09/11/2009 11:09

Image# 29992658065

# **FORM 3X**

## **REPORT OF RECEIPTS AND DISBURSEMENTS**

_		For O	ther Than An	Authorize	∌d Comm	ittee		Office Use O	nly
	NAME OF COMMITTEE (in full)		EC MAILING LA PE OR PRINT		xample:If typi ver the lines	ng, type			
L	COLEMAN MINNESOTA RE	COUN	T COMMITTEE					1 1 1 1	
Ш									
ADD	PRESS (number and street)	PO	BOX 14483					1 1 1 1	
	Check if different								
	than previously reported. (ACC)	ST	PAUL				L MN	5511	4   -
2.	FEC IDENTIFICATION NUM	BER	<b>~</b>	CITY 🛕			STATEA	ZIP	CODE 🛕
	C00457564			3. IS THIS REPOR		NEW (N) OR		AMENDED A)	
4.	TYPE OF REPORT (Choose One)	(b)	Monthly Report	Feb 20 (M	2)	May 20 (M5)	Au	g 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
(	(a) Quarterly Reports:		Due On:	Mar 20 (M3) Jun 20 (M6		Jun 20 (M6)	Se	p 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
	April 15			Apr 20 (M	ł)	Jul 20 (M7)	Oc	et 20 (M10)	Jan 31 (YE)
	Quarterly Report(Q	1)	(c) 12-Day		Primary (1	2P)	Genera	I (12G)	Runoff (12R)
	July 15 Quarterly Report(Q	2)	PRE-Electi				=		
	October 15 Quarterly Report(Q	3)	Report for	tne:	Conventio	n (12G)	Special	(12G)	
	January 31 Quarterly Report(Yi	≣)		Election on					the ate of
	July 31 Mid-Year Report(Non-election Year Only) (MY)	n	(d) 30-Day Post -Electric Report for		General (3	80G)	Runoff	(30R)	Special (30S)
	X Termination Report (TER)		·	Election on			• • • •		the ate of
5.	Covering Period 0.7		01 200	9	through	0 9	1 1	2009	
l cer	tify that I have examined this F	•		my knowledge	and belief it	is true, correct	and complete	<b>).</b>	
Туре	e or Print Name of Treasurer	An	thony Sutton						
Sign	ature of Treasurer Electron	nically F	Filed by Anthon	y Sutton			Date 0.9	1 1	2009
NOT	E : Submission of false, error	neous, c	or incomplete info	rmation may s	subject the pe	erson signing th	s Report to the	ne penalties of 2	2 U.S.C 437g.
	Office Use							FEC FO	ORM 3X 2/2004)

FE6AN026

# **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

2/14

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name COLEMAN MINNESOTA RECOUNT COMMITTEE D 07 0 1 2009 0.9 11 2009 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2009° 194234.00 January 1 (b) Cash on Hand at 65739.45 Begining of Reporting Period ..... 0.00 1149395.00 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 65739.45 1343629.00 6(a) and 6(c) for Column B) ..... 65739.45 1343629.00 Total Disbursements (from Line 31) ..... Cash on Hand at Close of Reporting Period 0.00 0.00 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 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) 3 / 14

Write or Type Committee Name

COLEMAN MINNESOTA RECOUNT COMMITTEE

Report Covering the Period:

From: 0.7

D D 0 1

2009

то:

м м 0 9 D D 11

Y Y Y Y Y 2 0 0 9

	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		070050.00
	(i) Itemized (use Schedule A)	0.00	970050.00
	(ii) Unitemized	0.00	10420.00
	(iii) TOTAL (add	0.00	980470.00
	Lines 11(a)(i) and (ii)	0.00	980470.00
	(b) Political Party Committees	0.00	10000.00
	(c) Other Political Committees	0.00	450005.00
	(such as PACs)	0.00	158925.00
	(d) Total Contributions (add Lines		
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	0.00	1149395.00
	Totals to Line 33, page 3)		
	Transfers From Affiliated/Other	0.00	0.00
	Party Committees	0.00	0.00
2	All Loans Received	0.00	0.00
ა.	All Loans neceived		
4.	Loan Repayments Received	0.00	0.00
	Offsets To Operating Expenditures		
	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
	Refunds of Contributions Made		
	to Federal candidates and Other		
	Political Committees	0.00	0.00
	Other Federal Receipts	2.22	
	(Dividends, Interest, etc.)	0.00	0.00
3.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account		
	(from Schedule H3)	0.00	0.00
		0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
	ייטומי וימוסופי (מעט וט(מ) מווט וט(ט)).		
9.	Total Receipts (add Lines 11(d),	2.22	1110005.00
	12, 13, 14, 15, 16, 17, and 18(c))	0.00	1149395.00
١.	Total Federal Receipts		
·-	rotal Federal Receipts (subtract Line 18(c) from Line 19)	0.00	1149395.00

## **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)

of Disbursements

4/14

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures:  (a) Shared Federal/Non-Federal		
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	11199.70	169254.43
	Expenditures(c) Total Operating Expenditures	11199.70	169254.45
	(add 21(a)(i), (a)(ii) and (b))	11199.70	169254.43
2.	Transfers to Affiliated/Other Party	54500.75	4474074.57
3.	Contributions to	54539.75	1174374.57
	Federal Candidates/Committeesand Other Political Committees	0.00	0.00
4.	Independent Expenditure	0.00	0.00
5.	(use Schedule E)	0.00	0.00
	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26.	Loan Repayments Made	0.00	0.00
	T T		
	Loans Made  Refunds of Contributions To:	0.00	0.00
	(a) Individuals/Persons Other Than Political Committees	0.00	0.00
		0.00	0.00
	<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li></ul>	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) Total Contribution Refunds	0.00	0.00
	(add Lines 28(a), (b), and (c))	0.00	0.00
9.	Other Disbursements	0.00	0.00
30.	Federal Election Activity (2 U.S.C 431(20))		
	(a) Shared Federal Election Activity		
	(from Schedule H6)	0.00	0.00
	(i) Federal Share		
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely	0.00	0.00
	With Federal Funds		
	(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))	65739.45	1343629.00
32.	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	05700 45	10,10000.00
	from Line 31)	65739.45	1343629.00

## **DETAILED SUMMARY PAGE**

of Disbursements

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
33.	Total Contributions (other than loans) from Line 11(d), page 3)	0.00	1149395.00		
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00		
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	1149395.00		
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	11199.70	169254.43		
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00		
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	11199.70	169254.43		

FE6AN026

В.

C.

SCHEDULE B (FEC Form 3X)	11	FOR LINE	NUMBER: PAGE 6/14
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)
-	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and States or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)	, , , , , , , , , , , , , , , , ,		
COLEMAN MINNESOTA RECOUNT COM	MMITTEE		
Full Name (Last, First, Middle Initial) Bryan Cave LLP			Transaction ID: SB21B.5864 Date of Disbursement
Mailing Address PO Box 503089			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 9 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 1 \end{smallmatrix} \end{bmatrix} \   \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix}$
City	State Zip Code		Amount of Each Disbursement this Period
St. Louis	MO 63150		Amount of Each Dispursement this Period
Purpose of Disbursement		004	1625.00
Legal Consulting Candidate Name		001 Category/ Type	
Senate President	ement For:  Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Campaign Financial Services			Transaction ID: SB21B.5821 Date of Disbursement
Mailing Address 7315 Wisconsin Avenue Suite 310 East	}		$\begin{bmatrix} \begin{smallmatrix} M \\ O \end{smallmatrix} \begin{smallmatrix} T \\ M \end{smallmatrix} \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} D \\ O \end{smallmatrix} \begin{bmatrix} D \\ B \\ D \end{bmatrix} \begin{bmatrix} \begin{smallmatrix} Y \\ D \end{smallmatrix} \begin{bmatrix} Y \\ D \end{bmatrix} \begin{bmatrix} Y \\ Y \end{bmatrix} \begin{bmatrix} Y \end{bmatrix} \begin{bmatrix} Y \\ Y \end{bmatrix} \begin{bmatrix} $
City Bethesda	State Zip Code MD 20814		Amount of Each Disbursement this Period
Purpose of Disbursement Compliance Consulting		001	2000.00
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial)			
Campaign Financial Services			Transaction ID: SB21B.5824 Date of Disbursement
Mailing Address 7315 Wisconsin Avenue Suite 310 East	•		$\begin{bmatrix} 0 & 7 & M \\ 0 & 7 & M \end{bmatrix} / \begin{bmatrix} 0 & 0 & B \\ 0 & 8 & 8 \end{bmatrix} / \begin{bmatrix} 0 & 2 & 2 & 0 & 0 & 9 \\ 2 & 2 & 0 & 0 & 9 & 9 \end{bmatrix}$
City Bethesda	State Zip Code MD 20814		Amount of Each Disbursement this Period
Purpose of Disbursement E-Merchant Fee		001	416.25
Candidate Name		Category/ Type	
Office Sought: House Disburs Senate President	ement For: Primary General Other (specify)	. 100	
State: District:			
SUBTOTAL of Disbursements This Page (optional)			4041.25

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

A.

В.

C.

FE6AN026

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER: PAGE 7/14										
ITEMIZED DISBURSEMENTS	for each category of the	(check only											
	Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b										
Any Information copied from such Reports and Staten	nents may not be sold or used by												
or for commercial purposes, other than using the nam	e and address of any political co	mmittee to so	licit contributions from such committee										
NAME OF COMMITTEE (In Full)	N 417755												
COLEMAN MINNESOTA RECOUNT COM	IMITTEE												
Full Name (Last, First, Middle Initial) Campaign Financial Services			Transaction ID: SB21B.5885 Date of Disbursement										
Mailing Address 7315 Wisconsin Avenue Suite 310 East			Amount of Each Disbursement this Period										
City Bethesda	State Zip Code MD 20814												
Purpose of Disbursement			2037.04										
SEE MEMO ITEMS  Candidate Name		001											
Candidate Name	'	Category/ Type											
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)												
State: District:													
Full Name (Last, First, Middle Initial) Campaign Financial Services			<b>Transaction ID:</b> SB21B.5892 Date of Disbursement										
Mailing Address 7315 Wisconsin Avenue Suite 310 East		07 08 7 2009											
City Bethesda	State Zip Code MD 20814		Amount of Each Disbursement this Period  2000.00										
Purpose of Disbursement	Г												
Compliance Consulting Candidate Name		001 Category/											
		Type	IMEMO ITEMI										
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		[MEMO ITEM]										
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B.5893										
Campaign Financial Services			Date of Disbursement										
Mailing Address 7315 Wisconsin Avenue Suite 310 East			07  08  2009										
City Bethesda	State Zip Code MD 20814		Amount of Each Disbursement this Period										
Purpose of Disbursement	Г	•	37.04										
Express Mail Candidate Name		001 Category/ Type											
Senate President	ement For: Primary General Other (specify)	Nr	[MEMO ITEM]										
State: District:													
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>	2037.04										

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

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE				
TEMIZED DISBURSEMENTS	for each category of the	(check only				
	Detailed Summary Page		22 23 24 25 26 28a 28b 28c 29 30b			
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name						
NAME OF COMMITTEE (In Full)						
COLEMAN MINNESOTA RECOUNT COM	MITTEE					
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B.5861			
Campaign Financial Services			Date of Disbursement			
Mailing Address 7315 Wisconsin Avenue Suite 310 East			$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 1 & D \\ 1 & 7 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix}$			
City Bethesda	State Zip Code MD 20814		Amount of Each Disbursement this Period			
Purpose of Disbursement	20014		1327.20			
SEE MEMO ITEMS		001				
Candidate Name		Category/				
Office Sought: House Disburse	ement For:	Туре				
Senate Sought.	Primary General					
President	Other (specify)					
State: District:						
Full Name (Last, First, Middle Initial) Campaign Financial Services			Transaction ID: SB21B.5862			
Campaign Financial Services			Date of Disbursement			
Mailing Address 7315 Wisconsin Avenue Suite 310 East			$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & 1 & D \\ 1 & 7 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix}$			
City Bethesda	State Zip Code MD 20814		Amount of Each Disbursement this Period			
Purpose of Disbursement	20014		1250.00			
Compliance Consulting		001				
Candidate Name		Category/				
Office Sought: House Disburse	ement For:	Туре	[MEMO ITEM]			
Office Sought: House Disburse Senate	Primary General					
President	Other (specify)					
State: District:						
Full Name (Last, First, Middle Initial) Campaign Financial Services			Transaction ID: SB21B.5863			
——————————————————————————————————————			Date of Disbursement			
Mailing Address 7315 Wisconsin Avenue Suite 310 East			$\begin{bmatrix} \begin{smallmatrix} M & 7 & M \\ 0 & 7 & M \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & 1 & D \\ 1 & 7 \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Q \\ 2 & 0 & 0 & 9 \end{bmatrix} $			
City Bethesda	State Zip Code MD 20814		Amount of Each Disbursement this Period			
Purpose of Disbursement	20014		77.20			
Express Shipping		001				
Candidate Name		Category/				
Office Sought: House Disburse	ement For:	Туре	[MEMO ITEM]			
Senate	Primary General					
President	Other (specify) ▼					
State: District:						
SURTOTAL of Dishursements This Page (ontional)			1327.20			

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

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)			
COLEMAN MINNESOTA RECOUNT COM	MITTEE		
Full Name (Last, First, Middle Initial)			Transaction ID: SB21B.5865
Campaign Financial Services			Date of Disbursement
Mailing Address 7315 Wisconsin Avenue Suite 310 East			$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix}$
,	State Zip Code		Amount of Each Disbursement this Period
	MD 20814		575.92
Purpose of Disbursement SEE MEMO ITEMS		001	570.02
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) Campaign Financial Services			Transaction ID: SB21B.5866 Date of Disbursement
Mailing Address 7315 Wisconsin Avenue Suite 310 East			$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix}$
	State Zip Code		Amount of Each Disbursement this Period
Bethesda Purpose of Disbursement	MD 20814		500.00
Compliance Consulting		001	
Candidate Name		Category/ Type	[MEMO ITEM]
Senate President	ement For: Primary General Other (specify)		[MEMOTIEM]
State: District:  Full Name (Last, First, Middle Initial)			
Campaign Financial Services			Transaction ID: SB21B.5872 Date of Disbursement
Mailing Address 7315 Wisconsin Avenue Suite 310 East			$\begin{bmatrix} \begin{smallmatrix} M & 9 & M \\ 0 & 9 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 0 & 9 \end{smallmatrix} \end{bmatrix}$
Bethesda	State Zip Code MD 20814		Amount of Each Disbursement this Period
Purpose of Disbursement Express Mail		001	75.92
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	Туре	[MEMO ITEM]
State: District:			
SUBTOTAL of Disbursements This Page (optional)			575.92

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

A.

В.

# **SCHEDULE B (FEC Form 3X)**

President

District:

FOR LINE NUMBER: PAGE 10/14 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 21b 22 23 25 26 **Detailed Summary Page** 27 28a 28b 28c 29 30b 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) COLEMAN MINNESOTA RECOUNT COMMITTEE Full Name (Last, First, Middle Initial) Transaction ID: SB21B.5827 Laura Van Hove Date of Disbursement o<sup>™</sup> 7 0 8 2009 Mailing Address 2119 Paul Spring Road City State Zip Code Amount of Each Disbursement this Period Alexandria VA 22307 1996.48 Purpose of Disbursement **Fundraising Consulting** 003 Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) State: District: Full Name (Last, First, Middle Initial) Transaction ID: SB21B.5828 Laura Van Hove Date of Disbursement 0 7 0 8ั 2009 Mailing Address 2119 Paul Spring Road City State Zip Code Amount of Each Disbursement this Period Alexandria 22307 VA 1217.86 Purpose of Disbursement Fundraising Consulting 003 Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General

SUBTOTAL of Disbursements This Page (optional)	•	3214.34
TOTAL This Period (last page this line number only)	•	11195.75

Other (specify)

State:

SCHEDULE B (FEC FOIII 3X)		Use separate schedule(s)		FOR LINE (check only			E NUMBER: PAGE 11 / 14				14	
TEMIZED DISBURSEMENTS	Detailed S	category of the Summary Page		2 2	1b >	22 28a		23 28b	24 28	С	25 29	
ony Information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)												3
COLEMAN MINNESOTA RECOUNT C	COMMITTEE											
Full Name (Last, First, Middle Initial) Coleman for Senate 08							of Dis	burse	SB2 ement			V
Mailing Address 680 Transfer Road Suite A						0 7	,	0	8 /	2	0 0 9	)
City St Paul	State MN	Zip Code 55114				Amou	ınt of	Each	Disbur		-	
Purpose of Disbursement Transfer of Net Proceeds Candidate Name				800						142	50.34	
	oursement For:			tegory Type	, 							
X Senate President	Primary Other (spe	General ecify) ▼										
State: MN District: 00												
Full Name (Last, First, Middle Initial) Coleman for Senate 08						Date	of Dis	burse	SB2 ement			V
Mailing Address 680 Transfer Road Suite A						0 <sup>M</sup> 9	M /	<sup>D</sup> 0	1 /	YZ	0 0 g	) \
City St Paul	State MN	Zip Code 55114				Amou	ınt of	Each	Disbur			_
Purpose of Disbursement Transfer of Net Proceeds				800		L.				55	141.74	
Candidate Name	_			tegory Type	/							
X Senate President	oursement For: Primary Other (spe	General cify) ▼										
State: MN District: 00  Full Name (Last, First, Middle Initial)						Trans	sactio	n ID:	SB2	2.583	30	
Republican Party of Minnesota							of Dis	burse	ement 8		2 o ŏ 9	Y
Mailing Address 525 Park Street Suite 250	Otala	7'- 0-1-										
City St Paul Purpose of Disbursement	State MN	Zip Code 55103				Amou	int of	∟ach	Disbur		o2.69	
Transfer of Net Proceeds				008						<u> </u>		
Candidate Name			Ca	tegory ype	1/							
Office Sought: House Dist Senate President	oursement For: Primary Other (spe	General										
State: District:	34101 (300	····j/ ▼										

A.

SCHEDULE B (FEC Form 3X)	Lice congrate cohedule(c)   · · · · -	INE NUMBER: PAGE 12/14
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page (check 21b	only one)    X   22
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name	, , , , , , , , , , , , , , , , , , , ,	' '
NAME OF COMMITTEE (In Full) COLEMAN MINNESOTA RECOUNT COM	MITTEE	
Full Name (Last, First, Middle Initial) Republican Party of Minnesota  Mailing Address 525 Park Street Suite 250		Transaction ID: SB22.5874 Date of Disbursement  O 9 D O 1 V Y Y O 0 9
7	State Zip Code MN 55103	Amount of Each Disbursement this Period 29244.98
Candidate Name	Category/ Type	
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	•	29244.98
TOTAL This Period (last page this line number only)	<u> </u>	54539.75

### PAGE 13 / 14 SCHEDULE D (FEC Form 3X) (Use separate schedule(s) FOR LINE NUMBER: **DEBTS AND OBLIGATIONS** for each (check only one) 9 numbered line) **Excluding Loans** X 10 NAME OF COMMITTEE (In Full) COLEMAN MINNESOTA RECOUNT COMMITTEE A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Campaign Financial Services Compliance Consulting Mailing Address 7315 Wisconsin Avenue Suite 310 East ZIP Code City State MD 20814 Bethesda Outstanding Balance Beginning This Period Transaction ID: SD10.5816 2000.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 0.00 2000.00 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Campaign Financial Services Compliance Consulting Mailing Address 7315 Wisconsin Avenue Suite 310 East ZIP Code City State Bethesda MD 20814 Outstanding Balance Beginning This Period Transaction ID: SD10.5817 2037.04 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 2037.04 0.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Laura Van Hove **Fundraising Consulting** Mailing Address 2119 Paul Spring Road ZIP Code City State Alexandria 22307 VΑ Outstanding Balance Beginning This Period Transaction ID: SD10.5825 1996.48 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1996.48 0.00 0.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only).....

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

## PAGE 14 / 14 **SCHEDULE D (FEC Form 3X)** (Use separate FOR LINE NUMBER: schedule(s) **DEBTS AND OBLIGATIONS** for each numbered line) (check only one) 9 X 10 **Excluding Loans** NAME OF COMMITTEE (In Full) COLEMAN MINNESOTA RECOUNT COMMITTEE A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Laura Van Hove **Fundraising Consulting** Mailing Address 2119 Paul Spring Road ZIP Code City Alexandria VA 22307 Outstanding Balance Beginning This Period Transaction ID: SD10.5826 1217.86 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 1217.86 0.00 0.00 1) SUBTOTALS This Period This Page (optional)..... 0.00 2) TOTALS This Period (last page this line number only)..... 0.00 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only).....

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

0.00