

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street)   
 Check if different than previously reported. (ACC)   
   -

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (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   /  /  through  /  /

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 Brandon E. Vaughn

Signature of Treasurer Brandon E. Vaughn [Electronically Filed] Date   /  /

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**Robins Kaplan 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="2016"/>	<input type="text" value="19864.58"/>	<input type="text" value="19864.58"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="9164.58"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="24999.85"/>	<input type="text" value="24999.85"/>
(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="34164.43"/>	<input type="text" value="44864.43"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="4000.00"/>	<input type="text" value="14700.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="30164.43"/>	<input type="text" value="30164.43"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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

**Robins Kaplan 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).....	24437.84	24437.84
(ii) Unitemized .....	562.01	562.01
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	24999.85	24999.85
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	24999.85	24999.85
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))..... ▶	24999.85	24999.85
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	24999.85	24999.85

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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 .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4000.00	14700.00
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)) ..	4000.00	14700.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4000.00	14700.00

**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) .....	24999.85	24999.85
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	24999.85	24999.85
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

**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 6 OF 26
	<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)  
**Robins Kaplan PAC**

Full Name (Last, First, Middle Initial) <b>A. Marla R. Butler</b>		Date of Receipt MM / DD / YYYY 06 / 10 / 2016
Mailing Address 916 Sturges Hwy		<b>Transaction ID : SA11Al.15317</b>
City Westport	State CT	Zip Code 06880
FEC ID number of contributing federal political committee.	C	
Name of Employer Robins Kaplan Miller & Ciresi	Occupation Lawyer	Amount of Each Receipt this Period 449.64
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 449.64	<input type="checkbox"/> Memo Item contribution

Full Name (Last, First, Middle Initial) <b>B. Amy M. Churan</b>		Date of Receipt MM / DD / YYYY 06 / 10 / 2016
Mailing Address 4478 Via Marina #902		<b>Transaction ID : SA11Al.15318</b>
City Marina Del Rey	State CA	Zip Code 90292
FEC ID number of contributing federal political committee.	C	
Name of Employer Robins Kaplan Miller & Ciresi	Occupation Lawyer	Amount of Each Receipt this Period 269.78
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 269.78	<input type="checkbox"/> Memo Item contribution

Full Name (Last, First, Middle Initial) <b>C. Michael Collyard</b>		Date of Receipt MM / DD / YYYY 06 / 10 / 2016
Mailing Address 12623 22nd Street No.		<b>Transaction ID : SA11Al.15319</b>
City West Lakeland Twsp	State MN	Zip Code 55082
FEC ID number of contributing federal political committee.	C	
Name of Employer Robins Kaplan Miller & Ciresi	Occupation Lawyer	Amount of Each Receipt this Period 494.60
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 494.60	<input type="checkbox"/> Memo Item contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1214.02
<b>TOTAL</b> 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 7 OF 26
	(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)  
**Robins Kaplan PAC**

**A. Bernice Conn**  
Full Name (Last, First, Middle Initial)

Mailing Address 4233 Sunnyslope Avenue

City Sherman Oaks State CA Zip Code 91423

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

Name of Employer Robins Kaplan Miller & Ciresi Occupation Lawyer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
449.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11AI.15320**

Amount of Each Receipt this Period  
 449.64

Memo Item contribution

**B. William N. Erickson**  
Full Name (Last, First, Middle Initial)

Mailing Address 27 Hunter Lane

City Canton State MA Zip Code 02021

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

Name of Employer Robins Kaplan Miller & Ciresi Occupation Lawyer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
449.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11AI.15321**

Amount of Each Receipt this Period  
 449.64

Memo Item contribution

**C. Aaron Fahrenkrog**  
Full Name (Last, First, Middle Initial)

Mailing Address 5625 Emerson Avenue South

City Minneapolis State MN Zip Code 55419

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

Name of Employer Robins Kaplan LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
269.78

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11AI.15322**

Amount of Each Receipt this Period  
 269.78

Memo Item contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	▶	1169.06
<b>TOTAL</b> 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 26
	<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)  
**Robins Kaplan PAC**

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

Mailing Address 5701 Cypress Hollow Way

City Naples	State FL	Zip Code 34109
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FEC ID number of contributing federal political committee. **C**

Name of Employer Robins Kaplan Miller & Ciresi	Occupation Lawyer
---	----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
449.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11AI.15323**

Amount of Each Receipt this Period  
449.64

Memo Item contribution

Full Name (Last, First, Middle Initial)  
**B. Anthony A. Froio**

Mailing Address 5 Valley Forge Drive

City Shrewsbury	State MA	Zip Code 01545
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FEC ID number of contributing federal political committee. **C**

Name of Employer Robins, Kaplan, Miller & Ciresi LLP	Occupation Lawyer
---	----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
562.05

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11AI.15325**

Amount of Each Receipt this Period  
562.05

Memo Item contribution

Full Name (Last, First, Middle Initial)  
**C. Michael A Geibelson**

Mailing Address 2130 Kelton Avenue

City Los Angeles	State CA	Zip Code 90025
---------------------	-------------	-------------------

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

Name of Employer Robins, Kaplan, Miller & Cires	Occupation Attorney
--	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
449.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11AI.15326**

Amount of Each Receipt this Period  
449.64

Memo Item contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1461.33
<b>TOTAL</b> 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 9 OF 26  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Robins Kaplan PAC**

Full Name (Last, First, Middle Initial)  
**A. Andrea L. Gothing**

Mailing Address 4307 W. 44th St.

City Edina State MN Zip Code 55424

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

Name of Employer Robins Kaplan Miller & Ciresi Occupation Lawyer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
269.78

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11Al.15327**

Amount of Each Receipt this Period  
269.78

Memo Item contribution

Full Name (Last, First, Middle Initial)  
**B. Jacob M. Holdreith**

Mailing Address 2199 Saint Clair Avenue

City St. Paul State MN Zip Code 55105

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

Name of Employer Robins Kaplan Miller & Ciresi Occupation Lawyer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
494.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11Al.15328**

Amount of Each Receipt this Period  
494.60

Memo Item contribution

Full Name (Last, First, Middle Initial)  
**C. Scott G. Johnson**

Mailing Address 7997 Lea Circle

City Bloomington State MN Zip Code 55438

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

Name of Employer Robins Kaplan Miller & Ciresi Occupation Lawyer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
494.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11Al.15329**

Amount of Each Receipt this Period  
494.60

Memo Item contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1258.98

**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 26
	<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)  
**Robins Kaplan PAC**

**A. Mark S. Laconte**  
Full Name (Last, First, Middle Initial)

Mailing Address 6 Wilson Lane

City Acton State MA Zip Code 01720

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

Name of Employer Robins, Kaplan, Miller & Ciresi LLP Occupation Lawyer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 494.60

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2016

**Transaction ID : SA11AI.15332**

Amount of Each Receipt this Period  
 494.60

Memo Item contribution

**B. Chris K. Larus**  
Full Name (Last, First, Middle Initial)

Mailing Address 7018 Dakota Circle

City Chanhassen State MN Zip Code 55317

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

Name of Employer Robins Kaplan Miller & Ciresi Occupation Lawyer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 562.05

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2016

**Transaction ID : SA11AI.15333**

Amount of Each Receipt this Period  
 562.05

Memo Item contribution

**C. David Leichtman**  
Full Name (Last, First, Middle Initial)

Mailing Address 644 Francis Street

City Pelham State NY Zip Code 10803

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

Name of Employer Robins Kaplan Miller & Ciresi Occupation Lawyer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 359.71

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2016

**Transaction ID : SA11AI.15334**

Amount of Each Receipt this Period  
 359.71

Memo Item contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1416.36
<b>TOTAL</b> 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 26
	<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)  
**Robins Kaplan PAC**

**A. Kellie C. Lerner**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2 River Terrace  
 Apt. 3C  
 City New York State NY Zip Code 10010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Robins Kaplan LLP Occupation Attorney  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **269.78**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11AI.15335**  
 Amount of Each Receipt this Period  
 269.78  
 Memo Item contribution

**B. Anne M. Lockner**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2918 Ewing Avenue South  
 City Minneapolis State MN Zip Code 55416  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Robins Kaplan Miller & Ciresi Occupation Lawyer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **359.71**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11AI.15336**  
 Amount of Each Receipt this Period  
 359.71  
 Memo Item contribution

**C. John N. Love**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3 Deer Run  
 City Wayland State MA Zip Code 01778  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Robins, Kaplan, Miller & Ciresi LLP Occupation Lawyer  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **359.71**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11AI.15337**  
 Amount of Each Receipt this Period  
 359.71  
 Memo Item contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>989.20</b>
<b>TOTAL</b> 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 26  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Robins Kaplan PAC**

Full Name (Last, First, Middle Initial)  
**A. Martin R. Lueck**

Mailing Address 3250 Fox Street

City State Zip Code  
Long Lake MN 55356

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

Name of Employer Occupation  
Robins Kaplan Miller & Ciresi Lawyer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
809.35

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11AI.15338**

Amount of Each Receipt this Period  
809.35

Memo Item contribution

Full Name (Last, First, Middle Initial)  
**B. Christopher W. Madel**

Mailing Address 4725 Vine Hill Road

City State Zip Code  
Deephaven MN 55331

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

Name of Employer Occupation  
Robins Kaplan Miller & Ciresi Lawyer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
629.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11AI.15339**

Amount of Each Receipt this Period  
629.50

Memo Item contribution

Full Name (Last, First, Middle Initial)  
**C. Thomas C Mahlum**

Mailing Address 5312 Chantrey Road

City State Zip Code  
Edina MN 55436

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

Name of Employer Occupation  
Robins Kaplan Miller & Ciresi Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
449.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11AI.15340**

Amount of Each Receipt this Period  
449.64

Memo Item contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1888.49

**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 26
	<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)  
**Robins Kaplan PAC**

**A. William H. Manning**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 463 Mount Curve Blvd.  
 City St. Paul State MN Zip Code 55105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Robins, Kaplan, Miller & Ciresi LLP Occupation Lawyer  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **719.42**

Date of Receipt **06 / 10 / 2016**  
**Transaction ID : SA11AI.15341**  
 Amount of Each Receipt this Period **719.42**  
 Memo Item contribution

**B. David E. Marder**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3 Cheshire Road  
 City Sharon State MA Zip Code 02067  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Robins, Kaplan, Miller & Cires Occupation Lawyer  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **359.71**

Date of Receipt **06 / 10 / 2016**  
**Transaction ID : SA11AI.15342**  
 Amount of Each Receipt this Period **359.71**  
 Memo Item contribution

**C. David Martinez**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9265 Airdome Street  
 City Los Angeles State CA Zip Code 90035  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Robins Kaplan Miller & Cires Occupation Lawyer  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **359.71**

Date of Receipt **06 / 10 / 2016**  
**Transaction ID : SA11AI.15343**  
 Amount of Each Receipt this Period **359.71**  
 Memo Item contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1438.84</b>
<b>TOTAL</b> 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 26  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**Robins Kaplan PAC**

Full Name (Last, First, Middle Initial)  
**A. Richard M. Martinez**

Mailing Address 1150 Garden Court

City Orono State MN Zip Code 55364

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

Name of Employer Robins Kaplan Miller & Ciresi Occupation Lawyer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
359.71

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11AI.15344**

Amount of Each Receipt this Period  
 359.71

Memo Item contribution

Full Name (Last, First, Middle Initial)  
**B. Emmett J. McMahon**

Mailing Address 7970 County Rd 26

City Maple Plain State MN Zip Code 55359

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

Name of Employer Robins Kaplan Miller & Ciresi Occupation Lawyer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
449.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11AI.15345**

Amount of Each Receipt this Period  
 449.64

Memo Item contribution

Full Name (Last, First, Middle Initial)  
**C. Munir R. Meghjee**

Mailing Address 17725 45th Ave. N.

City Plymouth State MN Zip Code 55446

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

Name of Employer Robins, Kaplan, Miller & Cires Occupation Lawyer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
359.71

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11AI.15346**

Amount of Each Receipt this Period  
 359.71

Memo Item contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1169.06

**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 26
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NAME OF COMMITTEE (In Full)  
**Robins Kaplan PAC**

**A. Chris A. Messerly**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 317 Timberline Trail  
 City Vadnais Heights State MN Zip Code 55127  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Robins, Kaplan, Miller & Ciresi LLP Occupation Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 449.64

Date of Receipt 06 / 10 / 2016  
**Transaction ID : SA11AI.15347**  
 Amount of Each Receipt this Period 449.64  
 Memo Item contribution

**B. Cyrus Morton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6624 West Shore Drive  
 City Edina State MN Zip Code 55435  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Robins Kaplan Miller & Ciresi Occupation Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 359.71

Date of Receipt 06 / 10 / 2016  
**Transaction ID : SA11AI.15348**  
 Amount of Each Receipt this Period 359.71  
 Memo Item contribution

**C. Jonathan D. Mutch**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11 Morse Road  
 City Sherborn State MA Zip Code 01770  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Robins Kaplan LLP Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 269.78

Date of Receipt 06 / 10 / 2016  
**Transaction ID : SA11AI.15378**  
 Amount of Each Receipt this Period 269.78  
 Memo Item contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1079.13
<b>TOTAL</b> 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 26
<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)  
**Robins Kaplan PAC**

**A. Stacy E. Oberts**  
Full Name (Last, First, Middle Initial)

Mailing Address 6617 Berkshire Lane North

City Maple Grove	State MN	Zip Code 55311
---------------------	-------------	-------------------

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

Name of Employer Robins Kaplan	Occupation Lawyer
-----------------------------------	----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
359.71

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	15	/	2016

**Transaction ID : SA11AI.15349**

Amount of Each Receipt this Period  
359.71

Memo Item contribution

**B. Steven K. Orloff**  
Full Name (Last, First, Middle Initial)

Mailing Address 260 King Hill Road

City Golden Valley	State MN	Zip Code 55416
-----------------------	-------------	-------------------

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

Name of Employer Robins, Kaplan, Miller & Ciresi LLP	Occupation Lawyer
---	----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
359.71

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	10	/	2016

**Transaction ID : SA11AI.15352**

Amount of Each Receipt this Period  
359.71

Memo Item contribution

**C. Kathleen F. Peterson**  
Full Name (Last, First, Middle Initial)

Mailing Address 222 2nd Street SE  
Unit 901

City Minneapolis	State MN	Zip Code 55414
---------------------	-------------	-------------------

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

Name of Employer Robins Kaplan Miller & Ciresi	Occupation Lawyer
---	----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
719.42

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	10	/	2016

**Transaction ID : SA11AI.15353**

Amount of Each Receipt this Period  
719.42

Memo Item contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1438.84
<b>TOTAL</b> 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 17 OF 26  
(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)  
**Robins Kaplan PAC**

Full Name (Last, First, Middle Initial)  
**A. Jason W. Pfeiffer**

Mailing Address 70 Wear Lane S.

City Orono	State MN	Zip Code 55356
---------------	-------------	-------------------

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

Name of Employer Robins Kaplan	Occupation Lawyer
-----------------------------------	----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
449.64

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11AI.15354**

Amount of Each Receipt this Period  
449.64

Memo Item contribution

Full Name (Last, First, Middle Initial)  
**B. Denise S. Rahne**

Mailing Address 1255 Berkeley Avenue

City St. Paul	State MN	Zip Code 55105
------------------	-------------	-------------------

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

Name of Employer Robins Kaplan LLP	Occupation Attorney
---------------------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
269.78

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11AI.15380**

Amount of Each Receipt this Period  
269.78

Memo Item contribution

Full Name (Last, First, Middle Initial)  
**C. Jennifer M. Robbins**

Mailing Address 225 Portland Avenue, Apt. 252

City Minneapolis	State MN	Zip Code 55401
---------------------	-------------	-------------------

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

Name of Employer Robins Kaplan LLP	Occupation Attorney
---------------------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
269.78

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11AI.15382**

Amount of Each Receipt this Period  
269.78

Memo Item contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	989.20
<b>TOTAL</b> 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 18 OF 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<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)  
**Robins Kaplan PAC**

**A. Stephen P. Safranski**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6552 Cherokee Trail W  
 City Eden Prairie State MN Zip Code 55344  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Robins Kaplan Miller & Ciresi Occupation Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 359.71

Date of Receipt 06 / 10 / 2016  
**Transaction ID : SA11AI.15356**  
 Amount of Each Receipt this Period 359.71  
 Memo Item contribution

**B. Hollis Salzman**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 245E 25th Street Suite 6D  
 City New York State NY Zip Code 10010  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Robins Kaplan LLP Occupation Attorney  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 562.05

Date of Receipt 06 / 10 / 2016  
**Transaction ID : SA11AI.15355**  
 Amount of Each Receipt this Period 562.05  
 Memo Item contribution

**C. Peter A. Schmit**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1345 Meadow Avenue  
 City Shoreview State MN Zip Code 55126  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Robins, Kaplan, Miller & Ciresi LLP Occupation Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 494.60

Date of Receipt 06 / 10 / 2016  
**Transaction ID : SA11AI.15357**  
 Amount of Each Receipt this Period 494.60  
 Memo Item contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1416.36
<b>TOTAL</b> 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 19 OF 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
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	<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)  
**Robins Kaplan PAC**

Full Name (Last, First, Middle Initial)  
**A. Ronald J. Schutz**

Mailing Address 865 Navajo Road

City State Zip Code  
Medina MN 55340

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

Name of Employer Occupation  
Robins Kaplan Miller & Ciresi Lawyer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
809.35

Date of Receipt  
MM / DD / YYYY  
06 / 10 / 2016  
**Transaction ID : SA11AI.15359**

Amount of Each Receipt this Period  
809.35

Memo Item contribution

Full Name (Last, First, Middle Initial)  
**B. Christopher A. Seidl**

Mailing Address 1712 Scheffer Avenue

City State Zip Code  
St. Paul MN 55116

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

Name of Employer Occupation  
Robins Kaplan Miller & Ciresi Lawyer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
269.78

Date of Receipt  
MM / DD / YYYY  
06 / 10 / 2016  
**Transaction ID : SA11AI.15360**

Amount of Each Receipt this Period  
269.78

Memo Item contribution

Full Name (Last, First, Middle Initial)  
**C. Philip L. Sieff**

Mailing Address 4000 Sunset Blvd.

City State Zip Code  
St. Louis Park MN 55416

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

Name of Employer Occupation  
Robins, Kaplan, Miller & Cires Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
449.64

Date of Receipt  
MM / DD / YYYY  
06 / 10 / 2016  
**Transaction ID : SA11AI.15361**

Amount of Each Receipt this Period  
449.64

Memo Item contribution

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1528.77

**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 26
	<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)  
**Robins Kaplan PAC**

**A. Stacey Slaughter**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4340 Lyndale Avenue S.  
City Minneapolis State MN Zip Code 55409  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Robins Kaplan Miller & Ciresi Occupation Lawyer  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 359.71

Date of Receipt 06 / 10 / 2016  
**Transaction ID : SA11AI.15364**  
Amount of Each Receipt this Period 359.71  
 Memo Item contribution

**B. Tara D. Sutton**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2943 Fairview Lane  
City Orono State MN Zip Code 55356  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Robins Kaplan Miller & Ciresi Occupation Lawyer  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 629.50

Date of Receipt 06 / 10 / 2016  
**Transaction ID : SA11AI.15367**  
Amount of Each Receipt this Period 629.50  
 Memo Item contribution

**C. Brandon E. Thompson**  
Full Name (Last, First, Middle Initial)  
Mailing Address 410 Zircon Lane North  
City Plymouth State MN Zip Code 55447  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Robins Kaplan LLP Occupation Attorney  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 359.71

Date of Receipt 06 / 10 / 2016  
**Transaction ID : SA11AI.15368**  
Amount of Each Receipt this Period 359.71  
 Memo Item contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1348.92
<b>TOTAL</b> 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 26
	<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)  
**Robins Kaplan PAC**

**A. Randall M. Tietjen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5509 Interlachen Blvd.  
 City Edina State MN Zip Code 55436  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Robins Kaplan Miller & Ciresi Occupation Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 449.64

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11AI.15369**  
 Amount of Each Receipt this Period  
 449.64  
 Memo Item contribution

**B. Thomas J. Undlin**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4 Bridge Lane  
 City Edina State MN Zip Code 55424  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Robins Kaplan Miller & Ciresi Occupation Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 449.64

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11AI.15370**  
 Amount of Each Receipt this Period  
 449.64  
 Memo Item contribution

**C. David C. Veis**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 101 Ocean Avenue Unit E702  
 City Santa Monica State CA Zip Code 90402  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Robins Kaplan Miller & Ciresi Occupation Lawyer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 449.64

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11AI.15371**  
 Amount of Each Receipt this Period  
 449.64  
 Memo Item contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1348.92
<b>TOTAL</b> 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 22 OF 26
	(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

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)  
**Robins Kaplan PAC**

Full Name (Last, First, Middle Initial)  
**A. Bryan J. Vogel**

Mailing Address 714 Adams Street

City Hoboken State NJ Zip Code 07030

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

Name of Employer Robins Kaplan Miller & Ciresi Occupation Lawyer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
359.71

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11Al.15372**

Amount of Each Receipt this Period  
 359.71

Memo Item contribution

Full Name (Last, First, Middle Initial)  
**B. Samuel L. Walling**

Mailing Address 83 Cambridge Street

City St. Paul State MN Zip Code 55105

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

Name of Employer Robins Kaplan LLP Occupation Attorney

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
269.78

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11Al.15384**

Amount of Each Receipt this Period  
 269.78

Memo Item contribution

Full Name (Last, First, Middle Initial)  
**C. William A. Webster**

Mailing Address 5047 Otis Avenue

City Los Angeles State CA Zip Code 91356

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

Name of Employer Robins Kaplan Miller & Ciresi Occupation Lawyer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
359.71

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11Al.15374**

Amount of Each Receipt this Period  
 359.71

Memo Item contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	989.20
<b>TOTAL</b> 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 23 OF 26
	<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)  
**Robins Kaplan PAC**

Full Name (Last, First, Middle Initial)  
**A. Craig Weiner**

Mailing Address 200 W. 58th Street, Apt. 2B

City New York	State NY	Zip Code 10019
------------------	-------------	-------------------

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

Name of Employer Robins Kaplan LLP	Occupation Attorney
---------------------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
449.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11AI.15386**

Amount of Each Receipt this Period  
449.64

Memo Item contribution

Full Name (Last, First, Middle Initial)  
**B. K. Craig Wildfang**

Mailing Address 18397 Nicklaus Way

City Eden Prairie	State MN	Zip Code 55347
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FEC ID number of contributing federal political committee. **C**

Name of Employer Robins, Kaplan, Miller & Ciresi LLP	Occupation Lawyer
---	----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
719.42

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11AI.15375**

Amount of Each Receipt this Period  
719.42

Memo Item contribution

Full Name (Last, First, Middle Initial)  
**C. Gary L. Wilson**

Mailing Address 4612 Fremont Avenue South

City Minneapolis	State MN	Zip Code 55409
---------------------	-------------	-------------------

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

Name of Employer Robins, Kaplan, Miller & Ciresi LLP	Occupation Lawyer
---	----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
494.60

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2016  
**Transaction ID : SA11AI.15376**

Amount of Each Receipt this Period  
494.60

Memo Item contribution

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1663.66
<b>TOTAL</b> 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 24 OF 26  
(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)  
**Robins Kaplan PAC**

**A.** Full Name (Last, First, Middle Initial)  
**Matthew L. Woods**

Mailing Address 6745 Lakeway Drive

City Chanhassen State MN Zip Code 55317

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

Name of Employer Robins Kaplan Miller & Ciresi Occupation Lawyer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
629.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 10 / 2016

**Transaction ID : SA11Al.15377**

Amount of Each Receipt this Period  
629.50

Memo Item contribution

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

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

Memo Item

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

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

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	629.50
<b>TOTAL</b> This Period (last page this line number only).....▶	24437.84





**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)  
**Robins Kaplan PAC**

Full Name (Last, First, Middle Initial)

**A. BETTY MCCOLLUM**

Mailing Address PO BOX 14131

City State Zip Code  
ST PAUL MN 55114

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: MN District: 04

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 / 16 / 2016

Transaction ID : SB23.15313

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Memo Item

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

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

1000.00

4000.00