

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

WIN MINNESOTA FEDERAL PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text" value="286684.42"/>	<input type="text" value="286684.42"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="420148.92"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="365300.00"/>	<input type="text" value="589800.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="785448.92"/>	<input type="text" value="876484.42"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="76534.11"/>	<input type="text" value="167569.61"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="708914.81"/>	<input type="text" value="708914.81"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

WIN MINNESOTA FEDERAL PAC

Report Covering the Period: From: / / To: / /

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		
(i) Itemized (use Schedule A).....	310300.00	434800.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	310300.00	434800.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	55000.00	155000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	365300.00	589800.00
▶ 12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
▶ 13. All Loans Received	0.00	0.00
▶ 14. Loan Repayments Received.....	0.00	0.00
▶ 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
▶ 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
▶ 17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
▶ 18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
▶ 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....	365300.00	589800.00
▶ 20. Total Federal Receipts (subtract Line 18(c) from Line 19)	365300.00	589800.00

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	56534.11	147569.61
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	56534.11	147569.61
22. Transfers to Affiliated/Other Party Committees.....	20000.00	20000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	76534.11	167569.61
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	76534.11	167569.61

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	365300.00	589800.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	365300.00	589800.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	56534.11	147569.61
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	56534.11	147569.61

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 43
<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

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)
WIN MINNESOTA FEDERAL PAC

A. Robert Ackerman
Full Name (Last, First, Middle Initial)

Mailing Address 2007 Ashbourne Drive

City South Pasadena State CA Zip Code 91030

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

Name of Employer Self-Employed Occupation TV Producer/Director

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 06 / 30 / 2014
Transaction ID : SA11AI.4502

Amount of Each Receipt this Period 10000.00

B. ACTBLUE
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 105500.00

Date of Receipt 06 / 30 / 2014
Transaction ID : SA11AI.4502.0

Amount of Each Receipt this Period 10000.00

Note: above contribution earmarked through this organization

[MEMO ITEM]

C. Irving Azoff
Full Name (Last, First, Middle Initial)

Mailing Address 1015 Gayley Ave #1241

City Los Angeles State CA Zip Code 90024

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

Name of Employer Azoff MSG Entertainment Occupation CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 05 / 2014
Transaction ID : SA11AI.4492

Amount of Each Receipt this Period 5000.00

SUBTOTAL of Receipts This Page (optional).....▶ 15000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 43
	<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)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial)
A. ACTBLUE

Mailing Address P.O. BOX 441146

City State Zip Code
SOMERVILLE MA 02144

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
MM / DD / YYYY
05 / 11 / 2014
Transaction ID : SA11AI.4492.0

Amount of Each Receipt this Period
5000.00

Note: above contribution earmarked through this organization

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. Esther Beynon

Mailing Address 2560 Hill Circle

City State Zip Code
Colorado Springs CO 80904

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

Name of Employer Occupation
Self-Employed Consultant

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
05 / 28 / 2014
Transaction ID : SA11AI.4547

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Aleta Borrud

Mailing Address 2411 Merrihills Dr SW

City State Zip Code
Rochester MN 55902

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

Name of Employer Occupation
Mayo Health Systems Physician

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
06 / 04 / 2014
Transaction ID : SA11AI.4550

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional).....▶	5500.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 43
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial)
A. Lawrence David

Mailing Address 11812 San Vicente Blvd, 4th Floor

City Los Angeles	State CA	Zip Code 90049
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FEC ID number of contributing federal political committee. **C**

Name of Employer Cubes Production, Inc.	Occupation Actor/Writer
--	----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 24 / 2014
Transaction ID : SA11AI.4499

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. ACTBLUE

Mailing Address P.O. BOX 441146

City SOMERVILLE	State MA	Zip Code 02144
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FEC ID number of contributing federal political committee. **C**

Name of Employer	Occupation
------------------	------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
64500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : SA11AI.4499.0

Amount of Each Receipt this Period
1000.00

Note: above contribution earmarked through this organization

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. James Deal

Mailing Address 16191 Makah St NW

City Anoka	State MN	Zip Code 55304
---------------	-------------	-------------------

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

Name of Employer Nau County Ins Co	Occupation Chairman
---------------------------------------	------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 26 / 2014
Transaction ID : SA11AI.4559

Amount of Each Receipt this Period
10000.00

SUBTOTAL of Receipts This Page (optional).....▶	15000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 43
	<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)
WIN MINNESOTA FEDERAL PAC

A. Paul Dooley
Full Name (Last, First, Middle Initial)

Mailing Address 4420 Clybourn Ave

City Burbank State CA Zip Code 91505

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

Name of Employer Self-Employed Occupation Actor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
06 / 04 / 2014
Transaction ID : SA11AI.4551

Amount of Each Receipt this Period
5000.00

B. Michael Douglas
Full Name (Last, First, Middle Initial)

Mailing Address 100 Universal City Plaza

City Universal City State CA Zip Code 91608

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

Name of Employer Self-Employed Occupation Actor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
06 / 04 / 2014
Transaction ID : SA11AI.4549

Amount of Each Receipt this Period
5000.00

C. Jim Edwards
Full Name (Last, First, Middle Initial)

Mailing Address 5300 Hamilton Ave
Unit 610

City Cincinnati State OH Zip Code 45224

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

Name of Employer N/A Occupation Retired

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
06 / 06 / 2014
Transaction ID : SA11AI.4552

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 10500.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 43
	<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)
WIN MINNESOTA FEDERAL PAC

A. Robert Glaser
Full Name (Last, First, Middle Initial)

Mailing Address 1724 Howell Place

City Seattle State WA Zip Code 98122

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

Name of Employer REAL Network Occupation Chairman and Interim CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 10 / 2014

Transaction ID : SA11AI.4495

Amount of Each Receipt this Period
 5000.00

B. ACTBLUE
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 61000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2014

Transaction ID : SA11AI.4495.0

Amount of Each Receipt this Period
 5000.00

Note: above contribution earmarked through this organization

[MEMO ITEM]

C. Jay Greenspan
Full Name (Last, First, Middle Initial)

Mailing Address 8383 Wilshire Blvd. #500

City Beverly Hills State CA Zip Code 90211

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

Name of Employer Self-Employed Occupation Actor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 10000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2014

Transaction ID : SA11AI.4500

Amount of Each Receipt this Period
 10000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 15000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 43
	<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)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial)
A. ACTBLUE

Mailing Address P.O. BOX 441146

City State Zip Code
SOMERVILLE MA 02144

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
74500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2014
Transaction ID : SA11AI.4500.0

Amount of Each Receipt this Period
10000.00

Note: above contribution earmarked through this organization

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. Susan Haugerud

Mailing Address 2117 Upper Saint Dennis Rd

City State Zip Code
St. Paul MN 55116

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 26 / 2014
Transaction ID : SA11AI.4558

Amount of Each Receipt this Period
10000.00

Full Name (Last, First, Middle Initial)
C. Willem Kooyker

Mailing Address 112 East 78th St.

City State Zip Code
New York NY 10075

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

Name of Employer Occupation
Blenheim Capital Management, L Investment Management

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 12 / 2014
Transaction ID : SA11AI.4493

Amount of Each Receipt this Period
5000.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 15000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 OF 43
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial)
A. ACTBLUE

Mailing Address P.O. BOX 441146

City State Zip Code
SOMERVILLE MA 02144

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
55000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 18 / 2014
Transaction ID : SA11AI.4493.0

Amount of Each Receipt this Period
5000.00

Note: above contribution earmarked through this organization

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. William Little

Mailing Address 1107 Fifth Avenue

City State Zip Code
New York NY 10128

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

Name of Employer Occupation
N/A Retired

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 24 / 2014
Transaction ID : SA11AI.4498

Amount of Each Receipt this Period
1000.00

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

Mailing Address P.O. BOX 441146

City State Zip Code
SOMERVILLE MA 02144

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
63500.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 30 / 2014
Transaction ID : SA11AI.4498.0

Amount of Each Receipt this Period
1000.00

Note: above contribution earmarked through this organization

[MEMO ITEM]

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 43
	<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)
WIN MINNESOTA FEDERAL PAC

A. Jonathan Littman
Full Name (Last, First, Middle Initial)

Mailing Address 11601 Wilshire Blvd/2150

City Los Angeles State CA Zip Code 90025

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

Name of Employer Jerry Bruckheimer TV Occupation Producer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2014

Transaction ID : SA11AI.4491

Amount of Each Receipt this Period
5000.00

B. ACTBLUE
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
45000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 27 / 2014

Transaction ID : SA11AI.4491.0

Amount of Each Receipt this Period
5000.00

Note: above contribution earmarked through this organization

[MEMO ITEM]

C. Eugene Ludwig
Full Name (Last, First, Middle Initial)

Mailing Address 2620 Foxhall Rd NW

City Washington State DC Zip Code 20007

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

Name of Employer Promontory Interfinancial Netw Occupation Managing Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 27 / 2014

Transaction ID : SA11AI.4560

Amount of Each Receipt this Period
5000.00

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

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

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

FOR LINE NUMBER: PAGE 14 OF 43
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial)
A. Tom Lyons

Mailing Address 5408 Navajo Road

City State Zip Code
Louisville KY 40207

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

Name of Employer Occupation
Self-Employed Writer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 11 / 2014
Transaction ID : SA11AI.4496

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. ACTBLUE

Mailing Address P.O. BOX 441146

City State Zip Code
SOMERVILLE MA 02144

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
61500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 15 / 2014
Transaction ID : SA11AI.4496.0

Amount of Each Receipt this Period
500.00

Note: above contribution earmarked through this organization

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
C. Alfred Metzger

Mailing Address 2560 Hill Circle

City State Zip Code
Colorado Springs CO 80904

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

Name of Employer Occupation
Self-Employed Attorney

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 28 / 2014
Transaction ID : SA11AI.4548

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 43
	<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

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)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial) A. Bette Midler		Date of Receipt MM / DD / YYYY 06 / 06 / 2014 Transaction ID : SA11AI.4554
Mailing Address c/o Sussman and Assoc 700 12th Ave So, Ste. 201		Amount of Each Receipt this Period 7500.00
City Nashville	State TN	Zip Code 37203
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation Actor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 7500.00	

Full Name (Last, First, Middle Initial) B. Vance Opperman		Date of Receipt MM / DD / YYYY 06 / 30 / 2014 Transaction ID : SA11AI.4561
Mailing Address 225 South Sixth Street Suite 5200		Amount of Each Receipt this Period 150000.00
City Minneapolis	State MN	Zip Code 55402
FEC ID number of contributing federal political committee. C		
Name of Employer Key Investment, Inc.	Occupation President and CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210000.00	

Full Name (Last, First, Middle Initial) C. Lenin Pellegrino		Date of Receipt MM / DD / YYYY 06 / 06 / 2014 Transaction ID : SA11AI.4553
Mailing Address 2550 N Halsted St No 2		Amount of Each Receipt this Period 500.00
City Chicago	State IL	Zip Code 60614
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation Nighclub Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional).....▶	158000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 16 OF 43
<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)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial) A. Robert Pohlad		Date of Receipt MM / DD / YYYY 05 / 22 / 2014 Transaction ID : SA11AI.4546
Mailing Address 4801 Bywood West		Amount of Each Receipt this Period 5000.00
City Edina	State MN	Zip Code 55436
FEC ID number of contributing federal political committee. C		
Name of Employer Pohlad Companies	Occupation Business	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

Full Name (Last, First, Middle Initial) B. Ellen Poss		Date of Receipt MM / DD / YYYY 06 / 04 / 2014 Transaction ID : SA11AI.4570
Mailing Address 450 Warren St		Amount of Each Receipt this Period 1000.00
City Brookline	State MA	Zip Code 02445
FEC ID number of contributing federal political committee. C		
Name of Employer N/A	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Bill Prady		Date of Receipt MM / DD / YYYY 04 / 22 / 2014 Transaction ID : SA11AI.4488
Mailing Address 10063 Toluca Lake Ave		Amount of Each Receipt this Period 5000.00
City Toluca Lake	State CA	Zip Code 91602
FEC ID number of contributing federal political committee. C		
Name of Employer Self-Employed	Occupation Television Writer/Producer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional).....▶	11000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 43
	<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)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial)
A. ACTBLUE

Mailing Address P.O. BOX 441146

City State Zip Code
SOMERVILLE MA 02144

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 27 / 2014
Transaction ID : SA11AI.4488.0

Amount of Each Receipt this Period
5000.00

Note: above contribution earmarked through this organization

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. Eric Rudin

Mailing Address 10 Gracie Sq

City State Zip Code
New York NY 10028

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

Name of Employer Occupation
Rudin Management Co Real Estate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 05 / 13 / 2014
Transaction ID : SA11AI.4543

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
C. Fiona Rudin

Mailing Address 10 Gracie Square

City State Zip Code
New York NY 10028

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

Name of Employer Occupation
Not Employed Not Employed

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 14 / 2014
Transaction ID : SA11AI.4487

Amount of Each Receipt this Period
5000.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 OF 43
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<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)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial) A. ACTBLUE		Date of Receipt
Mailing Address P.O. BOX 441146		<input type="text" value="04"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City	State	Zip Code
SOMERVILLE	MA	02144
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="25000.00"/>	
		Transaction ID : SA11AI.4487.0
		Amount of Each Receipt this Period
		<input type="text" value="5000.00"/>
		Note: above contribution earmarked through this organization
		[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. William Schiede		Date of Receipt
Mailing Address 133 Library Pl		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
Princeton	NJ	08540
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
N/A	Not Employed	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="20000.00"/>	
		Transaction ID : SA11AI.4504
		Amount of Each Receipt this Period
		<input type="text" value="20000.00"/>

Full Name (Last, First, Middle Initial) C. ACTBLUE		Date of Receipt
Mailing Address P.O. BOX 441146		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
SOMERVILLE	MA	02144
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="95500.00"/>	
		Transaction ID : SA11AI.4504.0
		Amount of Each Receipt this Period
		<input type="text" value="20000.00"/>
		Note: above contribution earmarked through this organization
		[MEMO ITEM]

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="20000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 43
	<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)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial)
A. Arthur Segal

Mailing Address 118 Dean Road

City State Zip Code
Brookline MA 02445

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

Name of Employer Occupation
Harvard Business School Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 13 / 2014

Transaction ID : SA11AI.4555

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
B. Brian Snyder

Mailing Address 555 Madison Ave, Suite 1302

City State Zip Code
New York NY 10022

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

Name of Employer Occupation
HBJ Investments Partner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
06 / 24 / 2014

Transaction ID : SA11AI.4557

Amount of Each Receipt this Period
5000.00

Full Name (Last, First, Middle Initial)
C. Tomas Torres

Mailing Address 13510 White Oak Landing Blvd.

City State Zip Code
Houston TX 77065

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

Name of Employer Occupation
Accountemps CPA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
05 / 28 / 2014

Transaction ID : SA11AI.4494

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶	11000.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 43
	<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)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial)
A. ACTBLUE

Mailing Address P.O. BOX 441146

City State Zip Code
SOMERVILLE MA 02144

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
56000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 01 / 2014
Transaction ID : SA11AI.4494.0

Amount of Each Receipt this Period
 1000.00

Note: above contribution earmarked through this organization

[MEMO ITEM]

Full Name (Last, First, Middle Initial)
B. Tomas Torres

Mailing Address 13510 White Oak Landing Blvd.

City State Zip Code
Houston TX 77065

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

Name of Employer Occupation
Accountemps CPA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 28 / 2014
Transaction ID : SA11AI.4501

Amount of Each Receipt this Period
 1000.00

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

Mailing Address P.O. BOX 441146

City State Zip Code
SOMERVILLE MA 02144

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
75500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 30 / 2014
Transaction ID : SA11AI.4501.0

Amount of Each Receipt this Period
 1000.00

Note: above contribution earmarked through this organization

[MEMO ITEM]

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 43
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
WIN MINNESOTA FEDERAL PAC

A. Chris Wasserstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 1035 Fifth Ave 10B
 City New York State NY Zip Code 10028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Psychotherapist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 12 / 2014
Transaction ID : SA11AI.4497
 Amount of Each Receipt this Period
1000.00

B. ACTBLUE
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 441146
 City SOMERVILLE State MA Zip Code 02144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **62500.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 15 / 2014
Transaction ID : SA11AI.4497.0
 Amount of Each Receipt this Period
1000.00
 Note: above contribution earmarked through this organization
[MEMO ITEM]

C. Chris Wasserstein
 Full Name (Last, First, Middle Initial)
 Mailing Address 1035 Fifth Ave 10B
 City New York State NY Zip Code 10028
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Self-Employed Occupation Psychotherapist
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **1300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 06 / 13 / 2014
Transaction ID : SA11AI.4556
 Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional).....▶	1300.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 43
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
WIN MINNESOTA FEDERAL PAC

A. Irv Weiser
 Full Name (Last, First, Middle Initial)
 Mailing Address 600 South 2nd Street #703
 City Minneapolis State MN Zip Code 55401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Not Employed Occupation Not Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **04 / 25 / 2014**
Transaction ID : SA11AI.4490
 Amount of Each Receipt this Period **5000.00**

B. ACTBLUE
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 441146
 City SOMERVILLE State MA Zip Code 02144
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **40000.00**

Date of Receipt **04 / 27 / 2014**
Transaction ID : SA11AI.4490.0
 Amount of Each Receipt this Period **5000.00**
 Note: above contribution earmarked through this organization
[MEMO ITEM]

C. Marge Weiser
 Full Name (Last, First, Middle Initial)
 Mailing Address 600 South 2nd Street Unit # 703
 City Minneapolis State MN Zip Code 55401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Not Employed Occupation Not Employed
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **5000.00**

Date of Receipt **04 / 25 / 2014**
Transaction ID : SA11AI.4489
 Amount of Each Receipt this Period **5000.00**

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

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

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

FOR LINE NUMBER: PAGE 23 OF 43
(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	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial)
A. ACTBLUE

Mailing Address P.O. BOX 441146

City SOMERVILLE State MA Zip Code 02144

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
35000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 04 / 27 / 2014

Transaction ID : SA11AI.4489.0

Amount of Each Receipt this Period
5000.00

Note: above contribution earmarked through this organization

[MEMO ITEM]

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	0.00
TOTAL This Period (last page this line number only).....▶	310300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 24 OF 43
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial) A. HOLDING ONTO OREGON'S PRIORITIES		Date of Receipt
Mailing Address PO BOX 3314		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
PORTLAND	OR	97208
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00392738"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="5000.00"/>	
		Transaction ID : SA11C.4567
		Amount of Each Receipt this Period <input type="text" value="5000.00"/>

Full Name (Last, First, Middle Initial) B. LABORERS' INTL UNION OF NO AMERICAN (LIUNA) PAC		Date of Receipt
Mailing Address 905 16TH ST NW		<input type="text" value="05"/> / <input type="text" value="07"/> / <input type="text" value="2014"/>
City	State	Zip Code
WASHINGTON	DC	20006
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value="C00007922"/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="30000.00"/>	
		Transaction ID : SA11C.4565
		Amount of Each Receipt this Period <input type="text" value="30000.00"/>

Full Name (Last, First, Middle Initial) C. LABORERS POLITICAL LEAGUE EDUCATION FUND		Date of Receipt
Mailing Address 905 16TH ST NW		<input type="text" value="05"/> / <input type="text" value="07"/> / <input type="text" value="2014"/>
City	State	Zip Code
WASHINGTON	DC	20006
FEC ID number of contributing federal political committee.	<input type="text" value="C"/> <input type="text" value=""/>	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="20000.00"/>	
		Transaction ID : SA11C.4566
		Amount of Each Receipt this Period <input type="text" value="20000.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="55000.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="55000.00"/>

**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)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. Actblue Technical

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Credit Card Processing Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	0		2	0	1	4

Transaction ID : SB21B.4389

Amount of Each Disbursement this Period

1	9	7	.	5	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. Actblue Technical

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Credit Card Processing Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	7		2	0	1	4

Transaction ID : SB21B.4390

Amount of Each Disbursement this Period

7	9	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C. Actblue Technical

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Credit Card Processing Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	1		2	0	1	4

Transaction ID : SB21B.4391

Amount of Each Disbursement this Period

1	9	7	.	5	0
---	---	---	---	---	---

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

1	1	8	5	.	0	0
---	---	---	---	---	---	---

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

1	1	8	5	.	0	0
---	---	---	---	---	---	---

**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)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. Actblue Technical

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Credit Card Processing Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 18 / 2014

Transaction ID : SB21B.4394

Amount of Each Disbursement this Period

197.50

Full Name (Last, First, Middle Initial)

B. Actblue Technical

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Credit Card Processing Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 01 / 2014

Transaction ID : SB21B.4395

Amount of Each Disbursement this Period

39.50

Full Name (Last, First, Middle Initial)

C. Actblue Technical

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Credit Card Processing Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 15 / 2014

Transaction ID : SB21B.4396

Amount of Each Disbursement this Period

256.75

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

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

493.75

**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)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. Actblue Technical

Mailing Address PO Box 382110

City Cambridge State MA Zip Code 02238

Purpose of Disbursement
Credit Card Processing Fees

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 30 / 2014

Transaction ID : SB21B.4397

Amount of Each Disbursement this Period

1856.50

Full Name (Last, First, Middle Initial)

B. America Votes

Mailing Address 1600 University Ave W Ste 401C

City St. Paul State MN Zip Code 55104

Purpose of Disbursement
Office Rent & Expenses

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 08 / 2014

Transaction ID : SB21B.4398

Amount of Each Disbursement this Period

299.65

Full Name (Last, First, Middle Initial)

C. America Votes

Mailing Address 1600 University Ave W Ste 401C

City St. Paul State MN Zip Code 55104

Purpose of Disbursement
Office Rent & Expenses

001

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2014

Transaction ID : SB21B.4399

Amount of Each Disbursement this Period

299.65

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

2455.80

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)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. America Votes

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		06		2014

Mailing Address 1600 University Ave W
Ste 401C

Transaction ID : SB21B.4400

City St. Paul State MN Zip Code 55104

Amount of Each Disbursement this Period

Purpose of Disbursement
Office Rent & Expenses

001
Category/ Type

299.65

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. Capital Accounting Services

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		08		2014

Mailing Address 620 Wesley Commons Drive
Ste 28

Transaction ID : SB21B.4401

City Golden Valley State MN Zip Code 55427

Amount of Each Disbursement this Period

Purpose of Disbursement
Compliance Consulting

001
Category/ Type

750.00

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. Capital Accounting Services

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		23		2014

Mailing Address 620 Wesley Commons Drive
Ste 28

Transaction ID : SB21B.4402

City Golden Valley State MN Zip Code 55427

Amount of Each Disbursement this Period

Purpose of Disbursement
Compliance Consulting

001
Category/ Type

750.00

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

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

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

1799.65

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**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)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. Capital Accounting Services

Mailing Address 620 Wesley Commons Drive
Ste 28

City Golden Valley State MN Zip Code 55427

Purpose of Disbursement
Compliance Consulting

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
06 / 06 / 2014

Transaction ID : SB21B.4403

Amount of Each Disbursement this Period

750.00

Full Name (Last, First, Middle Initial)

B. EFTPS

Mailing Address PO Box 173788

City Denver State CO Zip Code 80217

Purpose of Disbursement
Payroll Taxes

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2014

Transaction ID : SB21B.4416

Amount of Each Disbursement this Period

860.32

Full Name (Last, First, Middle Initial)

C. EFTPS

Mailing Address PO Box 173788

City Denver State CO Zip Code 80217

Purpose of Disbursement
Payroll Taxes

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2014

Transaction ID : SB21B.4417

Amount of Each Disbursement this Period

1307.80

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

2918.12

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)

<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)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. EFTPS

Mailing Address PO Box 173788

City State Zip Code
Denver CO 80217

Purpose of Disbursement
Payroll Taxes

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4418

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Go To Meeting

Mailing Address 851 West Cypress Creek Rd

City State Zip Code
Fort Lauderdale FL 33309

Purpose of Disbursement
Computer Expense

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4406

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Go To Meeting

Mailing Address 851 West Cypress Creek Rd

City State Zip Code
Fort Lauderdale FL 33309

Purpose of Disbursement
Computer Expense

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4404

Amount of Each Disbursement this Period

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

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)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. Grassroots Solutions

Mailing Address 2929 University Ave SE
Ste 100

City Minneapolis State MN Zip Code 55414

Purpose of Disbursement
Consulting - Political Strategy

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4407

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Grassroots Solutions

Mailing Address 2929 University Ave SE
Ste 100

City Minneapolis State MN Zip Code 55414

Purpose of Disbursement
Consulting - Political Strategy

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4408

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Grassroots Solutions

Mailing Address 2929 University Ave SE
Ste 100

City Minneapolis State MN Zip Code 55414

Purpose of Disbursement
Consulting - Political Strategy

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

001
Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4409

Amount of Each Disbursement this Period

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

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)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. Hotels.com

Mailing Address 10440 N. Central Exp.

City State Zip Code
Dallas TX 75231

Purpose of Disbursement
Travel

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4455

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Intuit

Mailing Address 2632 Marine Way

City State Zip Code
Mountain View CA 94043

Purpose of Disbursement
Computer Software

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4410

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Intuit

Mailing Address 2632 Marine Way

City State Zip Code
Mountain View CA 94043

Purpose of Disbursement
Computer Software

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4411

Amount of Each Disbursement this Period

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

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)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. KMC Strategies, LLC

Mailing Address 3540 Hennepin Ave
Ste 110

City Minneapolis State MN Zip Code 55408

Purpose of Disbursement
Consulting - Fundraising

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4419

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. KMC Strategies, LLC

Mailing Address 3540 Hennepin Ave
Ste 110

City Minneapolis State MN Zip Code 55408

Purpose of Disbursement
Consulting - Fundraising

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4420

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. KMC Strategies, LLC

Mailing Address 3540 Hennepin Ave
Ste 110

City Minneapolis State MN Zip Code 55408

Purpose of Disbursement
Consulting - Fundraising

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4421

Amount of Each Disbursement this Period

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

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)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. Minnesota Revenue

Mailing Address Mail Station 1257

City St. Paul State MN Zip Code 55146

Purpose of Disbursement
Payroll Taxes

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 15 / 2014

Transaction ID : SB21B.4422

Amount of Each Disbursement this Period

138.68

Full Name (Last, First, Middle Initial)

B. Minnesota Revenue

Mailing Address Mail Station 1257

City St. Paul State MN Zip Code 55146

Purpose of Disbursement
Payroll Taxes

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 15 / 2014

Transaction ID : SB21B.4423

Amount of Each Disbursement this Period

239.70

Full Name (Last, First, Middle Initial)

C. Minnesota Revenue

Mailing Address Mail Station 1257

City St. Paul State MN Zip Code 55146

Purpose of Disbursement
Payroll Taxes

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
06 / 13 / 2014

Transaction ID : SB21B.4424

Amount of Each Disbursement this Period

239.70

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

618.08

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)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. Minnesota Unemployment Insurance

Mailing Address 332 Minnesota St

City St. Paul State MN Zip Code 55101

Purpose of Disbursement
Payroll Taxes

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 29 / 2014

Transaction ID : SB21B.4456

Amount of Each Disbursement this Period

270.00

Full Name (Last, First, Middle Initial)

B. Perkins Coie

Mailing Address 1201 3rd Avenue
FI 40

City Seattle State WA Zip Code 98101

Purpose of Disbursement
Legal Fees

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 11 / 2014

Transaction ID : SB21B.4433

Amount of Each Disbursement this Period

142.50

Full Name (Last, First, Middle Initial)

C. Perkins Coie

Mailing Address 1201 3rd Avenue
FI 40

City Seattle State WA Zip Code 98101

Purpose of Disbursement
Legal Fees

001

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 09 / 2014

Transaction ID : SB21B.4434

Amount of Each Disbursement this Period

357.09

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

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

769.59

**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)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. Perkins Coie

Mailing Address 1201 3rd Avenue
FI 40

City State Zip Code
Seattle WA 98101

Purpose of Disbursement
Legal Fees

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4435

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Project Lakes and Plains

Mailing Address 1348 Hewitt Ave

City State Zip Code
Saint Paul MN 55104

Purpose of Disbursement
Consulting - Research

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4436

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Sun Country

Mailing Address 1300 Mendota Heights Rd

City State Zip Code
St. Paul MN 55120

Purpose of Disbursement
Travel

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4466

Amount of Each Disbursement this Period

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

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)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. Sun Country

Mailing Address 1300 Mendota Heights Rd

City St. Paul State MN Zip Code 55120

Purpose of Disbursement
Travel

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4464

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. The Ashmead Group

Mailing Address 235 Massachusetts Ave NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Consulting - Fundraising

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4437

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. The UPS Store

Mailing Address 1360 University Ave W

City St. Paul State MN Zip Code 55104

Purpose of Disbursement
Shipping

Category/
Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4467

Amount of Each Disbursement this Period

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

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)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 180 Kellogg Blvd E

City Saint Paul State MN Zip Code 55101

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 28 / 2014

Transaction ID : **SB21B.4441**

Amount of Each Disbursement this Period: 175.00

Category/Type: 001

Full Name (Last, First, Middle Initial)

B. Natalie Volin Lehr

Mailing Address 67 Otis Avenue

City Saint Paul State MN Zip Code 55104

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 11 / 2014

Transaction ID : **SB21B.4427**

Amount of Each Disbursement this Period: 2008.60

Category/Type: 001

Full Name (Last, First, Middle Initial)

C. Natalie Volin Lehr

Mailing Address 67 Otis Avenue

City Saint Paul State MN Zip Code 55104

Purpose of Disbursement Payroll

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 04 / 25 / 2014

Transaction ID : **SB21B.4428**

Amount of Each Disbursement this Period: 2008.58

Category/Type: 001

SUBTOTAL of Disbursements This Page (optional)..... ▶ 4192.18

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)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. Natalie Volin Lehr

Mailing Address 67 Otis Avenue

City Saint Paul State MN Zip Code 55104

Purpose of Disbursement
Reimbursement - See Memo

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4425

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Sprint

Mailing Address PO Box 6600092

City Dallas State TX Zip Code 75266

Purpose of Disbursement
Telephone

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4425.0

Amount of Each Disbursement this Period

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Natalie Volin Lehr

Mailing Address 67 Otis Avenue

City Saint Paul State MN Zip Code 55104

Purpose of Disbursement
Payroll

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB21B.4429

Amount of Each Disbursement this Period

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

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)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. Natalie Volin Lehr

Mailing Address 67 Otis Avenue

City State Zip Code
Saint Paul MN 55104

Purpose of Disbursement
Payroll

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4430

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Natalie Volin Lehr

Mailing Address 67 Otis Avenue

City State Zip Code
Saint Paul MN 55104

Purpose of Disbursement
Reimbursement - Gifts for Donors

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4426

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Natalie Volin Lehr

Mailing Address 67 Otis Avenue

City State Zip Code
Saint Paul MN 55104

Purpose of Disbursement
Payroll

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4431

Amount of Each Disbursement this Period

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

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)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. Natalie Volin Lehr

Mailing Address 67 Otis Avenue

City Saint Paul State MN Zip Code 55104

Purpose of Disbursement
Payroll

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : SB21B.4432

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

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 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)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. ALLIANCE FOR A BETTER MINNESOTA FEDERAL PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2014

Mailing Address 1600 University Ave W
Ste 309

City State Zip Code
Saint Paul MN 55104

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Transaction ID : SB22.4582

Amount of Each Disbursement this Period

20000.00

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

--

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

--

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

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

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

20000.00

20000.00

**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 type="checkbox"/> 22	<input checked="" 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)
WIN MINNESOTA FEDERAL PAC

Full Name (Last, First, Middle Initial)

A. ALLIANCE FOR A BETTER MINNESOTA FEDERAL PAC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	4

Mailing Address 1600 University Ave W
Ste 309

City State Zip Code
Saint Paul MN 55104

Transaction ID : SB23.4587

Purpose of Disbursement
In-Kind - Legal Services

Amount of Each Disbursement this Period

4	7	5	.	0	0
---	---	---	---	---	---

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. ALLIANCE FOR A BETTER MINNESOTA FEDERAL PAC

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	1	4

Mailing Address 1600 University Ave W
Ste 309

City State Zip Code
Saint Paul MN 55104

Transaction ID : SB23.4588

Purpose of Disbursement
In-Kind - Compliance Services

Amount of Each Disbursement this Period

1	0	0	.	0	0
---	---	---	---	---	---

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

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Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

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

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

0	0	0	.	0	0
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0	0	0	.	0	0
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