. Paul	State MN	Zip Code 55103	Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">08 / 02 / 2005</div>	
Purpose of Disbursement: mileage				
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: H4.34511	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
26.12		98.27		124.39

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
31.60		118.88		150.48

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial)
US Postmaster

Mailing Address
401 E Kellogg

City State Zip Code
St Paul MN 55101

Purpose of Disbursement:
Postage expense

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date 08 / 02 / 2005

Transaction ID: H4.34512

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
5.48		20.61		26.09

B. Full Name (Last, First, Middle Initial)
Leslie Wilcox

Mailing Address
1818 Colby Lake Ct

City State Zip Code
Woodbury MN 55125

Purpose of Disbursement:
Prizes for state fair

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

536169.45

Activity or Event Identifier:
Administrative

Date 08 / 02 / 2005

Transaction ID: H4.34513

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
264.66		995.62		1260.28

C. Full Name (Last, First, Middle Initial)
Office of the Secretary, Stationery Room

Mailing Address
Dirksen Senate Office Building

City State Zip Code
Washington DC 20510

Purpose of Disbursement:
Flags

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date 08 / 02 / 2005

Transaction ID: H4.34514

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
76.29		287.01		363.30

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
264.66		995.62		1260.28

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial)
FAD Toys

Mailing Address
345 W. John Street

City State Zip Code
Hicksville NY 11802

Purpose of Disbursement:
Bobbleheads

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date MM / DD / YYYY
08 / 02 / 2005

Transaction ID: H4.34516

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
72.36		272.19		344.55

B. Full Name (Last, First, Middle Initial)
Bobble Head Wond

Mailing Address
402 North Main Street

City State Zip Code
Stillwater MN 55082

Purpose of Disbursement:
Bobbleheads

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date MM / DD / YYYY
08 / 02 / 2005

Transaction ID: H4.34518

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.11		49.31		62.42

C. Full Name (Last, First, Middle Initial)
America!

Mailing Address
7904 Hill Park Ct

City State Zip Code
Lorton VA 22079

Purpose of Disbursement:
dolls

Category/
Type

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Date MM / DD / YYYY
08 / 02 / 2005

Transaction ID: H4.34520

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.59		81.21		102.80

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
0.00		0.00		0.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) C. Forbes, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 12830 West Creek Parkway suite J			Allocated Activity or Event Year-To-Date [0.00]		
City Richmond	State VA	Zip Code 23238	Date <input type="text" value="08"/> / <input type="text" value="02"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Caps			Transaction ID: H4.34522		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[42.52]		[159.98]		[202.50]

B. Full Name (Last, First, Middle Initial) Mileage			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 525 Park Street suite 250			Allocated Activity or Event Year-To-Date [0.00]		
City St. Paul	State MN	Zip Code 55103	Date <input type="text" value="08"/> / <input type="text" value="02"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: mileage			Transaction ID: H4.34524		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[38.79]		[145.92]		[184.71]

C. Full Name (Last, First, Middle Initial) Thomas Erickson			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 680 Stewart Ave eri			Allocated Activity or Event Year-To-Date [536284.85]		
City St Paul	State MN	Zip Code 55102	Date <input type="text" value="08"/> / <input type="text" value="02"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Mileage			Transaction ID: H4.34525		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[24.23]		[91.17]		[115.40]

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
[24.23]		[91.17]		[115.40]

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
[]	[]	[]

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) William Walsh			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 15808 Foxhill Ave N			Allocated Activity or Event Year-To-Date 536417.85		
City Hugo	State MN	Zip Code 55038	Date <input type="text" value="08"/> / <input type="text" value="02"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Mileage			Transaction ID: H4.34526		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
27.93		105.07		133.00

B. Full Name (Last, First, Middle Initial) TDS Metrocom			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 1327			Allocated Activity or Event Year-To-Date 542770.34		
City Monroe	State WI	Zip Code 53566	Date <input type="text" value="08"/> / <input type="text" value="02"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Telephone expense			Transaction ID: H4.34527		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1334.02		5018.47		6352.49

C. Full Name (Last, First, Middle Initial) Terry Dunham, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4940 Viking Drive Suite 209			Allocated Activity or Event Year-To-Date 543679.94		
City Edina	State MN	Zip Code 55435	Date <input type="text" value="08"/> / <input type="text" value="02"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Printing party platform not spec. candid			Transaction ID: H4.34528		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
191.02		718.58		909.60

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1552.97		5842.12		7395.09

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) Archie L. Linert			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4282 Braddock Tr			Allocated Activity or Event Year-To-Date 543979.94		
City Eagan	State MN	Zip Code 55123	Date MM / DD / YYYY 08 / 02 / 2005		
Purpose of Disbursement: Cabinets for state fair			Category/Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.34529		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
63.00		237.00		300.00

B. Full Name (Last, First, Middle Initial) Servidia, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 10117 Brookside Circle			Allocated Activity or Event Year-To-Date 546262.44		
City Bloomington	State MN	Zip Code 55431	Date MM / DD / YYYY 08 / 02 / 2005		
Purpose of Disbursement: Update web-site not spec. candidate			Category/Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.34531		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
479.32		1803.18		2282.50

C. Full Name (Last, First, Middle Initial) Barbara Linert			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4282 Braddock Trl			Allocated Activity or Event Year-To-Date 546457.55		
City Eagan	State MN	Zip Code 55123	Date MM / DD / YYYY 08 / 02 / 2005		
Purpose of Disbursement: Food for executive meeting			Category/Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.34532		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
40.97		154.14		195.11

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
583.29		2194.32		2777.61

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

SCHEDULE H4 (FEC Form 3X) DISBURSEMENT FOR ALLOCATED FEDERAL/NONFEDERAL ACTIVITY

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial)
Baja Sol

Mailing Address
City Center

City State Zip Code
Minneapolis MN 55402

Purpose of Disbursement:
Support for Linert's expe report 8/2

Category/
Type

Activity or Event Identifier:
Administrative

[MEMO ITEM]

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

0.00

Date 08 / 02 / 2005

Transaction ID: H4.34535

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
40.97 + 154.14 = 195.11

B. Full Name (Last, First, Middle Initial)
Midwest Wireless Civic Center

Mailing Address
One Civic Center Plaza

City State Zip Code
Mankato MN 56001

Purpose of Disbursement:
Room and coffee for meeting

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

546697.61

Date 08 / 02 / 2005

Transaction ID: H4.34536

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
50.41 + 189.65 = 240.06

C. Full Name (Last, First, Middle Initial)
Marco

Mailing Address
2640 Commerce Dr

City State Zip Code
Harrisberg PA 17110

Purpose of Disbursement:
Badges for state convention

Category/
Type

Activity or Event Identifier:
Administrative

Type of Allocated Activity:

Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support

Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

546944.54

Date 08 / 02 / 2005

Transaction ID: H4.34539

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
51.86 + 195.07 = 246.93

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE + NONFEDERAL SHARE = TOTAL AMOUNT
102.27 + 384.72 = 486.99

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE NONFEDERAL SHARE TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) Federal Express			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 1140			Allocated Activity or Event Year-To-Date 546993.15	
City Memphis	State TN	Zip Code 38101	Date M M / D D / Y Y Y Y 08 / 02 / 2005 Transaction ID: H4.34540	
Purpose of Disbursement: Xpress mail				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.21		38.40		48.61

B. Full Name (Last, First, Middle Initial) Target			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 2555 W 79 St			Allocated Activity or Event Year-To-Date 547093.15	
City Bloomington	State MN	Zip Code 55137	Date M M / D D / Y Y Y Y 08 / 03 / 2005 Transaction ID: H4.34541	
Purpose of Disbursement: Incentive program				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.00		79.00		100.00

C. Full Name (Last, First, Middle Initial) Alliance Bank			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 444 Cedar St			Allocated Activity or Event Year-To-Date 547593.15	
City St Paul	State MN	Zip Code 55101	Date M M / D D / Y Y Y Y 08 / 03 / 2005 Transaction ID: H4.34542	
Purpose of Disbursement: Incentive program not payroll				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
105.00		395.00		500.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
136.21		512.40		648.61

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) McDonald's			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2357 Lotus Ave. N.			Allocated Activity or Event Year-To-Date 547843.15		
City Minneapolis	State MN	Zip Code 55437	Date MM / DD / YYYY 08 / 03 / 2005		
Purpose of Disbursement: Incentive program not payroll			Category/Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.34543		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.50		197.50		250.00

B. Full Name (Last, First, Middle Initial) SD 49			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 12524 Grouse Street			Allocated Activity or Event Year-To-Date 547891.15		
City Coon Rapids	State MN	Zip Code 55448	Date MM / DD / YYYY 08 / 03 / 2005		
Purpose of Disbursement: Tickets for Anoka fair			Category/Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.34544		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.08		37.92		48.00

C. Full Name (Last, First, Middle Initial) Nick Erickson			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 9344 134th Street			Allocated Activity or Event Year-To-Date 548399.08		
City Savage	State MN	Zip Code 55378	Date MM / DD / YYYY 08 / 03 / 2005		
Purpose of Disbursement: Mileage and copies			Category/Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.34546		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
106.67		401.26		507.93

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
169.25		636.68		805.93

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) Mileage Mailing Address 525 Park Street suite 250 City State Zip Code St. Paul MN 55103 Purpose of Disbursement: Mileage for Erickson Activity or Event Identifier: Administrative [MEMO ITEM]	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date _____ 0.00 Date <table style="display: inline-table; border: none;"><tr><td style="border: 1px solid black; padding: 2px;">M</td><td style="border: 1px solid black; padding: 2px;">M</td><td style="border: none;">/</td><td style="border: 1px solid black; padding: 2px;">D</td><td style="border: 1px solid black; padding: 2px;">D</td><td style="border: none;">/</td><td style="border: 1px solid black; padding: 2px;">Y</td><td style="border: 1px solid black; padding: 2px;">Y</td><td style="border: 1px solid black; padding: 2px;">Y</td><td style="border: 1px solid black; padding: 2px;">Y</td></tr><tr><td style="text-align: center;">0</td><td style="text-align: center;">8</td><td></td><td style="text-align: center;">0</td><td style="text-align: center;">3</td><td></td><td style="text-align: center;">2</td><td style="text-align: center;">0</td><td style="text-align: center;">0</td><td style="text-align: center;">5</td></tr></table> Transaction ID: H4.34547	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	3		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	3		2	0	0	5												

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 45.03		_____ 169.40		_____ 214.43

B. Full Name (Last, First, Middle Initial) Kinkos Mailing Address 30 E 7th St #101B City State Zip Code St Paul MN 55101 Purpose of Disbursement: Copies not spec. fed. candidate Activity or Event Identifier: Administrative [MEMO ITEM]	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date _____ 0.00 Date <table style="display: inline-table; border: none;"><tr><td style="border: 1px solid black; padding: 2px;">M</td><td style="border: 1px solid black; padding: 2px;">M</td><td style="border: none;">/</td><td style="border: 1px solid black; padding: 2px;">D</td><td style="border: 1px solid black; padding: 2px;">D</td><td style="border: none;">/</td><td style="border: 1px solid black; padding: 2px;">Y</td><td style="border: 1px solid black; padding: 2px;">Y</td><td style="border: 1px solid black; padding: 2px;">Y</td><td style="border: 1px solid black; padding: 2px;">Y</td></tr><tr><td style="text-align: center;">0</td><td style="text-align: center;">8</td><td></td><td style="text-align: center;">0</td><td style="text-align: center;">3</td><td></td><td style="text-align: center;">2</td><td style="text-align: center;">0</td><td style="text-align: center;">0</td><td style="text-align: center;">5</td></tr></table> Transaction ID: H4.34548	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	3		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	3		2	0	0	5												

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 61.63		_____ 231.87		_____ 293.50

C. Full Name (Last, First, Middle Initial) The Pilgram Company Mailing Address 8040 Groveland Road City State Zip Code Mounds View MN 55112 Purpose of Disbursement: Update database not spec. fed. candidate Activity or Event Identifier: Administrative	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date _____ 549399.08 Date <table style="display: inline-table; border: none;"><tr><td style="border: 1px solid black; padding: 2px;">M</td><td style="border: 1px solid black; padding: 2px;">M</td><td style="border: none;">/</td><td style="border: 1px solid black; padding: 2px;">D</td><td style="border: 1px solid black; padding: 2px;">D</td><td style="border: none;">/</td><td style="border: 1px solid black; padding: 2px;">Y</td><td style="border: 1px solid black; padding: 2px;">Y</td><td style="border: 1px solid black; padding: 2px;">Y</td><td style="border: 1px solid black; padding: 2px;">Y</td></tr><tr><td style="text-align: center;">0</td><td style="text-align: center;">8</td><td></td><td style="text-align: center;">0</td><td style="text-align: center;">3</td><td></td><td style="text-align: center;">2</td><td style="text-align: center;">0</td><td style="text-align: center;">0</td><td style="text-align: center;">5</td></tr></table> Transaction ID: H4.34549	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	3		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	3		2	0	0	5												

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 210.00		_____ 790.00		_____ 1000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
_____ 210.00		_____ 790.00		_____ 1000.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
_____	_____	_____

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) Crystal Lachermeier			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1011 13th Ave SE			Allocated Activity or Event Year-To-Date 549860.49		
City Minneapolis	State MN	Zip Code 55414	Date MM / DD / YYYY 08 / 08 / 2005		
Purpose of Disbursement: Mileage, hotel and fee			Category/Type		
Activity or Event Identifier: Administrative			Transaction ID: H4.34550		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
96.90		364.51		461.41

B. Full Name (Last, First, Middle Initial) Mileage			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 525 Park Street suite 250			Allocated Activity or Event Year-To-Date 0.00		
City St. Paul	State MN	Zip Code 55103	Date MM / DD / YYYY 08 / 08 / 2005		
Purpose of Disbursement: Mileage for Lachermeier			Category/Type		
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: H4.34551		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
47.78		179.73		227.51

C. Full Name (Last, First, Middle Initial) New Ulm Super 8 Motel			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1901 South Broadway			Allocated Activity or Event Year-To-Date 0.00		
City New Ulm	State MN	Zip Code 56073	Date MM / DD / YYYY 08 / 08 / 2005		
Purpose of Disbursement: Hotel for lachermeier			Category/Type		
Activity or Event Identifier: Administrative [MEMO ITEM]			Transaction ID: H4.34552		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
28.12		105.78		133.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
96.90		364.51		461.41

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) REPUBLICAN NATIONAL COMMITTEE - RNC <hr/> Mailing Address 310 FIRST STREET S.E. <hr/> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>WASHINGTON</td> <td>DC</td> <td>20003</td> </tr> </table> <hr/> Purpose of Disbursement: Fee registration for meeting <hr/> Activity or Event Identifier: Administrative [MEMO ITEM]	City	State	Zip Code	WASHINGTON	DC	20003	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div> <hr/> Date <table style="display: inline-table; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 2px;">M</td><td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">D</td><td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y</td><td style="border: 1px solid black; padding: 2px;">Y</td><td style="border: 1px solid black; padding: 2px;">Y</td><td style="border: 1px solid black; padding: 2px;">Y</td> </tr> <tr> <td style="text-align: center;">0</td><td style="text-align: center;">8</td> <td></td> <td style="text-align: center;">0</td><td style="text-align: center;">8</td> <td></td> <td style="text-align: center;">2</td><td style="text-align: center;">0</td><td style="text-align: center;">0</td><td style="text-align: center;">5</td> </tr> </table> Transaction ID: H4.34554	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	8		2	0	0	5
City	State	Zip Code																									
WASHINGTON	DC	20003																									
M	M	/	D	D	/	Y	Y	Y	Y																		
0	8		0	8		2	0	0	5																		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.00		79.00		100.00

B. Full Name (Last, First, Middle Initial) Megan Johnson <hr/> Mailing Address 1140 Northwood Drive # 227 <hr/> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Eagan</td> <td>MN</td> <td>55121</td> </tr> </table> <hr/> Purpose of Disbursement: Registration fee for RNC meeting <hr/> Activity or Event Identifier: Administrative	City	State	Zip Code	Eagan	MN	55121	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: right;">549960.49</div> <hr/> Date <table style="display: inline-table; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 2px;">M</td><td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">D</td><td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y</td><td style="border: 1px solid black; padding: 2px;">Y</td><td style="border: 1px solid black; padding: 2px;">Y</td><td style="border: 1px solid black; padding: 2px;">Y</td> </tr> <tr> <td style="text-align: center;">0</td><td style="text-align: center;">8</td> <td></td> <td style="text-align: center;">0</td><td style="text-align: center;">8</td> <td></td> <td style="text-align: center;">2</td><td style="text-align: center;">0</td><td style="text-align: center;">0</td><td style="text-align: center;">5</td> </tr> </table> Transaction ID: H4.34555	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	8		2	0	0	5
City	State	Zip Code																									
Eagan	MN	55121																									
M	M	/	D	D	/	Y	Y	Y	Y																		
0	8		0	8		2	0	0	5																		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.00		79.00		100.00

C. Full Name (Last, First, Middle Initial) Jessica McGlaulin <hr/> Mailing Address 1500 St. Olaf Ave. <hr/> <table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City</td> <td style="width:33%;">State</td> <td style="width:33%;">Zip Code</td> </tr> <tr> <td>Northfield</td> <td>MN</td> <td>55057</td> </tr> </table> <hr/> Purpose of Disbursement: Registration fee for the RNC meeting <hr/> Activity or Event Identifier: Administrative	City	State	Zip Code	Northfield	MN	55057	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; text-align: right;">550060.49</div> <hr/> Date <table style="display: inline-table; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; padding: 2px;">M</td><td style="border: 1px solid black; padding: 2px;">M</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">D</td><td style="border: 1px solid black; padding: 2px;">D</td> <td style="border: 1px solid black; padding: 2px;">/</td> <td style="border: 1px solid black; padding: 2px;">Y</td><td style="border: 1px solid black; padding: 2px;">Y</td><td style="border: 1px solid black; padding: 2px;">Y</td><td style="border: 1px solid black; padding: 2px;">Y</td> </tr> <tr> <td style="text-align: center;">0</td><td style="text-align: center;">8</td> <td></td> <td style="text-align: center;">0</td><td style="text-align: center;">8</td> <td></td> <td style="text-align: center;">2</td><td style="text-align: center;">0</td><td style="text-align: center;">0</td><td style="text-align: center;">5</td> </tr> </table> Transaction ID: H4.34556	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	8		2	0	0	5
City	State	Zip Code																									
Northfield	MN	55057																									
M	M	/	D	D	/	Y	Y	Y	Y																		
0	8		0	8		2	0	0	5																		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.00		79.00		100.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.00		158.00		200.00

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) Rachel Horn			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 10109 Zenith Road			Allocated Activity or Event Year-To-Date 550160.49		
City Bloomington	State MN	Zip Code 55431	Date MM / DD / YYYY 08 / 08 / 2005		
Purpose of Disbursement: Registration fee for RNC meeting			Transaction ID: H4.34557		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.00		79.00		100.00

B. Full Name (Last, First, Middle Initial) Hampton Inn Westchester/Oakbrook			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2222 Enterprise Drive			Allocated Activity or Event Year-To-Date 550915.29		
City Westchester	State IL	Zip Code 60154	Date MM / DD / YYYY 08 / 08 / 2005		
Purpose of Disbursement: Hotel for RNC meeting			Transaction ID: H4.34558		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
158.51		596.29		754.80

C. Full Name (Last, First, Middle Initial) Enterprise Rent a Car - Bloomington			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1517 Lyndale Ave. S			Allocated Activity or Event Year-To-Date 551224.73		
City Bloomington	State MN	Zip Code 55420	Date MM / DD / YYYY 08 / 08 / 2005		
Purpose of Disbursement: Car rental for RNC meeting			Transaction ID: H4.34560		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
64.98		244.46		309.44

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
244.49		919.75		1164.24

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) Advantage paper			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 310 Congress St NW			Allocated Activity or Event Year-To-Date 551320.10	
City Maple Lake	State MN	Zip Code 55358	Date M M / D D / Y Y Y Y 08 / 09 / 2005 Transaction ID: H4.34562	
Purpose of Disbursement: Paper				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
20.03		75.34		95.37

B. Full Name (Last, First, Middle Initial) Brooklyn Printing			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 8616 Xylon Ave N Ste 51			Allocated Activity or Event Year-To-Date 558775.60	
City Minneapolis	State MN	Zip Code 55445	Date M M / D D / Y Y Y Y 08 / 09 / 2005 Transaction ID: H4.34565	
Purpose of Disbursement: Printing not specific fed. candidate				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1565.66		5889.84		7455.50

C. Full Name (Last, First, Middle Initial) Onvoy			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 1450			Allocated Activity or Event Year-To-Date 561073.00	
City Minneapolis	State MN	Zip Code 55485	Date M M / D D / Y Y Y Y 08 / 09 / 2005 Transaction ID: H4.34566	
Purpose of Disbursement: Internet Expense				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
482.45		1814.95		2297.40

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2068.14		7780.13		9848.27

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) Neopost			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 73727			Allocated Activity or Event Year-To-Date 561998.00		
City Chicago	State IL	Zip Code 60673	Date MM / DD / YYYY 08 / 09 / 2005		
Purpose of Disbursement: Photocopy expense			Transaction ID: H4.34567		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
194.25		730.75		925.00

B. Full Name (Last, First, Middle Initial) SMD Copy Systems			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 6520 W Lake St			Allocated Activity or Event Year-To-Date 562372.50		
City Minneapolis	State MN	Zip Code 55408	Date MM / DD / YYYY 08 / 09 / 2005		
Purpose of Disbursement: Telephone expense			Transaction ID: H4.34568		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
78.64		295.86		374.50

C. Full Name (Last, First, Middle Initial) Brian Sullivan			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3125 Fox St			Allocated Activity or Event Year-To-Date 563238.06		
City Orono	State MN	Zip Code 55356	Date MM / DD / YYYY 08 / 09 / 2005		
Purpose of Disbursement: Airfare and hotel			Transaction ID: H4.34572		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
181.77		683.79		865.56

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
454.66		1710.40		2165.06

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) NWA			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address Highway 494			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; width: 100%; text-align: center;">0.00</div>	
City	State	Zip Code	Date M M / D D / Y Y Y Y 08 / 09 / 2005 Transaction ID: H4.34573	
Eagan	MN	55132		
Purpose of Disbursement: Airfare			Category/ Type <div style="border: 1px solid black; width: 100%; height: 20px;"></div>	
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
150.88		567.62		718.50

B. Full Name (Last, First, Middle Initial) Omni Hotels			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 530 William Penn Place			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; width: 100%; text-align: center;">0.00</div>	
City	State	Zip Code	Date M M / D D / Y Y Y Y 08 / 09 / 2005 Transaction ID: H4.34574	
Pittsburgh	PA	15219		
Purpose of Disbursement: Hotel for brian sullivan			Category/ Type <div style="border: 1px solid black; width: 100%; height: 20px;"></div>	
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
30.88		116.18		147.06

C. Full Name (Last, First, Middle Initial) Rachel Horn			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 10109 Zenith Road			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; width: 100%; text-align: center;">563512.18</div>	
City	State	Zip Code	Date M M / D D / Y Y Y Y 08 / 09 / 2005 Transaction ID: H4.34576	
Bloomington	MN	55431		
Purpose of Disbursement: Mileage & hotel			Category/ Type <div style="border: 1px solid black; width: 100%; height: 20px;"></div>	
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
57.57		216.55		274.12

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
57.57		216.55		274.12

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

<p>A. Full Name (Last, First, Middle Initial) Mileage</p> <p>Mailing Address 525 Park Street suite 250</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City St. Paul</td> <td style="width:17%;">State MN</td> <td style="width:33%;">Zip Code 55103</td> <td style="width:17%;"></td> </tr> </table> <p>Purpose of Disbursement: mileage Rachel horn</p> <p>Activity or Event Identifier: Administrative [MEMO ITEM]</p>	City St. Paul	State MN	Zip Code 55103		<p>Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC</p> <p>Allocated Activity or Event Year-To-Date 0.00</p> <p>Date M M / D D / Y Y Y Y 08 / 09 / 2005</p> <p>Transaction ID: H4.34577</p>
City St. Paul	State MN	Zip Code 55103			

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.56		145.04		183.60

<p>B. Full Name (Last, First, Middle Initial) Jackpot Junction Casino Hotel</p> <p>Mailing Address P.O.Box 420</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Morton</td> <td style="width:17%;">State MN</td> <td style="width:33%;">Zip Code 56270</td> <td style="width:17%;"></td> </tr> </table> <p>Purpose of Disbursement: Hotel for Rachel horn expense</p> <p>Activity or Event Identifier: Administrative [MEMO ITEM]</p>	City Morton	State MN	Zip Code 56270		<p>Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC</p> <p>Allocated Activity or Event Year-To-Date 0.00</p> <p>Date M M / D D / Y Y Y Y 08 / 09 / 2005</p> <p>Transaction ID: H4.34578</p>
City Morton	State MN	Zip Code 56270			

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
19.01		71.51		90.52

<p>C. Full Name (Last, First, Middle Initial) Jessica McGlaulin</p> <p>Mailing Address 1500 St. Olaf Ave.</p> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%;">City Northfield</td> <td style="width:17%;">State MN</td> <td style="width:33%;">Zip Code 55057</td> <td style="width:17%;"></td> </tr> </table> <p>Purpose of Disbursement: Mileage</p> <p>Activity or Event Identifier: Administrative</p>	City Northfield	State MN	Zip Code 55057		<p>Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC</p> <p>Allocated Activity or Event Year-To-Date 563808.80</p> <p>Date M M / D D / Y Y Y Y 08 / 11 / 2005</p> <p>Transaction ID: H4.34632</p>
City Northfield	State MN	Zip Code 55057			

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
62.29		234.33		296.62

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
62.29		234.33		296.62

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) Megan Johnson			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1140 Northwood Drive # 227			Allocated Activity or Event Year-To-Date 564255.04		
City	State	Zip Code	Date <input type="text" value="08"/> / <input type="text" value="11"/> / <input type="text" value="2005"/>		
Eagan	MN	55121			
Purpose of Disbursement: Mileage			Transaction ID: H4.34633		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
93.71		352.53		446.24

B. Full Name (Last, First, Middle Initial) Good Technology			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1032 Morse Avenue			Allocated Activity or Event Year-To-Date 564463.82		
City	State	Zip Code	Date <input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Sunnyvale	CA	94089			
Purpose of Disbursement: Palm pilots			Transaction ID: H4.34583		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
43.84		164.94		208.78

C. Full Name (Last, First, Middle Initial) MeetingBridge LLC			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 705 Hunting Ridge Road			Allocated Activity or Event Year-To-Date 564649.34		
City	State	Zip Code	Date <input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2005"/>		
Stamford	CT	06903			
Purpose of Disbursement: Telephone expense			Transaction ID: H4.34584		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
38.96		146.56		185.52

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
176.51		664.03		840.54

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) Comcast Corporation			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1500 Market Street			Allocated Activity or Event Year-To-Date 564756.97	
City	State	Zip Code	Category/ Type	
Philadelphia	PA	19102		
Purpose of Disbursement: Cable			Date M M / D D / Y Y Y Y 08 / 15 / 2005	
Activity or Event Identifier: Administrative			Transaction ID: H4.34585	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
22.60		85.03		107.63

B. Full Name (Last, First, Middle Initial) HUB Property Trust			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address REIT Management Research 330 2nd. Ave. S Suite 110			Allocated Activity or Event Year-To-Date 564766.97	
City	State	Zip Code	Category/ Type	
Minneapolis	MN	55401		
Purpose of Disbursement: Replacement entry card			Date M M / D D / Y Y Y Y 08 / 17 / 2005	
Activity or Event Identifier: Administrative			Transaction ID: H4.34587	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2.10		7.90		10.00

C. Full Name (Last, First, Middle Initial) United Parcel Service			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address PO Box 505820			Allocated Activity or Event Year-To-Date 564966.97	
City	State	Zip Code	Category/ Type	
The Lakes	NV	88905		
Purpose of Disbursement: Courier service			Date M M / D D / Y Y Y Y 08 / 19 / 2005	
Activity or Event Identifier: Administrative			Transaction ID: H4.34588	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
42.00		158.00		200.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
66.70		250.93		317.63

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) US Postmaster			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 401 E Kellogg			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px;">568966.97</div>	
City	State	Zip Code	Category/ Type <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>	
St Paul	MN	55101		
Purpose of Disbursement: Postage expense			Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px;">08 / 19 / 2005</div>	
Activity or Event Identifier: Administrative			Transaction ID: H4.34589	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
840.00		3160.00		4000.00

B. Full Name (Last, First, Middle Initial) Red's Savoy Pizza			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 520 Whitebear Ae			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px;">569055.37</div>	
City	State	Zip Code	Category/ Type <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>	
St. Paul	MN	55119		
Purpose of Disbursement: Pizza for meeting			Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px;">08 / 19 / 2005</div>	
Activity or Event Identifier: Administrative			Transaction ID: H4.34590	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
18.56		69.84		88.40

C. Full Name (Last, First, Middle Initial) Minnesota State Fair			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1265 Snelling Ave N			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px;">569727.37</div>	
City	State	Zip Code	Category/ Type <div style="border: 1px solid black; width: 40px; height: 20px; margin: 0 auto;"></div>	
St Paul	MN	55108		
Purpose of Disbursement: Tickets for state fair			Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px;">08 / 23 / 2005</div>	
Activity or Event Identifier: Administrative			Transaction ID: H4.34591	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
141.12		530.88		672.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
999.68		3760.72		4760.40

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) One Net USA			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4445 W 77th St Ste 207			Allocated Activity or Event Year-To-Date 572397.94		
City Edina	State MN	Zip Code 55435	Date <input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Telephone expense			Transaction ID: H4.34593		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
560.82		2109.75		2670.57

B. Full Name (Last, First, Middle Initial) Ronald Huettl			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 70 Virginia St #1			Allocated Activity or Event Year-To-Date 572449.42		
City St Paul	State MN	Zip Code 55107	Date <input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Domino's pizza for workers			Transaction ID: H4.34594		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
10.81		40.67		51.48

C. Full Name (Last, First, Middle Initial) Greg Rueff			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 3312 Lawrence Rd			Allocated Activity or Event Year-To-Date 572534.31		
City Minneapolis	State MN	Zip Code 55417	Date <input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Domino's pizza for workers			Transaction ID: H4.34595		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
17.83		67.06		84.89

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
589.46		2217.48		2806.94

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) Pioneer Press			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 64890			Allocated Activity or Event Year-To-Date 572785.71		
City St Paul	State MN	Zip Code 55164	Date <input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Help wanted ads			Transaction ID: H4.34596		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
52.79		198.61		251.40

B. Full Name (Last, First, Middle Initial) Advantage paper			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 310 Congress St NW			Allocated Activity or Event Year-To-Date 573101.94		
City Maple Lake	State MN	Zip Code 55358	Date <input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Coffee, sugar and cream			Transaction ID: H4.34597		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
66.41		249.82		316.23

C. Full Name (Last, First, Middle Initial) Resolution Graphics			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 2816 Anthony Ln S			Allocated Activity or Event Year-To-Date 577847.42		
City Minneapolis	State MN	Zip Code 55418	Date <input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: State forms and envelopes			Transaction ID: H4.34598		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
996.55		3748.93		4745.48

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1115.75		4197.36		5313.11

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) SMD Copy Systems			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 6520 W Lake St			Allocated Activity or Event Year-To-Date 578166.98																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y										
M	M	/	D	D	/	Y	Y	Y	Y																
Minneapolis	MN	55408	Transaction ID: H4.34599																						
Purpose of Disbursement: Telephone expense			Category/Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
67.11		252.45		319.56

B. Full Name (Last, First, Middle Initial) Trimble and Associates			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 6381 Osgood Ave N			Allocated Activity or Event Year-To-Date 581786.85																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y										
M	M	/	D	D	/	Y	Y	Y	Y																
Hopkins	MN	55305	Transaction ID: H4.34600																						
Purpose of Disbursement: Legal fees			Category/Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
760.17		2859.70		3619.87

C. Full Name (Last, First, Middle Initial) Midway Party Rental			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC																						
Mailing Address 2110 Gilbert Ave.			Allocated Activity or Event Year-To-Date 581889.84																						
City	State	Zip Code	Date <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></table>			M	M	/	D	D	/	Y	Y	Y	Y										
M	M	/	D	D	/	Y	Y	Y	Y																
St. Paul	MN	55104	Transaction ID: H4.34601																						
Purpose of Disbursement: Rental of P.A. system for fair			Category/Type																						
Activity or Event Identifier: Administrative																									

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.63		81.36		102.99

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
848.91		3193.51		4042.42

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) Verizon Wireless			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 790422			Allocated Activity or Event Year-To-Date 582468.93		
City	State	Zip Code	Category/ Type		
St. Louis	MO	63179			
Purpose of Disbursement: Telephone expense			Date <input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2005"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.34602		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
121.61		457.48		579.09

B. Full Name (Last, First, Middle Initial) Holiday Inn Alexandria			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 5637 St Hwy 295			Allocated Activity or Event Year-To-Date 582750.20		
City	State	Zip Code	Category/ Type		
Alexandria	MN	56308			
Purpose of Disbursement: Room and food for meeting			Date <input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2005"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.34603		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
59.07		222.20		281.27

C. Full Name (Last, First, Middle Initial) Crystal Lachermeier			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1011 13th Ave SE			Allocated Activity or Event Year-To-Date 583034.87		
City	State	Zip Code	Category/ Type		
Minneapolis	MN	55414			
Purpose of Disbursement: Mileage			Date <input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2005"/>		
Activity or Event Identifier: Administrative			Transaction ID: H4.34634		

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
59.78		224.89		284.67

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
240.46		904.57		1145.03

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) Jessica McGlaulin			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1500 St. Olaf Ave.			Allocated Activity or Event Year-To-Date 583293.52		
City Northfield	State MN	Zip Code 55057	Date <input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Mileage			Transaction ID: H4.34635		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
54.32		204.33		258.65

B. Full Name (Last, First, Middle Initial) Rachel Horn			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 10109 Zenith Road			Allocated Activity or Event Year-To-Date 583575.12		
City Bloomington	State MN	Zip Code 55431	Date <input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Mileage			Transaction ID: H4.34636		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
59.14		222.46		281.60

C. Full Name (Last, First, Middle Initial) Joel Cary			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1290 Loma Linda Ln			Allocated Activity or Event Year-To-Date 586614.02		
City Mound	State MN	Zip Code 55364	Date <input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Internet & laptop			Transaction ID: H4.34637		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
638.17		2400.73		3038.90

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
751.63		2827.52		3579.15

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) Sprint			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 152046			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">0.00</div>		
City Irving	State TX	Zip Code 75015	Date M M / D D / Y Y Y Y 08 / 23 / 2005 Transaction ID: H4.34638		
Purpose of Disbursement: Internet expense for Cary					
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.64		88.94		112.58

B. Full Name (Last, First, Middle Initial) Dell Direct Sales, LP			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Dept at 40140			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">0.00</div>		
City Des Moines	State IA	Zip Code 50368	Date M M / D D / Y Y Y Y 08 / 23 / 2005 Transaction ID: H4.34639		
Purpose of Disbursement: Laptop for Cary's expense					
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
612.43		2303.89		2916.32

C. Full Name (Last, First, Middle Initial) Megan Johnson			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1140 Northwood Drive # 227			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">586927.08</div>		
City Eagan	State MN	Zip Code 55121	Date M M / D D / Y Y Y Y 08 / 23 / 2005 Transaction ID: H4.34640		
Purpose of Disbursement: Mileage and county fair fee					
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
65.74		247.32		313.06

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
65.74		247.32		313.06

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) Mileage Mailing Address 525 Park Street suite 250 City State Zip Code St. Paul MN 55103 Purpose of Disbursement: Mileage for Johnson's Activity or Event Identifier: Administrative [MEMO ITEM]	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date <input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2005"/> Transaction ID: H4.34641
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="47.89"/>		<input type="text" value="180.17"/>		<input type="text" value="228.06"/>

B. Full Name (Last, First, Middle Initial) Apple Valley Freedom Days Mailing Address 14200 Cedar Ave S City State Zip Code Apple Valley MN 55124 Purpose of Disbursement: County fair fee for Johnson's Activity or Event Identifier: Administrative [MEMO ITEM]	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date <input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2005"/> Transaction ID: H4.34642
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="15.75"/>		<input type="text" value="59.25"/>		<input type="text" value="75.00"/>

C. Full Name (Last, First, Middle Initial) Thomas Erickson Mailing Address 680 Stewart Ave eri City State Zip Code St Paul MN 55102 Purpose of Disbursement: Cub foods soda for meeting Activity or Event Identifier: Administrative	Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC Allocated Activity or Event Year-To-Date Date <input type="text" value="08"/> / <input type="text" value="23"/> / <input type="text" value="2005"/> Transaction ID: H4.34643
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FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="7.12"/>		<input type="text" value="26.77"/>		<input type="text" value="33.89"/>

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
<input type="text" value="7.12"/>		<input type="text" value="26.77"/>		<input type="text" value="33.89"/>

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
<input type="text"/>	<input type="text"/>	<input type="text"/>

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) Steven Jepsen			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5805 Eastview Drive			Allocated Activity or Event Year-To-Date 587386.34	
City Edina	State MN	Zip Code 55436	Date MM / DD / YYYY 08 / 23 / 2005 Transaction ID: H4.34644	
Purpose of Disbursement: Mileage,hotel & supplies for fair				
Activity or Event Identifier: Administrative				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
89.33		336.04		425.37

B. Full Name (Last, First, Middle Initial) Mileage			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 525 Park Street suite 250			Allocated Activity or Event Year-To-Date 0.00	
City St. Paul	State MN	Zip Code 55103	Date MM / DD / YYYY 08 / 23 / 2005 Transaction ID: H4.34645	
Purpose of Disbursement: Mileage Jepsen				
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
39.99		150.45		190.44

C. Full Name (Last, First, Middle Initial) Holiday Inn Alexandria			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 5637 St Hwy 295			Allocated Activity or Event Year-To-Date 0.00	
City Alexandria	State MN	Zip Code 56308	Date MM / DD / YYYY 08 / 23 / 2005 Transaction ID: H4.34646	
Purpose of Disbursement: Hotel Jepsen				
Activity or Event Identifier: Administrative [MEMO ITEM]				

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
23.57		88.68		112.25

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
89.33		336.04		425.37

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) Menards			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 6800 Wayzata Blvd			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">0.00</div>	
City Golden Valley	State MN	Zip Code 55422		
Purpose of Disbursement: Wood,paint,step ladder for fair Jepson			Category/ Type	
Activity or Event Identifier: Administrative [MEMO ITEM]			Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">08 / 23 / 2005</div>	
			Transaction ID: H4.34647	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
25.76		96.92		122.68

B. Full Name (Last, First, Middle Initial) Minnesota State Fair			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 1265 Snelling Ave N			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">588386.34</div>	
City St Paul	State MN	Zip Code 55108		
Purpose of Disbursement: Tickets for state fair			Category/ Type	
Activity or Event Identifier: Administrative			Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">08 / 25 / 2005</div>	
			Transaction ID: H4.34611	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.00		790.00		1000.00

C. Full Name (Last, First, Middle Initial) Servidia, Inc.			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 10117 Brookside Circle			Allocated Activity or Event Year-To-Date <div style="border: 1px solid black; padding: 2px; width: 100%; text-align: center;">590613.84</div>	
City Bloomington	State MN	Zip Code 55431		
Purpose of Disbursement: Work on web-site not spec. candidate			Category/ Type	
Activity or Event Identifier: Administrative			Date M M / D D / Y Y Y Y <div style="border: 1px solid black; padding: 2px; display: inline-block;">08 / 25 / 2005</div>	
			Transaction ID: H4.34612	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
467.77		1759.73		2227.50

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
677.77		2549.73		3227.50

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) Brooklyn Printing			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 8616 Xylon Ave N Ste 51			Allocated Activity or Event Year-To-Date 591138.49		
City Minneapolis	State MN	Zip Code 55445	Date M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 5		
Purpose of Disbursement: Business cards			Transaction ID: H4.34613		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
110.18		414.47		524.65

B. Full Name (Last, First, Middle Initial) Pioneer Press			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 64890			Allocated Activity or Event Year-To-Date 591238.59		
City St Paul	State MN	Zip Code 55164	Date M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 5		
Purpose of Disbursement: Subscription			Transaction ID: H4.34614		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
21.02		79.08		100.10

C. Full Name (Last, First, Middle Initial) Staples			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address P.O. Box 9020			Allocated Activity or Event Year-To-Date 591806.35		
City Des Moines	State IA	Zip Code 50368	Date M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 5		
Purpose of Disbursement: Hanging folders, markers,			Transaction ID: H4.34615		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
119.23		448.53		567.76

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
250.43		942.08		1192.51

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) Lisa Murphy			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 930 Raymond Ave			Allocated Activity or Event Year-To-Date 592198.47		
City St. Paul	State MN	Zip Code 55114	Date <input type="text" value="08"/> / <input type="text" value="25"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Menards,mulch,sod&flowers for fair booth			Transaction ID: H4.34648		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
82.35		309.77		392.12

B. Full Name (Last, First, Middle Initial) Priority Envelope			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address PO Box 1521			Allocated Activity or Event Year-To-Date 595200.05		
City Minneapolis	State MN	Zip Code 55480	Date <input type="text" value="08"/> / <input type="text" value="29"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Envelopes, stationery & forms			Transaction ID: H4.34618		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
630.33		2371.25		3001.58

C. Full Name (Last, First, Middle Initial) The Pilgram Company			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 8040 Groveland Road			Allocated Activity or Event Year-To-Date 596200.05		
City Mounds View	State MN	Zip Code 55112	Date <input type="text" value="08"/> / <input type="text" value="29"/> / <input type="text" value="2005"/>		
Purpose of Disbursement: Work on database not spec. fed. candidat			Transaction ID: H4.34619		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
210.00		790.00		1000.00

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
922.68		3471.02		4393.70

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) Barbara Linert			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 4282 Braddock Trl			Allocated Activity or Event Year-To-Date 596378.07		
City Eagan	State MN	Zip Code 55123	Date MM / DD / YYYY 08 / 29 / 2005		
Purpose of Disbursement: Office supplies			Transaction ID: H4.34650		
Activity or Event Identifier: Administrative					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.38		140.64		178.02

B. Full Name (Last, First, Middle Initial) Sams Club			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address Corner of 35E and Lone Oak Grove			Allocated Activity or Event Year-To-Date 0.00		
City Eagan	State MN	Zip Code 55122	Date MM / DD / YYYY 08 / 29 / 2005		
Purpose of Disbursement: Plates,first aid kit,cups			Transaction ID: H4.34651		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
24.27		91.28		115.55

C. Full Name (Last, First, Middle Initial) Office Depot			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC		
Mailing Address 1615 W. County Road C			Allocated Activity or Event Year-To-Date 0.00		
City Roseville	State MN	Zip Code 55113	Date MM / DD / YYYY 08 / 29 / 2005		
Purpose of Disbursement: paper			Transaction ID: H4.34652		
Activity or Event Identifier: Administrative [MEMO ITEM]					

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
13.12		49.35		62.47

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
37.38		140.64		178.02

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE		NONFEDERAL SHARE		TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial) Alliance Bank			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 444 Cedar St			Allocated Activity or Event Year-To-Date 598580.79	
City	State	Zip Code	Category/ Type	
St Paul	MN	55101		
Purpose of Disbursement: Bank service charges			Date M M / D D / Y Y Y Y 08 / 30 / 2005	
Activity or Event Identifier: Administrative			Transaction ID: H4.34620	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
462.57		1740.15		2202.72

B. Full Name (Last, First, Middle Initial) Alliance Bank			Type of Allocated Activity: <input checked="" type="checkbox"/> Administrative <input type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 444 Cedar St			Allocated Activity or Event Year-To-Date 610580.79	
City	State	Zip Code	Category/ Type	
St Paul	MN	55101		
Purpose of Disbursement: Postage expense			Date M M / D D / Y Y Y Y 08 / 30 / 2005	
Activity or Event Identifier: Administrative			Transaction ID: H4.34621	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
2520.00		9480.00		12000.00

C. Full Name (Last, First, Middle Initial) Direct Mail Systems			Type of Allocated Activity: <input type="checkbox"/> Administrative <input checked="" type="checkbox"/> Fundraising <input type="checkbox"/> Exempt <input type="checkbox"/> Voter Drive <input type="checkbox"/> Direct Candidate Support <input type="checkbox"/> Public Comm (ref to party only) by PAC	
Mailing Address 12450 AUtomobile Blvd			Allocated Activity or Event Year-To-Date 187519.78	
City	State	Zip Code	Category/ Type	
Clearwater	FL	33762		
Purpose of Disbursement: Mailhouse expense			Date M M / D D / Y Y Y Y 08 / 09 / 2005	
Activity or Event Identifier: Fundraising event 2005(01/01/2005)			Transaction ID: H4.34569	

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
1371.35		5158.89		6530.24

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
4353.92		16379.04		20732.96

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT

**SCHEDULE H4 (FEC Form 3X)
DISBURSEMENT FOR ALLOCATED
FEDERAL/NONFEDERAL ACTIVITY**

NAME OF COMMITTEE (In Full)
REPUBLICAN PARTY OF MINNESOTA

A. Full Name (Last, First, Middle Initial)
Direct Mail Systems

Mailing Address
12450 AUtomobile Blvd

City	State	Zip Code
Clearwater	FL	33762

Purpose of Disbursement:
Mailhouse expense

Category/
Type

Type of Allocated Activity:

- Administrative Fundraising Exempt
 Voter Drive Direct Candidate Support
 Public Comm (ref to party only) by PAC

Allocated Activity or Event Year-To-Date

191028.18

Activity or Event Identifier:
Fundraising event 2005(01/01/2005)

Date 08 / 23 / 2005

Transaction ID: H4.34592

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
736.76		2771.64		3508.40

SUBTOTAL of Allocated Federal and NonFederal Activity This Page

FEDERAL SHARE	+	NONFEDERAL SHARE	=	TOTAL AMOUNT
736.76		2771.64		3508.40

TOTAL This Period (last page for each line only)(Federal share to 21(a)(i) and NonFederal share to 21(a)(i))

FEDERAL SHARE	NONFEDERAL SHARE	TOTAL AMOUNT
22691.55	85363.42	108054.97

Image# 27950090115

Form/Schedule: **SB21B** Sprint \$122.58, Dell \$2916.32 support for Cary's expense of 8/23

Transaction ID: **SB21B.34418**

Form/Schedule: **SB21B** Joel Cary expense of 8/1 - Sprint \$438.54 and Dell 2608.68

Transaction ID: **SB21B.34258**

Image# 27950090116

Form/Schedule: **SB21B** mileage \$183.60, Jackpot Junction casino Hotel \$90.52 support for Rachel Horn expense of 8/9.

Transaction ID: **SB21B.34404**

Form/Schedule: **SB21B** Barbara Linert expense of 8/1 - Office Max \$147.43, and Office depot \$61.55

Transaction ID: **SB21B.34405**

Image# 27950090117

Form/Schedule: **SB21B** Mileage 227.51, new ulm super 8 moter 133.90, republican national committee \$100, expenses for Crystal Lacherm-
Transaction ID: **SB21B.34407** pier 8/8 expense

Form/Schedule: **SB21B** Mileage \$154.79 and office max \$23.77 to support Jessica McGlaufin expense report of 8/2
Transaction ID: **SB21B.34251**

Image# 27950090118

Form/Schedule: **SB21B** Mileage \$214.43 and kinkos \$293.50 to support Nick erickson's expense Of 8/3.

Transaction ID: **SB21B.34406**

Form/Schedule: **SB21B** Postage \$26.09, mileage \$124.39 tu support crystal lachermeier expense of 8/2

Transaction ID: **SB21B.34249**

Image# 27950090119

Form/Schedule: **SB21B** Mileage \$228.06, Apple Valley Freedom Days \$75.00 support for Johnson's expense of 8/23
Transaction ID: **SB21B.34285**

Form/Schedule: **SB22** Mileage \$190.44, Holiday Inn \$112.25, Menards \$122.68 support for Jepson's
Transaction ID: **SB22.34610**

Image# 27950090120

Form/Schedule: **H4** Mileage \$184.71, Office of the Secretary \$363.30, FAD Toys \$344.55, Bobble Head Wond \$62.42, America! \$102.80,
Transaction ID: **H4.34492** C Forbes \$ 202.50 are the support for leslie wilcox expense of 8/2.

Form/Schedule: **H4** NWA \$718.50, Omni hotels \$147.06 support for Sullivan's expense of 8/11
Transaction ID: **H4.34520**

Image# 27950090121

Form/Schedule: **H4** NWA airfare 718.50 and Omni HOTels \$147.06 support for Brian sullivan expense 8/9
Transaction ID: **H4.34568**

Form/Schedule: **H4** Sam's \$115.55, Office depot \$62.47 support for Linert's expense report.
Transaction ID: **H4.34621**
