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Image# 14952544015

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

FORM 3		For Ar		ized Comr	nittee			Office	Use Only	
1. NAME OF COMMITTEE (in	full)	TYPE OR PF	RINT ▼		mple: If typin r the lines.	g, type	12FE4M	5		
PAULA OVER	BY FC	R CONGRI	ESS					1 1		1
 , , , , , , , ,										
ADDRESS (number ar	nd street)	835 CLIFF	ROAD							
▼ .1200 (aso: a.			1 1 1 1							
Check if different than previously reported. (ACC)				MN 55123						
2. FEC IDENTIFIC	CATION	NUMBER ▼		CITY			STATE A		ZIP CODE STATE ▼	DISTRICT
C C0054872	27			IS THIS REPORT	× NEW (N)	OR	AMENI (A)	DED	MN	02
4. TYPE OF RE		Choose One)	(b)	12-Day PRE -	Election Repo	rt for the:				
(a) Quarterly R	eports:			П	Primary (12P)	>	General (12G)	Runc	off (12R)
April 15	Quarterl	y Report (Q1)		H		-	Goriorai (,	Tidile	/// (1 2 11)
July 15	Quarterly	Report (Q2)		Convention (12C)			Special (12S)			
October 15 Quarterly Report (Q3)				Election on	M M /	04	y y y y y 2014		in the State of	MN
January	31 Year-	End Report (YE)	(c) 3	 30-Day POS 1	-Election Rep	ort for the:				
					General (30G		Runoff (3	0R)	Spec	cial (30S)
Termina	tion Repo	ort (TER)		Election on	M M /	D D /	Y Y Y Y		in the State of	
5. Covering Period	N	10 01		014 Y	through	M M M 10	/ 15		y y y 2014	
I certify that I have e	examined	this Report and	to the be	est of my kno	owledge and l	pelief it is tr	ue, correct an	d com	olete.	
Type or Print Name	of Treasu	rer Ms Overby	/ Mirare PA	NULA						
Signature of Treasure	er <u>M</u>	Is Overby Mirare F	AULA		Electronically 1	Filed] [Date 10	/ [23 / Y 2	2014
NOTE: Submission of	false, erre	oneous, or incon	nplete infor	mation may s	ubject the per	son signing t	this Report to t	the pen	alties of 2 U.S.	C. §437g.
Office									C EODA	2
Use Only									EC FORM Revised 02/2003	

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

PAULA OVERBY FOR CONGRESS

R	eport	Covering the Period: From:	10 / D D / Y Y Y Y Y T	o: MM / DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
			COLUMN A This Period	COLUMN B Election Cycle-to-Date		
6.	Net	Contributions (other than loans)				
	(a)	Total Contributions (other than loans) (from Line 11(e))	200.00	200.00		
	(b)	Total Contribution Refunds (from Line 20(d))	0.00	0.00		
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	200.00	200.00		
7.	Net	Operating Expenditures				
	(a)	Total Operating Expenditures (from Line 17)	295.00	295.00		
	(b)	Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00		
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	295.00	295.00		
8.		orting Period (from Line 27)	357.66			
9.	the	ots and Obligations Owed TO Committee (Itemize all on ledule C and/or Schedule D)	0.00			
10.	the	ots and Obligations Owed BY Committee (Itemize all on ledule C and/or Schedule D)	0.00			

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 PAGE 3 / 5 FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

PAULA OVERBY FOR CONGRESS

10 01 2014 10 15 2014 Report Covering the Period: From: To:

	I. RECEIPTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
11.	CONTRIBUTIONS (other than loans) FROM:		
	(a) Individuals/Persons Other Than Political Committees		
	(i) Itemized (use Schedule A)	0.00	0.00
	(ii) Unitemized(iii) TOTAL of contributions	0.00	0.00
	from individuals	0.00	0.00
	(b) Political Party Committees(c) Other Political Committees	0.00	0.00
	(such as PACs)	0.00	0.00
	(d) The Candidate	200.00	200.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	200.00	200.00
2.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
13.	LOANS:		
	(a) Made or Guaranteed by the Candidate	0.00	0.00
	(b) All Other Loans	0.00	0.00
	(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	0.00
4.	OFFSETS TO OPERATING		
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
5.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
6.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	200.00	200.00

DETAILED SUMMARY PAGE

FEC Form 3 (Revised 02/2003)

of Disbursements

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	295.00	295.00
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19.	LOAN REPAYMENTS: (a) Of Loans Made or Guaranteed	0.00	0.00
	by the Candidate	0.00	0.00
	(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))	0.00	0.00
20.	REFUNDS OF CONTRIBUTIONS TO: (a) Individuals/Persons Other Than Political Committees	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
<u> </u>	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	295.00	295.00
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	RTING PERIOD	452.66
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	200.00
25.	SUBTOTAL (add Line 23 and Line 24)		652.66
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	295.00
27.	CASH ON HAND AT CLOSE OF REPORTING	G PERIOD	357.66

C.

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 5 OF (check only one)

11a 11b 11c X 11d 13b 14

13a 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) PAULA OVERBY FOR CONGRESS Full Name (Last, First, Middle Initial) Ms Overby Mirare PAULA Date of Receipt Mailing Address 835 CLIFF ROAD 10 2014 03 City State Zip Code Transaction ID: SA11D.4107 MN 55123 **EAGAN** FEC ID number of contributing Amount of Each Receipt this Period H4MN02136 federal political committee. 200.00 Name of Employer Occupation NA NA Receipt For: 2014 Election Cycle-to-Date Primary X General 200.00 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City State Zip Code FEC ID number of contributing C Amount of Each Receipt this Period federal political committee. Name of Employer Occupation

Receipt For: Primary General Other (specify)	Election Cycle-to-Date	
Full Name (Last, First, Middle Initial) Mailing Address		Date of Receipt
City	State Zip Code	
FEC ID number of contributing federal political committee.	С	Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: Primary General Other (specify)	Election Cycle-to-Date	
SUBTOTAL of Receipts This Page (optional)		200.00

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

200.00