

TAXPAYERS LEAGUE OF MINNESOTA LIBERTY FUND

P.O. Box 130353

St. Paul, MN 55113-0003

August 20, 2002

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2002 AUG 22 P 12:19

Reports Analysis Division
Federal Election Commission
999 E. Street, NW RM # 709
Washington, DC 20463

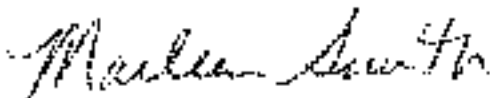
RE: *Statement of Organization, dated 5/23/02 & July Quarterly Report (4/1/02 - 6/30/02)*

Dear Sir or Madam:

Enclosed please find an amended Statement of Organization for the Taxpayers League of Minnesota Liberty Fund with the corrected identification number and name. As well enclosed is the amended July Quarterly Report for the period 4/1/02 - 6/30/02 originally submitted 7-15-02.

I apologize for any inconvenience this error on our Statement of Organization may have caused.

Sincerely,



Marleen Smith
Treasurer

Enc.

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

1. NAME OF COMMITTEE (in full)

USE FED MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines.

12884M5

TAXPAYERS LEAGUE OF MINNESOTA
LIBERTY FUND

ADDRESS (number and street)

P.O. BOX 130353

St Paul

Check if different than previously reported. (ACC)

MIN

55113-1003

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

00339473

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT (Choose One)

(b) Monthly Report Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

July 31 Mid-Year Report (Non-election Year Only) (MY)

Termination Report (TER)

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

Primary (12P)

General (12G)

Runoff (12R)

Conversion (12C)

Special (12S)

Election on

____/____/____

In the State of

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

General (30G)

Runoff (30R)

Special (30S)

Election on

____/____/____

In the State of

5. Covering Period

04 01 2002

through

06 30 2002

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

Type or Print Name of Treasurer

Marleen Smith

Signature of Treasurer

Marleen Smith

Date

07 13 2002

amended 08 19 2002

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

Office Use Only

FEC FORM 3X (Revised 1/01)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name

Taxpayers League of Minnesota Liberty Fund

Report Covering the Period:

From:

04 01 2002

To:

06 30 2002

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <u>2002</u>		<u>199,179</u>
(b) Cash on Hand at Beginning of Reporting Period	<u>193,924</u>	
(c) Total Receipts (from Line 19)	<u>0</u>	<u>0</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	<u>193,924</u>	<u>199,179</u>
7. Total Disbursements (from Line 3D)	<u>100,000</u>	<u>105,250</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<u>93,924</u>	<u>93,924</u>
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	<u>0</u>	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	<u>0</u>	

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 (Revised 1/01)

Page 3

Write or Type Committee Name

Taxpayers League of Minnesota Liberty Fund

Report Covering the Period:

From:

04 01 2002

To:

06 30 2002

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 (see Schedule A)

(ii) Unitemized

(iii) TOTAL (add
Lines 11(a)(i) and (ii))

(b) Political Party Committees

(c) Other Political Committees
(such as PACs)

(d) Total Contributions (add Lines
11(a)(iii), (b), and (c)) (Carry
Totals to Line 32, page 4)

12. Transfers From Affiliated/Other
Party Committees

13. All Loans Received

14. Loan Repayments Received

15. Offsets To Operating Expenditures
(Refunds, Rebates, etc.)
(Carry Totals to Line 36, page 4)

16. Refunds of Contributions Made
to Federal Candidates and Other
Political Committees

17. Other Federal Receipts
(Dividends, Interest, etc.)

18. Transfers from Nonfederal
Account for Joint Activity

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18)

20. Total Federal Receipts
(subtract Line 16 from Line 19)

Grid for Column A: Total This Period. Contains 19 empty rectangular boxes for data entry.

Grid for Column B: Calendar Year-to-Date. Contains 19 empty rectangular boxes for data entry.

Vertical text on the left margin: 11/01/02 11:00 AM

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE OF
	<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"/> 29	_____ OF _____

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)
Taxpayers League Liberty Fund

A. Full Name (Last, First, Middle Initial) **Minnesotans for Republican Congress**

Mailing Address **PO Box 131868**

City **St Paul** State **MIN** Zip Code **55113**

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement **09 / 26 / 2003**

Amount of Each Disbursement this Period **1,000.00**

Category/Type **0.1.1**

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional) **1,000.00**


TOTAL This Period (last page this line number only) **1,000.00**

2003-09-26 10:00:00

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED <i>8-21-02</i>
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House Office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
	<i>8-22-02</i>
PREPARER	DATE PREPARED

2002 OCT 13 11 13 AM '02