

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

Office Use Only

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

12FE4M5

Friends of Stewart Mills, Inc.

ADDRESS (number and street) ▼

PO Box 1039

Check if different than previously reported. (ACC)

Brainerd

MN

56401

2. **FEC IDENTIFICATION NUMBER** ▼

C C00546739

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

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)

Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

- Primary (12P) General (12G) Runoff (12R)
- Convention (12C) Special (12S)

Election on / / in the State of

(c) 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 Diane Johnson

Signature of Treasurer Diane Johnson

[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.

Office Use Only								
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SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
Friends of Stewart Mills, Inc.

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

	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))....	202440.55	650830.83
(b) Total Contribution Refunds (from Line 20(d))	200.00	200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	202240.55	650630.83
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	162045.00	303345.53
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	200.00
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	162045.00	303145.53
8. Cash on Hand at Close of Reporting Period (from Line 27).....	355738.89	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule 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

FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

Friends of Stewart Mills, Inc.

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).....	100916.37	442003.63
(ii) Unitemized.....	61024.18	152327.20
(iii) TOTAL of contributions from individuals ▶	161940.55	594330.83
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	40500.00	56500.00
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	202440.55	650830.83
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	9253.59	9253.59
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
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)	0.00	200.00
15. OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	500.00
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	211694.14	660784.42

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	162045.00	303345.53
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	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	200.00	200.00
(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)).....	200.00	200.00
21. OTHER DISBURSEMENTS	0.00	1500.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	162245.00	305045.53

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	306289.75
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	211694.14
25. SUBTOTAL (add Line 23 and Line 24).....	517983.89
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	162245.00
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	355738.89

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 5 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
MARILYN ALBRECHT

Mailing Address 30567 LAKEVIEW AVE

City RED WING State MN Zip Code 55066-5655

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

Name of Employer RED WING PUBLISHING Occupation ASST PUBLISHER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 18 / 2014

Transaction ID : SA11.3085

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PATRICK D. ALEXANDER

Mailing Address 16540 GRAYS BAY BLVD

City WAYZATA State MN Zip Code 55391-2915

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

Name of Employer COLD SPRING GRANITE Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 17 / 2014

Transaction ID : SA11.3143

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

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

Mailing Address 84 HOWARD GNESEN RD

City DULUTH State MN Zip Code 55811-1612

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

Name of Employer AMSOIL INC Occupation MANAGEMENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 11 / 2014

Transaction ID : SA11.2548

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

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

2000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
JAMES ANDERSON

Mailing Address **2441 SW BIRCH FOREST RD**

City **NISSWA** State **MN** Zip Code **56468-2021**

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

Name of Employer **ATS** Occupation **RELATIONSHIP CONSULTANT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11.4007

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

Mailing Address **P.O. BOX 360**

City **BROOKSTON** State **MN** Zip Code **55711-0360**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
02 / 19 / 2014

Transaction ID : SA11.3257

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

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

Mailing Address **2441 BIRCH FOREST ROAD SW**

City **NISSWA** State **MN** Zip Code **56468-2021**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
01 / 28 / 2014

Transaction ID : SA11.2606

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

1200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
MR. SCOTT L. ANDERSON

Mailing Address 29 PARK LN

City State Zip Code
MINNEAPOLIS MN 55416-4339

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

Name of Employer Occupation
FABYANSKE LAW FIRM ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 26 / 2014

Transaction ID : SA11.3885

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC)

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

Mailing Address 12230 45TH AV N

City State Zip Code
PLYMOUTH MN 55442-2443

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

Name of Employer Occupation
PROFESSIONAL INSTRUMENTS CO MANUFACTURER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 13 / 2014

Transaction ID : SA11.3601

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

Mailing Address 10709 WAYZATA BOULEVARD, SUITE 220

City State Zip Code
MINNETONKA MN 55305-1530

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFF(INFORMATION REQUESTED PER BEST EFF(

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 28 / 2014

Transaction ID : SA11.2571

Amount of Each Receipt this Period
2000.00

CONTRIBUTION

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

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

4850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
TANI D. AUSTIN

Mailing Address 5334 HARBOR TOWN DR

City DALLAS State TX Zip Code 75287-7319

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 24 / 2014

Transaction ID : SA11.3363

Amount of Each Receipt this Period
 2600.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CARL R. BERGQUIST

Mailing Address 21050 OAK LN

City EXCELSIOR State MN Zip Code 55331-8619

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

Name of Employer **THE BERGQUIST CO.** Occupation **CHAIRMAN**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 19 / 2014

Transaction ID : SA11.3687

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JASON BERNICK

Mailing Address 40494 COUNTY RD 1

City RICE State MN Zip Code 56367-7505

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

Name of Employer **BERNICK'S** Occupation **MANAGEMENT**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11.4072

Amount of Each Receipt this Period
 2000.00
 CONTRIBUTION

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

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

5100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
PAMELA BERNICK

Mailing Address 515 5TH AVE N

City SAINT CLOUD State MN Zip Code 56303-3500

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 21 / 2014

Transaction ID : SA11.3344

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
RICHARD J. BERNICK

Mailing Address P.O. BOX 7008

City SAINT CLOUD State MN Zip Code 56302-7008

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

Name of Employer THE BERNICK COMPANIES Occupation C.E.O.

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 25 / 2014

Transaction ID : SA11.3862

Amount of Each Receipt this Period
 200.00
 CONTRIBUTION

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

Mailing Address P.O. BOX 813

City SAINT CLOUD State MN Zip Code 56302-0813

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

Name of Employer DESIGN ELECTRIC Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 31 / 2014

Transaction ID : SA11.2877

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

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

1200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. TERRENCE A. BRANDT		Date of Receipt M M / D D / Y Y Y Y 03 / 17 / 2014	
Mailing Address 18000 - 26TH AVE N		Transaction ID : SA11.3644	
City PLYMOUTH	State MN	Zip Code 55447-1615	Amount of Each Receipt this Period _____ 250.00 CONTRIBUTION
FEC ID number of contributing federal political committee.		C	
Name of Employer LOCKTON INC	Occupation BUSINESS DEVELOPMENT		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 250.00		

Full Name (Last, First, Middle Initial) B. DEBORAH A. BRATTLOF		Date of Receipt M M / D D / Y Y Y Y 03 / 05 / 2014	
Mailing Address 14870 E FISH HOOK DR		Transaction ID : SA11.3467	
City PARK RAPIDS	State MN	Zip Code 56470-6245	Amount of Each Receipt this Period _____ 200.00 CONTRIBUTION
FEC ID number of contributing federal political committee.		C	
Name of Employer HOMEMAKER	Occupation HOMEMAKER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 400.00		

Full Name (Last, First, Middle Initial) C. MR. BRIAN C. BURGESSON		Date of Receipt M M / D D / Y Y Y Y 01 / 31 / 2014	
Mailing Address 3759 NEW BRIGHTON RD		Transaction ID : SA11.2901	
City ARDEN HILLS	State MN	Zip Code 55112-3214	Amount of Each Receipt this Period _____ 1000.00 CONTRIBUTION
FEC ID number of contributing federal political committee.		C	
Name of Employer WILDLIFE RESEARCH CENTER INC	Occupation EXECUTIVE/SALES		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date _____ 2500.00		

SUBTOTAL of Receipts This Page (optional).....	_____ 1450.00
TOTAL This Period (last page this line number only).....	_____

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
MR. JOHN R. BURGESON

Mailing Address 4345 - 157TH AVE NW

City ANDOVER State MN Zip Code 55304-2925

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

Name of Employer WILDLIFE RESEARCH CENTER INC Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 31 / 2014

Transaction ID : SA11.2898

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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

Mailing Address 7176 165TH ST E

City PRIOR LAKE State MN Zip Code 55372-9308

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

Name of Employer SELF Occupation ENGINEER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 28 / 2014

Transaction ID : SA11.2620

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

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

Mailing Address 5972 OJIBWA ROAD

City BRAINERD State MN Zip Code 56401-7216

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

Name of Employer MINI KIX INX Occupation BUSINESS OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 23 / 2014

Transaction ID : SA11.3740

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
DOUGLAS COLEMAN JR.

Mailing Address 140 S BROWN RD

City State Zip Code
LONG LAKE MN 55356-9134

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

Name of Employer Occupation
DAIN RAUSCHER AND WESSELS BANKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 27 / 2014

Transaction ID : SA11.4055

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

Mailing Address 57777 227TH STREET

City State Zip Code
MANKATO MN 56001-8598

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 06 / 2014

Transaction ID : SA11.2986

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JAMES R. COTE

Mailing Address 7440 SHANNON DR

City State Zip Code
MINNEAPOLIS MN 55439-2637

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 17 / 2014

Transaction ID : SA11.3162

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
SAM COTE

Mailing Address 925 NINE MILE CV S

City HOPKINS State MN Zip Code 55343-7781

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

Name of Employer CAMP LINCOLN Occupation DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1042.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11.3918

Amount of Each Receipt this Period
 42.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MS. IRMA M. CRAGUN

Mailing Address 11000 CRAGUNS DR

City BRAINERD State MN Zip Code 56401-2020

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

Name of Employer CRAGUN'S LODGE Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
850.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2014

Transaction ID : SA11.3833

Amount of Each Receipt this Period
 350.00
 CONTRIBUTION

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

Mailing Address 1325 MOUNT CURVE AVE

City MINNEAPOLIS State MN Zip Code 55403-1009

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

Name of Employer US BANCORP Occupation BANKING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11.4129

Amount of Each Receipt this Period
 1500.00
 CONTRIBUTION

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

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

1892.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
WILLIAM DINKEL

Mailing Address 1345 MAYWOOD STREET

City SAINT PAUL State MN Zip Code 55117-4136

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

Name of Employer ADVANCED AUTO SERVICE Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 15 / 2014

Transaction ID : SA11.2530

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
DAVID J. DONDELINGER

Mailing Address 3656 TERRACE DR

City BRAINERD State MN Zip Code 56401-6882

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

Name of Employer DONDELINGER CHEVROLET Occupation AUTO DEALER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 19 / 2014

Transaction ID : SA11.3696

Amount of Each Receipt this Period
 1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. JOSEPH B. ELDER

Mailing Address 6328 MILDRED AVE

City EDINA State MN Zip Code 55439-1448

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

Name of Employer SINGLY PLY SYSTEMS INC Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 17 / 2014

Transaction ID : SA11.3126

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

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

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

1500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
DAVID ELSENPETER

Mailing Address 11014 PINE BEACH PENINSULA

City EAST GULL LAKE State MN Zip Code 56401-2024

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

Name of Employer LAKES STATE BANK Occupation BANKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 400.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 27 / 2014

Transaction ID : SA11.3412

Amount of Each Receipt this Period
 _____ 100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. JOHN C. ELSENPETER

Mailing Address P.O. BOX 176

City WALKER State MN Zip Code 56484-0176

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 300.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2014

Transaction ID : SA11.3867

Amount of Each Receipt this Period
 _____ 100.00
 CONTRIBUTION

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

Mailing Address 14600 ROCKSBOROUGH ROAD

City MINNETONKA State MN Zip Code 55345-3716

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

Name of Employer RAMSEY ENGLER LTD Occupation BUSINESS PRINCIPAL

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 _____ 350.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2014

Transaction ID : SA11.3593

Amount of Each Receipt this Period
 _____ 100.00
 CONTRIBUTION

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

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

_____ 300.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
MR. WARD A. ERICKSON

Mailing Address 19700 WATERFORD CT

City Shorewood State MN Zip Code 55331-7027

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 17 / 2014

Transaction ID : SA11.3166

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. WARD A. ERICKSON

Mailing Address 19700 WATERFORD CT

City Shorewood State MN Zip Code 55331-7027

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11.4077

Amount of Each Receipt this Period
150.00
 CONTRIBUTION

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

Mailing Address P.O. BOX 34

City Minneapolis State MN Zip Code 55440-0034

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

Name of Employer BANNER ENGINEERING Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11.4009

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
JOHN T. FORSTROM

Mailing Address 401 BERMUDA ISLE CIR

City VENICE State FL Zip Code 34292-4510

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2014

Transaction ID : SA11.3213

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

Mailing Address 14720 MAIN ST

City ROGERS State MN Zip Code 55374-9416

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 25 / 2014

Transaction ID : SA11.3821

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. KEITH A. FRANKLIN

Mailing Address 13429 COUNTY RD 7 NW

City CLEARWATER State MN Zip Code 55320-2202

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

Name of Employer FRANKLIN OUTDOOR ADV CO Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 17 / 2014

Transaction ID : SA11.3214

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
JOHN FUND

Mailing Address P.O. BOX 853

City: EDWARDSVILLE State: IL Zip Code: 62025-0853

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

Name of Employer: INFORMATION REQUESTED PER BEST EFFC Occupation: INFORMATION REQUESTED PER BEST EFFC

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1000.00

Date of Receipt: 03 / 31 / 2014

Transaction ID : SA11.4080

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID W. GRAEBEL

Mailing Address 8111 BAY COLONY DR 1103 #1103

City: NAPLES State: FL Zip Code: 34108-8596

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

Name of Employer: GRAEBEL COMPANIES Occupation: CHAIRMAN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 300.00

Date of Receipt: 03 / 26 / 2014

Transaction ID : SA11.3891

Amount of Each Receipt this Period: 100.00

CONTRIBUTION

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

Mailing Address 13200 43RD STREET NE

City: SAINT MICHAEL State: MN Zip Code: 55376-8420

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

Name of Employer: RETIRED Occupation: RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 500.00

Date of Receipt: 02 / 06 / 2014

Transaction ID : SA11.3013

Amount of Each Receipt this Period: 500.00

CONTRIBUTION

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

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

1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
ARTHUR HAHN

Mailing Address 9708 UTICA RD

City State Zip Code
MINNEAPOLIS MN 55437-2039

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

Name of Employer Occupation
SELF EMPLOYED OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
0.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 28 / 2014

Transaction ID : SA11.4184

Amount of Each Receipt this Period
-75.00

CONTRIBUTION

CHARGED BACK

B. Full Name (Last, First, Middle Initial)
DAVID W. HANSON

Mailing Address 1030 ANGELO DR

City State Zip Code
MINNEAPOLIS MN 55422-4706

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 17 / 2014

Transaction ID : SA11.3104

Amount of Each Receipt this Period
150.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. MARK D. HANSON

Mailing Address 12987 PIONEER TRAIL

City State Zip Code
EDEN PRAIRIE MN 55347-4109

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

Name of Employer Occupation
SEAFOAM SALES OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3500.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 15 / 2014

Transaction ID : SA11.2474

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC)

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

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

1075.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
SCOTT HARMS

Mailing Address 11824 150 TH AVE

City FORESTON State MN Zip Code 56330-9523

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

Name of Employer AUTO BODY TECHNICIANS Occupation OWNER OPERATOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11.4037

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

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

Mailing Address 11 CIRCLE W

City EDINA State MN Zip Code 55436-1312

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 28 / 2014

Transaction ID : SA11.2757

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
LINDA L. HOEGGER

Mailing Address 737 JANSEN AVE SE

City HANOVER State MN Zip Code 55341-4096

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

Name of Employer REMANCO HYDRAULICS INC Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 21 / 2014

Transaction ID : SA11.3712

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
MR. GERALD J. HOMMES

Mailing Address 6180 LANEWOOD LN N

City State Zip Code
PLYMOUTH MN 55446-4543

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 17 / 2014

Transaction ID : SA11.3063

Amount of Each Receipt this Period
50.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. GERALD J. HOMMES

Mailing Address 6180 LANEWOOD LN N

City State Zip Code
PLYMOUTH MN 55446-4543

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 25 / 2014

Transaction ID : SA11.3852

Amount of Each Receipt this Period
100.00
CONTRIBUTION

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

Mailing Address 1175 QUINLAN AVE SO

City State Zip Code
LAKELAND MN 55043-9527

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

Name of Employer Occupation
HBI EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11.4025

Amount of Each Receipt this Period
1600.00
CONTRIBUTION

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

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

1750.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
JAMES JAROCKI

Mailing Address 2628 BRANCH ST

City State Zip Code
DULUTH MN 55812-2333

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

Name of Employer Occupation
STDAT PARTNERS INVESTMENT MANAGER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11.4027

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

Mailing Address 61 W PLEASANT LAKE ROAD

City State Zip Code
SAINT PAUL MN 55127-2057

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 28 / 2014

Transaction ID : SA11.2667

Amount of Each Receipt this Period
 250.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
GARY M. KECHELY

Mailing Address 901 2ND AVE NE

City State Zip Code
BRAINERD MN 56401-2410

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

Name of Employer Occupation
RETIRED RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11.3743

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

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

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

850.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
ESTHER M. KELLOGG

Mailing Address 339 MOUNT CURVE BLVD

City SAINT PAUL State MN Zip Code 55105-1217

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 11 / 2014

Transaction ID : SA11.3502

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. ROBERT E. KEPPEL

Mailing Address 5045 PARK TER

City EDINA State MN Zip Code 55436-1098

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11.3780

Amount of Each Receipt this Period
 100.00

CONTRIBUTION

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

Mailing Address 6809 S HEATHERRIDGE AVE

City SIOUX FALLS State SD Zip Code 57108-3324

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

Name of Employer PUBLIC AFFAIRS COMPANY Occupation EXECUTIVE VP

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 31 / 2014

Transaction ID : SA11.2897

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

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

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

1600.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) STEVEN KNUTH		Date of Receipt M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 887 HIGHLAND TRL		Transaction ID : SA11.2895
City HUDSON	State WI	Zip Code 54016-7970
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2600.00	
Name of Employer PUBLIC AFFAIRS COMPANY	Occupation PRESIDENT	CONTRIBUTION
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC)

Full Name (Last, First, Middle Initial) RICHARD KOCH		Date of Receipt M M / D D / Y Y Y Y 02 / 07 / 2014
Mailing Address 29813 HUXTABLE POINT RD		Transaction ID : SA11.3043
City MERRIFIELD	State MN	Zip Code 56465-4340
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer INFORMATION REQUESTED PER BEST EFFC	Occupation INFORMATION REQUESTED PER BEST EFF	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

Full Name (Last, First, Middle Initial) RICHARD KOCH		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 29813 HUXTABLE POINT RD		Transaction ID : SA11.4034
City MERRIFIELD	State MN	Zip Code 56465-4340
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 100.00	
Name of Employer INFORMATION REQUESTED PER BEST EFFC	Occupation INFORMATION REQUESTED PER BEST EFF	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 400.00	

SUBTOTAL of Receipts This Page (optional).....	2800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
PETE KRUCHTEN

Mailing Address 1647 OAKFOREST DR

City State Zip Code
ROCKFORD IL 61107-5505

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

Name of Employer Occupation
KRUCHTEN INC SALES/MARKETING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 05 / 2014

Transaction ID : SA11.3485

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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

Mailing Address 29754 SHOREVIEW LANE

City State Zip Code
BREEZY POINT MN 56472-3187

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

Name of Employer Occupation
TK COMPANIES INC R E DEVELOPER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 26 / 2014

Transaction ID : SA11.3903

Amount of Each Receipt this Period
 250.00

CONTRIBUTION

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

Mailing Address 3323 OAK ST

City State Zip Code
BRAINERD MN 56401-3807

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

Name of Employer Occupation
D & J PRINTING INC PRINTING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3600.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 24 / 2014

Transaction ID : SA11.3805

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC)

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

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

2250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
MRS. MARIE A. LANDSBURG

Mailing Address 2472 MAPLE DR SW

City NISSWA State MN Zip Code 56468-2015

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

Name of Employer BUSINESS OWNER Occupation SELF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 24 / 2014

Transaction ID : SA11.3355

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
GREGORY W. LANGLEY

Mailing Address 5750 BIRCHDALE RD

City BRAINERD State MN Zip Code 56401-6849

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : SA11.3779

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MS. MARGARET L. LAURIAN

Mailing Address 14434 LAURIAN LN

City BRAINERD State MN Zip Code 56401-6499

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y
01 / 28 / 2014

Transaction ID : SA11.2747

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

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

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

400.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
MS. MARGARET L. LAURIAN

Mailing Address 14434 LAURIAN LN

City BRAINERD State MN Zip Code 56401-6499

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 17 / 2014

Transaction ID : SA11.3642

Amount of Each Receipt this Period
 100.00
 CONTRIBUTION

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

Mailing Address 2055 OLD PLANK RD

City DEPERE State WI Zip Code 54115-8470

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

Name of Employer FLEET WHOLESALE SUPPLY CO.INC. Occupation DIRECTOR

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 06 / 2014

Transaction ID : SA11.2435

Amount of Each Receipt this Period
 500.00
 CONTRIBUTION

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

Mailing Address P.O. BOX 353

City MEDINA State MN Zip Code 55357-0353

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

Name of Employer MINNESOTA LIMITED Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 27 / 2014

Transaction ID : SA11.4049

Amount of Each Receipt this Period
 2600.00
 CONTRIBUTION

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

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

3200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
PHILIP LINDAU JR.

Mailing Address **2825 MEDICINE RIDGE RD**

City **PLYMOUTH** State **MN** Zip Code **55441-3259**

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

Name of Employer **COMMODITY SPECIALISTS** Occupation **PARTNER/MANAGER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4500.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 04 / 2014

Transaction ID : SA11.4173

Amount of Each Receipt this Period
2000.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
TROY J. LINK

Mailing Address **P.O. BOX 579**

City **MINONG** State **WI** Zip Code **54859-0579**

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

Name of Employer **LINK SNACKS INC** Occupation **PRESIDENT & CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 13 / 2014

Transaction ID : SA11.3586

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MRS. ALVINA LUNDSTEN

Mailing Address **605 PARK AVE NW**

City **WILLIAMS** State **MN** Zip Code **56686-4409**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 24 / 2014

Transaction ID : SA11.3748

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

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

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

3050.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
RANDY LUTH

Mailing Address 15531 E DESERT HAWK TRAIL

City FOUNTAIN HILLS State AZ Zip Code 85268-5993

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 25 / 2014

Transaction ID : SA11.3808

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WHITNEY MACMILLAN JR.

Mailing Address P.O. BOX 5628, DEPT 28

City MINNEAPOLIS State MN Zip Code 55440-5628

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 05 / 2014

Transaction ID : SA11.3476

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
WHITNEY MACMILLAN JR.

Mailing Address P.O. BOX 5628, DEPT 28

City MINNEAPOLIS State MN Zip Code 55440-5628

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **4000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11.3476B

Amount of Each Receipt this Period
-400.00
 CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) WHITNEY MACMILLAN JR.		Date of Receipt M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address P.O. BOX 5628, DEPT 28		Transaction ID : SA11.3895	
City MINNEAPOLIS	State MN	Zip Code 55440-5628	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4000.00		
		[MEMO ITEM] REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC) REDESIGNATION FROM PRIMARY	

Full Name (Last, First, Middle Initial) WHITNEY MACMILLAN JR.		Date of Receipt M M / D D / Y Y Y Y 03 / 24 / 2014	
Mailing Address P.O. BOX 5628, DEPT 28		Transaction ID : SA11.3768	
City MINNEAPOLIS	State MN	Zip Code 55440-5628	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 4000.00		
		REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC)	

Full Name (Last, First, Middle Initial) MR. ROBERT S. MARS JR.		Date of Receipt M M / D D / Y Y Y Y 03 / 26 / 2014	
Mailing Address 4114 LONDON RD		Transaction ID : SA11.3893	
City DULUTH	State MN	Zip Code 55804-2245	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00	
Name of Employer RETIRED	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00		
		CONTRIBUTION	

SUBTOTAL of Receipts This Page (optional).....	1200.00
TOTAL This Period (last page this line number only).....	[Empty Box]

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
DOUGLAS MCMILLAN

Mailing Address **272 SALISHAN DRIVE**

City **HUDSON** State **WI** Zip Code **54016-8060**

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

Name of Employer **MCMILLAN ELECTRIC** Occupation **SELF**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
01 / 15 / 2014

Transaction ID : SA11.2529

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
BRANDON J. MCNEILUS

Mailing Address **657 42 STATE HWY 56**

City **DODGE CENTER** State **MN** Zip Code **55927-9031**

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

Name of Employer **READY MIX CONCRETE** Occupation **SELF EMPLOYED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 17 / 2014

Transaction ID : SA11.3161

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

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

Mailing Address **10166 BIRCH GROVE ROAD**

City **EAST GULL LAKE** State **MN** Zip Code **56401-3173**

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

Name of Employer **MILLS FLEET FARM** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
01 / 15 / 2014

Transaction ID : SA11.2482

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

1200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
MS. LORIE LONG MICHAELS

Mailing Address 2060 PINTO DRIVE

City WAYZATA State MN Zip Code 55391-9557

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

Name of Employer SELF Occupation FARMING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 06 / 2014

Transaction ID : SA11.3036

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

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

Mailing Address 2915 SOMERSET LANE

City ORONO State MN Zip Code 55356-9681

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

Name of Employer MILLS SUPPLY COMPANY Occupation OWNERSHIP/MANAGEMENT/OPERATIONS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **360.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 21 / 2014

Transaction ID : SA11.2579

Amount of Each Receipt this Period
120.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. HENRY C. MILLS II

Mailing Address 1617 REID DR

City APPLETON State WI Zip Code 54914-5107

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

Name of Employer MILLS FLEET FARM Occupation BUSINESS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 01 / 31 / 2014

Transaction ID : SA11.2886

Amount of Each Receipt this Period
5000.00
 CONTRIBUTION

SEE REATTRIBUTION

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

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

5220.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
MR. HENRY C. MILLS II

Mailing Address 1617 REID DR

City State Zip Code
APPLETON WI 54914-5107

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

Name of Employer Occupation
MILLS FLEET FARM BUSINESS

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5000.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 22 / 2014

Transaction ID : SA11.2886B

Amount of Each Receipt this Period
-2600.00

CONTRIBUTION

**[MEMO ITEM]
REATTRIBUTION TO SPOUSE**

B. Full Name (Last, First, Middle Initial)
MRS. NANCY MILLS

Mailing Address 1617 REID DR

City State Zip Code
APPLETON WI 54914-5107

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

Name of Employer Occupation
NANCY MILLS LLC ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2600.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 22 / 2014

Transaction ID : SA11.3433

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

**[MEMO ITEM]
REATTRIBUTION FROM SPOUSE**

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

Mailing Address 6091 FOUNTAIN RD

City State Zip Code
BAXTER MN 56425-8568

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

Name of Employer Occupation
ESSENTIA LPN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
260.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 13 / 2014

Transaction ID : SA11.3600

Amount of Each Receipt this Period
35.00

CONTRIBUTION

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

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

35.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
CAROL NELSON

Mailing Address 6091 FOUNTAIN RD

City State Zip Code
BAXTER MN 56425-8568

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

Name of Employer Occupation
ESSENTIA LPN

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
260.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 28 / 2014

Transaction ID : SA11.3921

Amount of Each Receipt this Period
50.00
CONTRIBUTION

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

Mailing Address 22574 170TH ST NW

City State Zip Code
BIG LAKE MN 55309-9133

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

Name of Employer Occupation
MOTION TECH AUTOMATION, LLC VP SALES & MARKETING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 22 / 2014

Transaction ID : SA11.3733

Amount of Each Receipt this Period
250.00
CONTRIBUTION

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

Mailing Address P.O. BOX 9

City State Zip Code
STEWART MN 55385-0009

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

Name of Employer Occupation
FORM-A-FEED OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 31 / 2014

Transaction ID : SA11.2881

Amount of Each Receipt this Period
500.00
CONTRIBUTION

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
LESLIE NETTER

Mailing Address 40091 COUNTY RD 1

City RICE State MN Zip Code 56367-9593

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

Name of Employer BERNICK'S Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11.3938

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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

Mailing Address 15907 OLD STONEBRIDGE TRL

City BRAINERD State MN Zip Code 56401-8901

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

Name of Employer RANGE INC Occupation PRINTING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11.4170

Amount of Each Receipt this Period
 2600.00

CONTRIBUTION

IK: RANGE MEMO ENTRY

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

Mailing Address 15907 OLD STONEBRIDGE TRAIL

City BRAINERD State MN Zip Code 56401-8901

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

Name of Employer RANGE, INC. Occupation MARKETING

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11.4169

Amount of Each Receipt this Period
 456.28

CONTRIBUTION

IK: RANGE MEMO ENTRY

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

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

4056.28

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
PAUL NICCUM

Mailing Address 21416 PARADISE DRIVE

City NISSWA State MN Zip Code 56468-2285

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

Name of Employer RANGE Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
588.09

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11.4168

Amount of Each Receipt this Period
588.09

CONTRIBUTION

IK: RANGE MEMO ENTRY

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

Mailing Address 7004 HOWARD LN

City EDEN PRAIRIE State MN Zip Code 55346-3052

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

Name of Employer FILTRATION SYSTEMS INC Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 26 / 2014

Transaction ID : SA11.3419

Amount of Each Receipt this Period
250.00

CONTRIBUTION

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

Mailing Address 5028 LOWER ROY LAKE RD

City NISSWA State MN Zip Code 56468-2736

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

Name of Employer INFORMATION REQUESTED PER BEST EFF(Occupation INFORMATION REQUESTED PER BEST EFF(

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 28 / 2014

Transaction ID : SA11.2746

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

1838.09

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
RONALD NUSSBAUM

Mailing Address 620 LANE 150A LAKE JAMES

City ANGOLA State IN Zip Code 46703-8578

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

Name of Employer BERNE APPAREL Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **800.00**

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 19 / 2014

Transaction ID : SA11.3252

Amount of Each Receipt this Period
300.00
 CONTRIBUTION

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

Mailing Address 1270 BISCAYNE BLVD

City DELAND State FL Zip Code 32724-2139

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

Name of Employer TACTICAL MACHINING Occupation SELF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
 01 / 31 / 2014

Transaction ID : SA11.2910

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

Mailing Address 431 E SOUTH ST

City PLANO State IL Zip Code 60545-1676

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

Name of Employer PLANO SYNERGY Occupation EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 19 / 2014

Transaction ID : SA11.3244

Amount of Each Receipt this Period
2600.00
 CONTRIBUTION

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

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

3900.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) JOHN PREUSSER		Date of Receipt M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address 431 E SOUTH ST		Transaction ID : SA11.3245
City PLANO	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00 CONTRIBUTION
Name of Employer PLANO SYNERGY	Occupation EXECUTIVE	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

Full Name (Last, First, Middle Initial) MICHELLE PREUSSER		Date of Receipt M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address 431 EAST S ST		Transaction ID : SA11.3246
City PLANO	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00 CONTRIBUTION
Name of Employer HOMEMAKER	Occupation HOMEMAKER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

Full Name (Last, First, Middle Initial) MICHELLE PREUSSER		Date of Receipt M M / D D / Y Y Y Y 02 / 19 / 2014
Mailing Address 431 EAST S ST		Transaction ID : SA11.3247
City PLANO	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00 CONTRIBUTION
Name of Employer HOMEMAKER	Occupation HOMEMAKER	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

SUBTOTAL of Receipts This Page (optional).....	7800.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
MR. BILL PRIEFERT

Mailing Address P.O. BOX 1540

City MOUNT PLEASANT State TX Zip Code 75456-1540

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

Name of Employer: PRIEFERT MFG. CO. INC. Occupation: CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 1500.00

Date of Receipt: 03 / 31 / 2014

Transaction ID : SA11.4155

Amount of Each Receipt this Period: 500.00

CONTRIBUTION

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

Mailing Address 1523 SUNSET VIEW

City EAST GULL LAKE State MN Zip Code 56401-3074

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

Name of Employer: HOMEMAKER Occupation: HOMEMAKER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 250.00

Date of Receipt: 02 / 26 / 2014

Transaction ID : SA11.3414

Amount of Each Receipt this Period: 250.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. STEVE M. QUISBERG

Mailing Address 1523 SUNSET VIEW

City EAST GULL LAKE State MN Zip Code 56401-3074

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

Name of Employer: SELF-EMPLOYED Occupation: RETAILER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 5100.00

Date of Receipt: 03 / 21 / 2014

Transaction ID : SA11.3725

Amount of Each Receipt this Period: 2600.00

CONTRIBUTION

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

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

3350.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
MR. STEVE M. QUISBERG

Mailing Address 1523 SUNSET VIEW

City EAST GULL LAKE State MN Zip Code 56401-3074

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

Name of Employer SELF-EMPLOYED Occupation RETAILER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5100.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 21 / 2014

Transaction ID : SA11.3725B

Amount of Each Receipt this Period
-2500.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

B. Full Name (Last, First, Middle Initial)
MR. STEVE M. QUISBERG

Mailing Address 1523 SUNSET VIEW

City EAST GULL LAKE State MN Zip Code 56401-3074

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

Name of Employer SELF-EMPLOYED Occupation RETAILER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5100.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 21 / 2014

Transaction ID : SA11.4187

Amount of Each Receipt this Period
2500.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

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

Mailing Address 10295 RARDIN RD SW

City NISSWA State MN Zip Code 56468-2037

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

Name of Employer RARDIN CONSTRUCTION INC Occupation COMPANY PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 29 / 2014

Transaction ID : SA11.3966

Amount of Each Receipt this Period
500.00

CONTRIBUTION

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

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

500.00

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

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

FOR LINE NUMBER: PAGE 41 OF 118
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
MARK REUM
Mailing Address 17902 300TH STREET
City AVON State MN Zip Code 56310-9642
FEC ID number of contributing federal political committee. **C**
Name of Employer MASTER MARK PLASTICS Occupation SALESMAN
Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date 1000.00

Date of Receipt 02 / 24 / 2014
Transaction ID : SA11.3369
Amount of Each Receipt this Period 500.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
SCOTT ROBBIE
Mailing Address N8554 CTY RD Y
City RIVER FALLS State WI Zip Code 54022-4584
FEC ID number of contributing federal political committee. **C**
Name of Employer FEDERAL CARTRIDGE Occupation INFORMATION REQUESTED PER BEST EFF
Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date 0.00

Date of Receipt 02 / 03 / 2014
Transaction ID : SA11.4185A
Amount of Each Receipt this Period 500.00
CONTRIBUTION
CHARGED BACK \$500.00 ON 02/19/2014

C. Full Name (Last, First, Middle Initial)
SCOTT ROBBIE
Mailing Address N8554 CTY RD Y
City RIVER FALLS State WI Zip Code 54022-4584
FEC ID number of contributing federal political committee. **C**
Name of Employer FEDERAL CARTRIDGE Occupation INFORMATION REQUESTED PER BEST EFF
Receipt For: 2014
 Primary General
 Other (specify)
Election Cycle-to-Date 0.00

Date of Receipt 02 / 19 / 2014
Transaction ID : SA11.4185B
Amount of Each Receipt this Period -500.00
CONTRIBUTION
CHARGED BACK

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

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
MR. ROBERT W. ROSENE

Mailing Address 2550 - 38TH AVE NE #211

City MINNEAPOLIS State MN Zip Code 55421-5037

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 17 / 2014

Transaction ID : SA11.3113

Amount of Each Receipt this Period
75.00
 CONTRIBUTION

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

Mailing Address 1120 LAKE AVE, P.O. BOX 933

City FAIRMONT State MN Zip Code 56031-0933

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

Name of Employer ROSEN'S DIVERSIFIED Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 28 / 2014

Transaction ID : SA11.3997

Amount of Each Receipt this Period
2500.00
 CONTRIBUTION

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

Mailing Address W6057 GREYSTONE CT

City APPLETON State WI Zip Code 54915-7444

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

Name of Employer RCI Occupation GUN ACCESSORIES MFG

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 17 / 2014

Transaction ID : SA11.3646

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

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

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

3075.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) MR. JAMES E. RUDIE		Date of Receipt MM / DD / YYYY 02 / 17 / 2014
Mailing Address 13110 EAGLE CREEK LN		Transaction ID : SA11.3060
City DEERWOOD	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 275.00	

Full Name (Last, First, Middle Initial) MR. JAMES E. RUDIE		Date of Receipt MM / DD / YYYY 03 / 26 / 2014
Mailing Address 13110 EAGLE CREEK LN		Transaction ID : SA11.3832
City DEERWOOD	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 275.00	

Full Name (Last, First, Middle Initial) FRANK RUSSOMANO		Date of Receipt MM / DD / YYYY 02 / 24 / 2014
Mailing Address 1351 CHATTERTON RD		Transaction ID : SA11.3348
City SAINT PAUL	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer RETIRED	Occupation RETIRED	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

SUBTOTAL of Receipts This Page (optional).....	375.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
FRANK RUSSOMANO

Mailing Address 1351 CHATTERTON RD

City SAINT PAUL State MN Zip Code 55123-1481

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11.4031

Amount of Each Receipt this Period
250.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. SCOTT SAMSON

Mailing Address 23 BARN RD

City SPOFFORD State NH Zip Code 03462-4000

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

Name of Employer SAMSON MFG CORP Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y
01 / 31 / 2014

Transaction ID : SA11.2894

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MR. SCOTT SAMSON

Mailing Address 23 BARN RD

City SPOFFORD State NH Zip Code 03462-4000

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

Name of Employer SAMSON MFG CORP Occupation OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11.2894B

Amount of Each Receipt this Period
-400.00
 CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

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

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

1250.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 45 OF 118	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 15

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)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
MR. SCOTT SAMSON

Mailing Address 23 BARN RD

City State Zip Code
SPOFFORD NH 03462-4000

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

Name of Employer Occupation
SAMSON MFG CORP OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11.3897

Amount of Each Receipt this Period
400.00

CONTRIBUTION

[MEMO ITEM]
REATTRIBUTION / REDESIGNATION REQUESTED (AUTOMATIC) REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
REBECCA A. SANDS

Mailing Address 9410 OAK BLUFF

City State Zip Code
BRAINERD MN 56401-6192

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 17 / 2014

Transaction ID : SA11.3149

Amount of Each Receipt this Period
100.00

CONTRIBUTION

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

Mailing Address 3900 RIVER OAK CIR

City State Zip Code
MOORHEAD MN 56560-5611

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

Name of Employer Occupation
SCHEELS RETAIL

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2000.00

Date of Receipt
M M / D D / Y Y Y Y
02 / 19 / 2014

Transaction ID : SA11.3253

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
RONALD J. SCHUTZ

Mailing Address 865 NAVAJO RD W

City MEDINA State MN Zip Code 55340-9487

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

Name of Employer ROBINS, KAPLAN, MILLER & CIRESI L.L.P. Occupation ATTORNEY

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 24 / 2014

Transaction ID : SA11.3360

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
WILLIAM H. SPELL

Mailing Address 4706 WHITE OAKS RD

City EDINA State MN Zip Code 55424-1242

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

Name of Employer SPELL CAPITAL PARTNERS Occupation PARTNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 21 / 2014

Transaction ID : SA11.3723

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SCARLETT A. TANNER-ATKINS

Mailing Address 781 EASTVIEW CIR

City IDAHO FALLS State ID Zip Code 83401-3376

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

Name of Employer INFORMATION REQUESTED PER BEST EFF(Occupation INFORMATION REQUESTED PER BEST EFF(

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 04 / 2014

Transaction ID : SA11.4174

Amount of Each Receipt this Period
 300.00

CONTRIBUTION

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

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

1800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
CHARLES TEST

Mailing Address **2710 2ND AVENUE S**

City **MINNEAPOLIS** State **MN** Zip Code **55408-1710**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 06 / 2014

Transaction ID : SA11.2979

Amount of Each Receipt this Period
500.00
 CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MR. DAVID R. THIES

Mailing Address **7250 LEWIS RIDGE PKWY #206**

City **EDINA** State **MN** Zip Code **55439-1938**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 17 / 2014

Transaction ID : SA11.3091

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

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

Mailing Address **9115 GLEN EDIN LN**

City **MINNEAPOLIS** State **MN** Zip Code **55443-1719**

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

Name of Employer **RETIRED** Occupation **RETIRED**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 25 / 2014

Transaction ID : SA11.3817

Amount of Each Receipt this Period
200.00
 CONTRIBUTION

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

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

800.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
JOHN C. TRAUTZ

Mailing Address 4509 EDINA BLVD

City State Zip Code
EDINA MN 55424-1135

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

Name of Employer Occupation
TRAUTZ PROPERTIES INC. PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 20 / 2014

Transaction ID : SA11.3672

Amount of Each Receipt this Period
1000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PATRICIA E. TURONIE

Mailing Address 3241 WATKINS SPUR

City State Zip Code
CLOQUET MN 55720-3320

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

Name of Employer Occupation
SELF REAL ESTATE AGENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
M M / D D / Y Y Y Y
01 / 31 / 2014

Transaction ID : SA11.2904

Amount of Each Receipt this Period
50.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
PATRICIA E. TURONIE

Mailing Address 3241 WATKINS SPUR

City State Zip Code
CLOQUET MN 55720-3320

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

Name of Employer Occupation
SELF REAL ESTATE AGENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
225.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 03 / 2014

Transaction ID : SA11.3454

Amount of Each Receipt this Period
50.00
CONTRIBUTION

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

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

1100.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
PATRICIA E. TURONIE

Mailing Address 3241 WATKINS SPUR

City CLOQUET State MN Zip Code 55720-3320

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

Name of Employer SELF Occupation REAL ESTATE AGENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **225.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11.3949

Amount of Each Receipt this Period
50.00
 CONTRIBUTION

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

Mailing Address 1600 W 22ND ST

City MINNEAPOLIS State MN Zip Code 55405-2401

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

Name of Employer ULLAND INVESTMENT ADVISORS, INC. Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1100.00**

Date of Receipt
 M M / D D / Y Y Y Y
01 / 28 / 2014

Transaction ID : SA11.2645

Amount of Each Receipt this Period
100.00
 CONTRIBUTION

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

Mailing Address 1600 W 22ND ST

City MINNEAPOLIS State MN Zip Code 55405-2401

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

Name of Employer ULLAND INVESTMENT ADVISORS, INC. Occupation PRESIDENT

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1100.00**

Date of Receipt
 M M / D D / Y Y Y Y
02 / 24 / 2014

Transaction ID : SA11.3362

Amount of Each Receipt this Period
1000.00
 CONTRIBUTION

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

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

1150.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
ALLEN L. VANBEEK M.D.

Mailing Address 7115 ANTRIM CT

City State Zip Code
EDINA MN 55439-1702

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

Name of Employer Occupation
INFORMATION REQUESTED PER BEST EFF(INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 17 / 2014

Transaction ID : SA11.3171

Amount of Each Receipt this Period
250.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
MICHAEL J. WALT

Mailing Address 2661 ELDRIDGE AVE E

City State Zip Code
NORTH SAINT PAUL MN 55109-4125

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

Name of Employer Occupation
3M CLINICAL RESEARCH

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
02 / 17 / 2014

Transaction ID : SA11.3219

Amount of Each Receipt this Period
100.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
MICHAEL J. WALT

Mailing Address 2661 ELDRIDGE AVE E

City State Zip Code
NORTH SAINT PAUL MN 55109-4125

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

Name of Employer Occupation
3M CLINICAL RESEARCH

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11.4128

Amount of Each Receipt this Period
100.00

CONTRIBUTION

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

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

450.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) DR. JAY B. WEST		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 03 / 2014
Mailing Address 2660 DEER RIDGE		Transaction ID : SA11.3453
City BLAINE	State MN	Zip Code 55449-5903
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00 CONTRIBUTION	
Name of Employer SELF-EMPLOYED	Occupation DENTIST	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 450.00	

Full Name (Last, First, Middle Initial) JILL WINE		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 13 / 2014
Mailing Address 18515 - 8TH AVE N		Transaction ID : SA11.4178
City PLYMOUTH	State MN	Zip Code 55447-3337
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5200.00 CONTRIBUTION	
Name of Employer HOMEMAKER	Occupation HOMEMAKER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

Full Name (Last, First, Middle Initial) JILL WINE		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 13 / 2014
Mailing Address 18515 - 8TH AVE N		Transaction ID : SA11.4178B
City PLYMOUTH	State MN	Zip Code 55447-3337
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period -2600.00 CONTRIBUTION	
Name of Employer HOMEMAKER	Occupation HOMEMAKER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	[MEMO ITEM] REDESIGNATION TO GENERAL

SUBTOTAL of Receipts This Page (optional).....	5400.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
JILL WINE

Mailing Address 18515 - 8TH AVE N

City PLYMOUTH State MN Zip Code 55447-3337

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 13 / 2014

Transaction ID : SA11.4183

Amount of Each Receipt this Period
2600.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION FROM PRIMARY**

B. Full Name (Last, First, Middle Initial)
SCOTT W. WINE

Mailing Address 18515 - 8TH AVE N

City PLYMOUTH State MN Zip Code 55447-3337

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

Name of Employer **POLARIS** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 13 / 2014

Transaction ID : SA11.4179

Amount of Each Receipt this Period
5200.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
SCOTT W. WINE

Mailing Address 18515 - 8TH AVE N

City PLYMOUTH State MN Zip Code 55447-3337

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

Name of Employer **POLARIS** Occupation **CEO**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
03 / 13 / 2014

Transaction ID : SA11.4179B

Amount of Each Receipt this Period
-2600.00

CONTRIBUTION

**[MEMO ITEM]
REDESIGNATION TO GENERAL**

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

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

5200.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 118
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 11e 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
SCOTT W. WINE

Mailing Address 18515 - 8TH AVE N

City PLYMOUTH State MN Zip Code 55447-3337

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

Name of Employer POLARIS Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 13 / 2014

Transaction ID : SA11.4181

Amount of Each Receipt this Period
 2600.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION FROM PRIMARY

B. Full Name (Last, First, Middle Initial)
JOHN E. WREN

Mailing Address 2261 NORTHRIDGE AVE CIR N

City STILLWATER State MN Zip Code 55082-2506

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 02 / 24 / 2014

Transaction ID : SA11.3354

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOHN E. WREN

Mailing Address 2261 NORTHRIDGE AVE CIR N

City STILLWATER State MN Zip Code 55082-2506

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

Name of Employer RETIRED Occupation RETIRED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11.3954

Amount of Each Receipt this Period
 1000.00

CONTRIBUTION

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

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

2000.00

100916.37

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 118
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
HUDSON FOR CONGRESS

Mailing Address P.O. BOX 5053

City: CONCORD State: NC Zip Code: 28027-1500

FEC ID number of contributing federal political committee: **C C00504522**

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2000.00

Date of Receipt: 03 / 11 / 2014

Transaction ID : SA11.3620

Amount of Each Receipt this Period: 1000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
CONSERVATIVE OPPORTUNITY LEADERSHIP & ENTERPRISE PAC (COLE PAC)

Mailing Address 12176 CHANCERY STATION CIR

City: RESTON State: VA Zip Code: 20190-5803

FEC ID number of contributing federal political committee: **C C00404392**

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2000.00

Date of Receipt: 03 / 11 / 2014

Transaction ID : SA11.3621

Amount of Each Receipt this Period: 2000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
COOPER TIRE & RUBBER COMPANY PAC

Mailing Address PO BOX 550

City: FINDLAY State: OH Zip Code: 45839-0550

FEC ID number of contributing federal political committee: **C C00370270**

Name of Employer: Occupation:

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date: 2500.00

Date of Receipt: 03 / 03 / 2014

Transaction ID : SA11.3435

Amount of Each Receipt this Period: 2500.00

CONTRIBUTION

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

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

5500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 118
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
EVERY REPUBLICAN IS CRUCIAL PAC

Mailing Address 25 E MAIN ST, STE 200

City Richmond State VA Zip Code 23219-2109

FEC ID number of contributing federal political committee. **C** C00384701

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11.4095

Amount of Each Receipt this Period
 5000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
EVERY REPUBLICAN IS CRUCIAL PAC

Mailing Address 25 E MAIN ST, STE 200

City Richmond State VA Zip Code 23219-2109

FEC ID number of contributing federal political committee. **C** C00384701

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11.4096

Amount of Each Receipt this Period
 5000.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
FREEDOM & SECURITY PAC

Mailing Address 228 S WASHINGTON ST, STE 115

City Alexandria State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C** C00437061

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 03 / 11 / 2014

Transaction ID : SA11.3622

Amount of Each Receipt this Period
 3000.00

CONTRIBUTION

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

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

13000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 OF 118
	<input type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input checked="" type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
FREEDOM & SECURITY PAC

Mailing Address 228 S WASHINGTON ST, STE 115

City ALEXANDRIA State VA Zip Code 22314-5404

FEC ID number of contributing federal political committee. **C** C00437061

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11.4099

Amount of Each Receipt this Period
 2000.00

CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
JOBS, ECONOMY, AND BUDGET FUND

Mailing Address PO BOX 30844

City BETHESDA State MD Zip Code 20824-0844

FEC ID number of contributing federal political committee. **C** C00420695

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11.4097

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
JOBS, ECONOMY, AND BUDGET FUND

Mailing Address PO BOX 30844

City BETHESDA State MD Zip Code 20824-0844

FEC ID number of contributing federal political committee. **C** C00420695

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 7500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA11.4098

Amount of Each Receipt this Period
 2500.00

CONTRIBUTION

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

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

7000.00

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

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

FOR LINE NUMBER: PAGE 57 OF 118
(check only one)
 11a 12 11b 13a 11c 13b 11d 14 15

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
MAJORITY COMMITTEE PAC

Mailing Address **PO BOX 10134**

City **BAKERSFIELD** State **CA** Zip Code **93389-0134**

FEC ID number of contributing federal political committee. **C C00428052**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 07 / 2014

Transaction ID : SA11.3466

Amount of Each Receipt this Period
5000.00
CONTRIBUTION

B. Full Name (Last, First, Middle Initial)
PROSPERITY ACTION INC

Mailing Address **1006 PENDLETON ST**

City **ALEXANDRIA** State **VA** Zip Code **22314-1837**

FEC ID number of contributing federal political committee. **C C00377689**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11.4094

Amount of Each Receipt this Period
5000.00
CONTRIBUTION

C. Full Name (Last, First, Middle Initial)
RR DONNELLEY GOOD GOVERNMENT FUND

Mailing Address **111 S WACKER DR**

City **CHICAGO** State **IL** Zip Code **60601-3713**

FEC ID number of contributing federal political committee. **C C00033977**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 31 / 2014

Transaction ID : SA11.4100

Amount of Each Receipt this Period
5000.00
CONTRIBUTION

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

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

15000.00

40500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 118
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. MINNESOTA CONGRESSIONAL VICTORY FUND

Full Name (Last, First, Middle Initial)
Mailing Address 2470 DANIELLS BRIDGE RD
STE 121

City ATHENS State GA Zip Code 30606-6191

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

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
9253.59

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.4101

Amount of Each Receipt this Period
 9253.59

CONTRIBUTION

SEE ATTRIBUTION BELOW

B. MR. BRIAN C. BURGESON

Full Name (Last, First, Middle Initial)
Mailing Address 3759 NEW BRIGHTON RD

City ARDEN HILLS State MN Zip Code 55112-3214

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

Name of Employer Occupation
WILDLIFE RESEARCH CENTER INC EXECUTIVE/SALES

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.4102

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

[MEMO ITEM]

C. MR. GLEN L. COOK

Full Name (Last, First, Middle Initial)
Mailing Address 8041 COUNTY RD 78

City LAKE SHORE State MN Zip Code 56468-2532

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

Name of Employer Occupation
GUESTS INC SELF-EMPLOYED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
3000.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.4113B

Amount of Each Receipt this Period
 -400.00

CONTRIBUTION

[MEMO ITEM]
REDESIGNATION TO GENERAL

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

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

9253.59

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 118
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
MR. GLEN L. COOK

Mailing Address 8041 COUNTY RD 78

City LAKE SHORE State MN Zip Code 56468-2532

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

Name of Employer GUESTS INC Occupation SELF-EMPLOYED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
 2011-2012 2013-2014 2015-2016
 2017-2018 2019-2020 2021-2022 2023-2024
 2025-2026 2027-2028 2029-2030
 2031-2032 2033-2034 2035-2036
 2037-2038 2039-2040 2041-2042
 2043-2044 2045-2046 2047-2048
 2049-2050 2051-2052 2053-2054
 2055-2056 2057-2058 2059-2060
 2061-2062 2063-2064 2065-2066
 2067-2068 2069-2070 2071-2072
 2073-2074 2075-2076 2077-2078
 2079-2080 2081-2082 2083-2084
 2085-2086 2087-2088 2089-2090
 2091-2092 2093-2094 2095-2096
 2097-2098 2099-2100
 2101-2102 2103-2104 2105-2106
 2107-2108 2109-2110 2111-2112
 2113-2114 2115-2116 2117-2118
 2119-2120 2121-2122 2123-2124
 2125-2126 2127-2128 2129-2130
 2131-2132 2133-2134 2135-2136
 2137-2138 2139-2140 2141-2142
 2143-2144 2145-2146 2147-2148
 2149-2150 2151-2152 2153-2154
 2155-2156 2157-2158 2159-2160
 2161-2162 2163-2164 2165-2166
 2167-2168 2169-2170 2171-2172
 2173-2174 2175-2176 2177-2178
 2179-2180 2181-2182 2183-2184
 2185-2186 2187-2188 2189-2190
 2191-2192 2193-2194 2195-2196
 2197-2198 2199-2200
 2201-2202 2203-2204 2205-2206
 2207-2208 2209-2210 2211-2212
 2213-2214 2215-2216 2217-2218
 2219-2220 2221-2222 2223-2224
 2225-2226 2227-2228 2229-2230
 2231-2232 2233-2234 2235-2236
 2237-2238 2239-2240 2241-2242
 2243-2244 2245-2246 2247-2248
 2249-2250 2251-2252 2253-2254
 2255-2256 2257-2258 2259-2260
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 2267-2268 2269-2270 2271-2272
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 2355-2356 2357-2358 2359-2360
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 2367-2368 2369-2370 2371-2372
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 2397-2398 2399-2400
 2401-2402 2403-2404 2405-2406
 2407-2408 2409-2410 2411-2412
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 2997-2998 2999-3000
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 3407-3408 3409-3410 3411-3412
 3413-3414 34

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 118
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
MITCH FEHR

Mailing Address **26271 - 470TH AVE**

City **MORRIS** State **MN** Zip Code **56267-4395**

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

Name of Employer **RIVERVIEW DAIRY** Occupation **FARMING**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA12.4107

Amount of Each Receipt this Period
500.00

CONTRIBUTION

[MEMO ITEM]

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

Mailing Address **1896 - 397TH AVE NE**

City **STANCHFIELD** State **MN** Zip Code **55080-3302**

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

Name of Employer **HOMEMAKER** Occupation **HOMEMAKER**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA12.4103

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MARK W. KROLL PH.D.

Mailing Address **BOX 23**

City **CRYSTAL BAY** State **MN** Zip Code **55323-0023**

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

Name of Employer **KROLL & ASSOCIATES** Occupation **EXECUTIVE**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt
 M M / D D / Y Y Y Y
03 / 31 / 2014

Transaction ID : SA12.4104

Amount of Each Receipt this Period
1000.00

CONTRIBUTION

[MEMO ITEM]

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 118
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
MR. DANIEL X. LINDNER

Mailing Address 2121 - 125TH ST SW

City State Zip Code
PILLAGER MN 56473-2260

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

Name of Employer Occupation
SELF-EMPLOYED OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.4110

Amount of Each Receipt this Period
250.00

CONTRIBUTION

[MEMO ITEM]

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

Mailing Address 9106 HUNTERS LN

City State Zip Code
PEQUOT LAKES MN 56472-3387

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

Name of Employer Occupation
LINDNER MEDIA PRODUCTIONS EXECUTIVE

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.4111

Amount of Each Receipt this Period
250.00

CONTRIBUTION

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
MR. RON J. LINDNER

Mailing Address 11503 LOWER GULL LAKE LN

City State Zip Code
EAST GULL LAKE MN 56401-2019

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

Name of Employer Occupation
LINDNER MEDIA OWNER

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2250.00

Date of Receipt
 M M / D D / Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.4115

Amount of Each Receipt this Period
250.00

CONTRIBUTION

[MEMO ITEM]

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

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

0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 118
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) CHAD J. NELSON		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2014
Mailing Address 7600 FALLEN LEAF CIR		Transaction ID : SA12.4114
City BREEZY POINT	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1250.00
Name of Employer SELF-EMPLOYED	Occupation INSURANCE AGENT	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1250.00	[MEMO ITEM]

Full Name (Last, First, Middle Initial) JOHN OHLIN		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2014
Mailing Address 5860 PARKWOOD CT		Transaction ID : SA12.4105
City BAXTER	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2000.00
Name of Employer FIRST NATIONAL BANK OF DEERWOOD	Occupation BANKER	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	[MEMO ITEM]

Full Name (Last, First, Middle Initial) THOMAS SIERING		Date of Receipt M M / D D / Y Y Y Y Y Y 03 / 31 / 2014
Mailing Address 4251 GULF SHORE BLVD, #15B		Transaction ID : SA12.4112
City NAPLES	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1250.00
Name of Employer TOW HARBORS INVESTMENT CORP	Occupation CEO	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1250.00	[MEMO ITEM]

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 118
	<input type="checkbox"/> 11a <input checked="" type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

A. Full Name (Last, First, Middle Initial)
DENNIS WULF

Mailing Address 14 SKYVIEW LN

City MORRIS State MN Zip Code 56267-1530

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

Name of Employer WULF CATTLE CO. Occupation CEO

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 03 / 31 / 2014

Transaction ID : SA12.4106

Amount of Each Receipt this Period
 500.00

CONTRIBUTION

[MEMO ITEM]

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)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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)

Election Cycle-to-Date

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

Amount of Each Receipt this Period

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

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

0.00

9253.59

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 64 OF 118	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. AUBREY NICCUM			Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 15907 OLD STONEBRIDGE TRL			Amount of Each Disbursement this Period 2600.00	
City BRAINERD	State MN	Zip Code 56401-8901	Transaction ID : SB17.4170	
Purpose of Disbursement IN-KIND CONTRIBUTION				
Candidate Name			IK: RANGE MEMO ENTRY	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:	Category/ Type		

Full Name (Last, First, Middle Initial) B. DAN NICCUM			Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 15907 OLD STONEBRIDGE TRAIL			Amount of Each Disbursement this Period 456.28	
City BRAINERD	State MN	Zip Code 56401-8901	Transaction ID : SB17.4169	
Purpose of Disbursement IN-KIND CONTRIBUTION				
Candidate Name			IK: RANGE MEMO ENTRY	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:	Category/ Type		

Full Name (Last, First, Middle Initial) C. PAUL NICCUM			Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014	
Mailing Address 21416 PARADISE DRIVE			Amount of Each Disbursement this Period 588.09	
City NISSWA	State MN	Zip Code 56468-2285	Transaction ID : SB17.4168	
Purpose of Disbursement IN-KIND CONTRIBUTION				
Candidate Name			IK: RANGE MEMO ENTRY	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:	Category/ Type		

SUBTOTAL of Disbursements This Page (optional).....	3644.37
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 65 OF 118	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. ISAAC SCHULTZ		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 6871 APOLLO RD		Amount of Each Disbursement this Period 420.55
City SWANVILLE State MN Zip Code 56382	Purpose of Disbursement MILEAGE REIMBURSEMENT	
Candidate Name		Transaction ID : SB17.I126
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. ASPECT CONSULTING LLC		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2014
Mailing Address 8401 EXCELSIOR DRIVE #103		Amount of Each Disbursement this Period 2000.00
City MADISON State WI Zip Code 53717	Purpose of Disbursement COMPLIANCE CONSULTING	
Candidate Name		Transaction ID : SB17.I107
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. ASPECT CONSULTING LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address 8401 EXCELSIOR DRIVE #103		Amount of Each Disbursement this Period 2000.00
City MADISON State WI Zip Code 53717	Purpose of Disbursement COMPLIANCE CONSULTING	
Candidate Name		Transaction ID : SB17.I115
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	4420.55
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 66 OF 118	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. ASPECT CONSULTING LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 8401 EXCELSIOR DRIVE #103		Amount of Each Disbursement this Period 2000.00
City MADISON State WI Zip Code 53717	Purpose of Disbursement COMPLIANCE CONSULTING	Transaction ID : SB17.I123
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CMDI		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address 1593 SPRING HILL ROAD, SUITE 400		Amount of Each Disbursement this Period 758.10
City TYSONS CORNER State VA Zip Code 22182	Purpose of Disbursement DATABASE SOFTWARE	Transaction ID : SB17.I177
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CMDI		Date of Disbursement M M / D D / Y Y Y Y 02 / 11 / 2014
Mailing Address 1593 SPRING HILL ROAD, SUITE 400		Amount of Each Disbursement this Period 758.10
City TYSONS CORNER State VA Zip Code 22182	Purpose of Disbursement DATABASE SOFTWARE	Transaction ID : SB17.I178
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3516.20
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 118			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. CMDI		Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014
Mailing Address 1593 SPRING HILL ROAD, SUITE 400		Amount of Each Disbursement this Period 758.10
City TYSONS CORNER	State VA Zip Code 22182	
Purpose of Disbursement DATABASE SOFTWARE	Category/Type	Transaction ID : SB17.I179
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. CONNECTIVIST MEDIA		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2014
Mailing Address 544 E OGDEN AVE #700-161		Amount of Each Disbursement this Period 4763.14
City MILWAUKEE	State WI Zip Code 53202	
Purpose of Disbursement ONLINE MEDIA	Category/Type	Transaction ID : SB17.I108
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. CONNECTIVIST MEDIA		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address 544 E OGDEN AVE #700-161		Amount of Each Disbursement this Period 3059.74
City MILWAUKEE	State WI Zip Code 53202	
Purpose of Disbursement ONLINE MEDIA	Category/Type	Transaction ID : SB17.I116
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8580.98
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 OF 118			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. FLS CONNECT LLC			Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2014		
Mailing Address 7300 HUDSON BLVD, SUITE 270			Amount of Each Disbursement this Period 6022.70		
City ST PAUL	State MN	Zip Code 55128	Transaction ID : SB17.I109		
Purpose of Disbursement TELEPHONE FUNDRAISING		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. FLS CONNECT LLC			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2014		
Mailing Address 7300 HUDSON BLVD, SUITE 270			Amount of Each Disbursement this Period 5384.70		
City ST PAUL	State MN	Zip Code 55128	Transaction ID : SB17.I117		
Purpose of Disbursement TELEPHONE FUNDRAISING		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. FLS CONNECT LLC			Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014		
Mailing Address 7300 HUDSON BLVD, SUITE 270			Amount of Each Disbursement this Period 3649.00		
City ST PAUL	State MN	Zip Code 55128	Transaction ID : SB17.I124		
Purpose of Disbursement TELEPHONE FUNDRAISING		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	15056.40
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 OF 118			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. FP1 STRATEGIES LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address P.O. BOX 16504		Amount of Each Disbursement this Period 4500.00
City ALEXANDRIA	State VA	
Zip Code 22301	Purpose of Disbursement MEDIA CONSULTING	Transaction ID : SB17.I118
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. FP1 STRATEGIES LLC		Date of Disbursement M M / D D / Y Y Y Y 01 / 24 / 2014
Mailing Address P.O. BOX 16504		Amount of Each Disbursement this Period 15000.00
City ALEXANDRIA	State VA	
Zip Code 22301	Purpose of Disbursement MEDIA CONSULTING	Transaction ID : SB17.I134
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ISTREAM		Date of Disbursement M M / D D / Y Y Y Y 01 / 07 / 2014
Mailing Address 13555 BISHOPS COURT		Amount of Each Disbursement this Period 78.59
City BROOKFIELD	State WI	
Zip Code 53005	Purpose of Disbursement CHECK PROCESSING FEES	Transaction ID : SB17.I131
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	19578.59
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 70 OF 118	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. ISTREAM		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address 13555 BISHOPS COURT		Amount of Each Disbursement this Period 88.97
City BROOKFIELD	State WI	
Zip Code 53005	Purpose of Disbursement CHECK PROCESSING FEES	Transaction ID : SB17.I132
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ISTREAM		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 13555 BISHOPS COURT		Amount of Each Disbursement this Period 75.19
City BROOKFIELD	State WI	
Zip Code 53005	Purpose of Disbursement CHECK PROCESSING FEES	Transaction ID : SB17.I133
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. LEGACY COURSES AT CRAGUN'S		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2014
Mailing Address 11000 CRAGUNS DRIVE		Amount of Each Disbursement this Period 1000.00
City BRAINERD	State MN	
Zip Code 56401	Purpose of Disbursement EVENT RENTAL	Transaction ID : SB17.I110
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1164.16
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 71 OF 118	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. MILLS FLEET FARM		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2014
Mailing Address P.O. BOX 5055		Amount of Each Disbursement this Period 1544.26
City BRAINDERD State MN Zip Code 56401	Purpose of Disbursement RENT Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17.I111
State: District:		

Full Name (Last, First, Middle Initial) B. MINNESOTA DEPARTMENT OF REVENUE		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address MAIL STATION 6501		Amount of Each Disbursement this Period 333.68
City ST PAUL State MN Zip Code 55146	Purpose of Disbursement PAYROLL TAX Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17.I193
State: District:		

Full Name (Last, First, Middle Initial) C. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014
Mailing Address 375 BISHOPS WAY		Amount of Each Disbursement this Period 935.81
City BROOKFIELD State WI Zip Code 53005	Purpose of Disbursement PAYROLL Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17.I181
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	2813.75
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 72 OF 118	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. ISAAC SCHULTZ		Date of Disbursement M M / D D / Y Y Y Y 01 / 14 / 2014
Mailing Address 6871 APOLLO RD		Amount of Each Disbursement this Period 935.81
City SWANVILLE	State MN	
Zip Code 56382	Purpose of Disbursement PAYROLL	Transaction ID : SB17.I267
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 375 BISHOPS WAY		Amount of Each Disbursement this Period 935.82
City BROOKFIELD	State WI	
Zip Code 53005	Purpose of Disbursement PAYROLL	Transaction ID : SB17.I182
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. ISAAC SCHULTZ		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 6871 APOLLO RD		Amount of Each Disbursement this Period 935.82
City SWANVILLE	State MN	
Zip Code 56382	Purpose of Disbursement PAYROLL	Transaction ID : SB17.I268
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	935.82
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 118			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2014
Mailing Address 375 BISHOPS WAY		Amount of Each Disbursement this Period 935.81
City BROOKFIELD	State WI	
Zip Code 53005	Purpose of Disbursement PAYROLL	Transaction ID : SB17.I183
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. ISAAC SCHULTZ		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2014
Mailing Address 6871 APOLLO RD		Amount of Each Disbursement this Period 935.81
City SWANVILLE	State MN	
Zip Code 56382	Purpose of Disbursement PAYROLL	Transaction ID : SB17.I269
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 375 BISHOPS WAY		Amount of Each Disbursement this Period 5205.18
City BROOKFIELD	State WI	
Zip Code 53005	Purpose of Disbursement PAYROLL	Transaction ID : SB17.I184
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6140.99
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 OF 118			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. MICHAEL A. LUKACH		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 4 BUNKER HILL ROAD		Amount of Each Disbursement this Period 4269.36
City SHREWSBURY State MA Zip Code 01545	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	Transaction ID : SB17.I273
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		[MEMO ITEM]

Full Name (Last, First, Middle Initial) B. ISAAC SCHULTZ		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 6871 APOLLO RD		Amount of Each Disbursement this Period 935.82
City SWANVILLE State MN Zip Code 56382	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	Transaction ID : SB17.I270
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		[MEMO ITEM]

Full Name (Last, First, Middle Initial) C. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 375 BISHOPS WAY		Amount of Each Disbursement this Period 3070.50
City BROOKFIELD State WI Zip Code 53005	Purpose of Disbursement PAYROLL	
Candidate Name	Category/Type	Transaction ID : SB17.I185
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3070.50
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 OF 118			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. MICHAEL A. LUKACH		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 4 BUNKER HILL ROAD		Amount of Each Disbursement this Period 2134.69
City SHREWSBURY State MA Zip Code 01545	Purpose of Disbursement PAYROLL Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17.I274 [MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. ISAAC SCHULTZ		Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014
Mailing Address 6871 APOLLO RD		Amount of Each Disbursement this Period 935.81
City SWANVILLE State MN Zip Code 56382	Purpose of Disbursement PAYROLL Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17.I271 [MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 375 BISHOPS WAY		Amount of Each Disbursement this Period 3895.48
City BROOKFIELD State WI Zip Code 53005	Purpose of Disbursement PAYROLL Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Transaction ID : SB17.I186
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	3895.48
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 118			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. JOHN N. ELORANTA			Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014		
Mailing Address 6485 KOSKI ROAD			Amount of Each Disbursement this Period 824.97		
City TOWER	State MN	Zip Code 55790	Transaction ID : SB17.I276 [MEMO ITEM]		
Purpose of Disbursement PAYROLL		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) B. MICHAEL A. LUKACH			Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014		
Mailing Address 4 BUNKER HILL ROAD			Amount of Each Disbursement this Period 2134.69		
City SHREWSBURY	State MA	Zip Code 01545	Transaction ID : SB17.I275 [MEMO ITEM]		
Purpose of Disbursement PAYROLL		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

Full Name (Last, First, Middle Initial) C. ISAAC SCHULTZ			Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014		
Mailing Address 6871 APOLLO RD			Amount of Each Disbursement this Period 935.82		
City SWANVILLE	State MN	Zip Code 56382	Transaction ID : SB17.I272 [MEMO ITEM]		
Purpose of Disbursement PAYROLL		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: _____	District: _____				

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 77 OF 118			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 375 BISHOPS WAY		Amount of Each Disbursement this Period 163.00
City BROOKFIELD	State WI	
Zip Code 53005	Purpose of Disbursement PAYROLL PROCESSING FEE	Transaction ID : SB17.I187
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 375 BISHOPS WAY		Amount of Each Disbursement this Period 91.00
City BROOKFIELD	State WI	
Zip Code 53005	Purpose of Disbursement PAYROLL PROCESSING FEE	Transaction ID : SB17.I188
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address 375 BISHOPS WAY		Amount of Each Disbursement this Period 91.00
City BROOKFIELD	State WI	
Zip Code 53005	Purpose of Disbursement PAYROLL PROCESSING FEE	Transaction ID : SB17.I189
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	345.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 118			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 375 BISHOPS WAY		Amount of Each Disbursement this Period 91.00
City BROOKFIELD	State WI	
Zip Code 53005	Purpose of Disbursement PAYROLL PROCESSING FEE	Transaction ID : SB17.I190
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 375 BISHOPS WAY		Amount of Each Disbursement this Period 91.00
City BROOKFIELD	State WI	
Zip Code 53005	Purpose of Disbursement PAYROLL PROCESSING FEE	Transaction ID : SB17.I191
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 375 BISHOPS WAY		Amount of Each Disbursement this Period 446.45
City BROOKFIELD	State WI	
Zip Code 53005	Purpose of Disbursement PAYROLL TAX	Transaction ID : SB17.I192
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	628.45
TOTAL This Period (last page this line number only).....	

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 118			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 01 / 21 / 2014
Mailing Address 375 BISHOPS WAY		Amount of Each Disbursement this Period 31.00
City BROOKFIELD	State WI	
Zip Code 53005	Purpose of Disbursement PAYROLL TAX	Transaction ID : SB17.I194
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 375 BISHOPS WAY		Amount of Each Disbursement this Period 446.44
City BROOKFIELD	State WI	
Zip Code 53005	Purpose of Disbursement PAYROLL TAX	Transaction ID : SB17.I195
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 02 / 14 / 2014
Mailing Address 375 BISHOPS WAY		Amount of Each Disbursement this Period 446.45
City BROOKFIELD	State WI	
Zip Code 53005	Purpose of Disbursement PAYROLL TAX	Transaction ID : SB17.I196
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	923.89
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 OF 118			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 375 BISHOPS WAY		Amount of Each Disbursement this Period 2811.88
City BROOKFIELD	State WI	
Zip Code 53005	Purpose of Disbursement PAYROLL TAX	Transaction ID : SB17.I197
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 375 BISHOPS WAY		Amount of Each Disbursement this Period 1617.16
City BROOKFIELD	State WI	
Zip Code 53005	Purpose of Disbursement PAYROLL TAX	Transaction ID : SB17.I198
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 375 BISHOPS WAY		Amount of Each Disbursement this Period 91.00
City BROOKFIELD	State WI	
Zip Code 53005	Purpose of Disbursement PAYROLL PROCESSING FEE	Transaction ID : SB17.I206
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	4520.04
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 118			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. PAYCHEX		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 375 BISHOPS WAY		Amount of Each Disbursement this Period 1888.98
City BROOKFIELD	State WI	
Zip Code 53005	Purpose of Disbursement PAYROLL	Transaction ID : SB17.I207
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 01 / 15 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 3.17
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I135
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 01 / 16 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 28.75
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I136
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	1920.90
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 82 OF 118			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 01 / 22 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 1.44 Transaction ID : SB17.I137
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 01 / 23 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 66.20 Transaction ID : SB17.I138
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 01 / 27 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 2.88 Transaction ID : SB17.I139
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	70.52
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 118			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 01 / 28 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 41.84
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I140
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 01 / 29 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 1.44
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I141
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 01 / 30 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 4.32
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I142
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	47.60
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 84 OF 118			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 19.26
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I143
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 02 / 04 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 4.61
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I144
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 02 / 05 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 8.63
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I145
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	32.50
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 85 OF 118			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 1.44
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I146
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 02 / 07 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 69.91
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I147
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 02 / 13 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 51.75
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I148
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	123.10
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 118			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement MM / DD / YYYY 02 / 14 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 4.32
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I149
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement MM / DD / YYYY 02 / 18 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 2.88
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I150
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement MM / DD / YYYY 02 / 20 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 28.47
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I151
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	35.67
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 87 OF 118			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 02 / 25 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 44.90
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I152
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 02 / 27 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 29.00
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I153
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 03 / 03 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 718.76
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I154
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	792.66
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 88 OF 118			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 03 / 06 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 34.50
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I155
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 0.58
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I156
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 03 / 10 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 69.34
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I157
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	104.42
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 89 OF 118			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. PIRYX			Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2014		
Mailing Address 144 2ND ST. 1ST FLOOR			Amount of Each Disbursement this Period 1.16		
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB17.I158		
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. PIRYX			Date of Disbursement M M / D D / Y Y Y Y 03 / 12 / 2014		
Mailing Address 144 2ND ST. 1ST FLOOR			Amount of Each Disbursement this Period 11.52		
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB17.I159		
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. PIRYX			Date of Disbursement M M / D D / Y Y Y Y 03 / 13 / 2014		
Mailing Address 144 2ND ST. 1ST FLOOR			Amount of Each Disbursement this Period 12.38		
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB17.I160		
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	25.06
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 118			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 2.88
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I161
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 57.50
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I162
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 03 / 18 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 2.01
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I163
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	62.39
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 91 OF 118			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 33.67
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I164
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 03 / 20 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 2.88
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I165
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 29.00
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I166
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	65.55
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 92 OF 118			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 03 / 21 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 19.27
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I167
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 64.45
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I168
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 03 / 26 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 16.40
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I169
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	100.12
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 93 OF 118	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 03 / 27 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 5.75
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I170
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 03 / 28 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 3.17
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I171
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 7.19
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I172
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	16.11
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 94 OF 118			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 6.05
City SAN FRANCISCO	State CA Zip Code 94105	
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Transaction ID : SB17.I173
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 87.70
City SAN FRANCISCO	State CA Zip Code 94105	
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Transaction ID : SB17.I174
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 73.33
City SAN FRANCISCO	State CA Zip Code 94105	
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Transaction ID : SB17.I175
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	167.08
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 118			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. PIRYX			Date of Disbursement M M / D D / Y Y Y Y 03 / 29 / 2014		
Mailing Address 144 2ND ST. 1ST FLOOR			Amount of Each Disbursement this Period 53.21		
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB17.I176		
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) B. PIRYX			Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014		
Mailing Address 144 2ND ST. 1ST FLOOR			Amount of Each Disbursement this Period 8.29		
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB17.I200		
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

Full Name (Last, First, Middle Initial) C. PIRYX			Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014		
Mailing Address 144 2ND ST. 1ST FLOOR			Amount of Each Disbursement this Period 43.14		
City SAN FRANCISCO	State CA	Zip Code 94105	Transaction ID : SB17.I201		
Purpose of Disbursement CREDIT CARD PROCESSING FEE		Category/ Type			
Candidate Name					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				
State: District:					

SUBTOTAL of Disbursements This Page (optional).....	104.64
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 96 OF 118			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 81.97
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I202
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 96.11
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I203
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 132.41
City SAN FRANCISCO	State CA	
Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	Transaction ID : SB17.I204
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	312.49
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 97 OF 118			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. PIRYX		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address 144 2ND ST. 1ST FLOOR		Amount of Each Disbursement this Period 165.90
City SAN FRANCISCO State CA Zip Code 94105	Purpose of Disbursement CREDIT CARD PROCESSING FEE	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I205
State: District:		

Full Name (Last, First, Middle Initial) B. POSTMASTER		Date of Disbursement M M / D D / Y Y Y Y 02 / 28 / 2014
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period 220.00
City WASHINGTON State DC Zip Code 20260	Purpose of Disbursement POSTAGE	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I122
State: District:		

Full Name (Last, First, Middle Initial) C. PURCELL CONSULTING LLC		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2014
Mailing Address 2222 BLAISDELL AVENUE #204		Amount of Each Disbursement this Period 6000.00
City MINNEAPOLIS State MN Zip Code 55404	Purpose of Disbursement FUNDRAISING CONSULTING	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Transaction ID : SB17.I112
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	6385.90
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 98 OF 118	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. PURCELL CONSULTING LLC		Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2014
Mailing Address 2222 BLAISDELL AVENUE #204		Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17.I119
City MINNEAPOLIS State MN Zip Code 55404	Purpose of Disbursement FUNDRAISING CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) B. PURCELL CONSULTING LLC		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address 2222 BLAISDELL AVENUE #204		Amount of Each Disbursement this Period 4000.00 Transaction ID : SB17.I125
City MINNEAPOLIS State MN Zip Code 55404	Purpose of Disbursement FUNDRAISING CONSULTING	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) C. RANGE		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address PO BOX 978		Amount of Each Disbursement this Period 588.00 Transaction ID : SB17.I208 [MEMO ITEM]
City BRAINERD State MN Zip Code 56401	Purpose of Disbursement PRINTING: PAUL NICCUM IN-KIND	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	8000.00
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 99 OF 118			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. RANGE		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address PO BOX 978		Amount of Each Disbursement this Period 2600.00
City BRAINERD State MN Zip Code 56401	Purpose of Disbursement PRINTING: AUBREY NICCUM IN-KIND	
Candidate Name	Category/Type	Transaction ID : SB17.I209
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. RANGE		Date of Disbursement M M / D D / Y Y Y Y 03 / 31 / 2014
Mailing Address PO BOX 978		Amount of Each Disbursement this Period 456.28
City BRAINERD State MN Zip Code 56401	Purpose of Disbursement PRINTING: DAN NICCUM IN-KIND	
Candidate Name	Category/Type	Transaction ID : SB17.I210
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. SCM ASSOCIATES INC.		Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2014
Mailing Address P.O. BOX 254		Amount of Each Disbursement this Period 5084.04
City DUBLIN State NH Zip Code 03444	Purpose of Disbursement DIRECT MAIL	
Candidate Name	Category/Type	Transaction ID : SB17.I113
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	5084.04
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 118			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. SCM ASSOCIATES INC.			Date of Disbursement M M / D D / Y Y Y Y 02 / 06 / 2014	
Mailing Address P.O. BOX 254			Amount of Each Disbursement this Period 5664.92	
City DUBLIN	State NH	Zip Code 03444	Transaction ID : SB17.I120	
Purpose of Disbursement DIRECT MAIL		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. SCM ASSOCIATES INC.			Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014	
Mailing Address P.O. BOX 254			Amount of Each Disbursement this Period 16911.44	
City DUBLIN	State NH	Zip Code 03444	Transaction ID : SB17.I127	
Purpose of Disbursement DIRECT MAIL		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. SCM ASSOCIATES INC.			Date of Disbursement M M / D D / Y Y Y Y 03 / 17 / 2014	
Mailing Address P.O. BOX 254			Amount of Each Disbursement this Period 2883.48	
City DUBLIN	State NH	Zip Code 03444	Transaction ID : SB17.I129	
Purpose of Disbursement DIRECT MAIL		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	25459.84
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 101 OF 118			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. SCM ASSOCIATES INC.			Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014	
Mailing Address P.O. BOX 254			Amount of Each Disbursement this Period 24906.09	
City DUBLIN	State NH	Zip Code 03444	Transaction ID : SB17.I180	
Purpose of Disbursement DIRECT MAIL		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. US BANK			Date of Disbursement M M / D D / Y Y Y Y 01 / 20 / 2014	
Mailing Address P.O. BOX 790408			Amount of Each Disbursement this Period 1273.54	
City ST LOUIS	State MO	Zip Code 63179	Transaction ID : SB17.I114	
Purpose of Disbursement CREDIT CARD PAYMENT		Category/ Type		
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. US BANK			Date of Disbursement M M / D D / Y Y Y Y 12 / 17 / 2013	
Mailing Address P.O. BOX 790408			Amount of Each Disbursement this Period 29.00	
City ST LOUIS	State MO	Zip Code 63179	Transaction ID : SB17.I215	
Purpose of Disbursement BANK FEE		Category/ Type	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

SUBTOTAL of Disbursements This Page (optional).....	26179.63
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 102 OF 118			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial)		Date of Disbursement										
A. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>23</td> <td></td> <td>2013</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	10		23		2013
M M	/	D D	/	Y Y Y Y								
10		23		2013								
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>WASHINGTON</td> <td>DC</td> <td>20260</td> </tr> </table>		City	State	Zip Code	WASHINGTON	DC	20260	<table border="1"> <tr> <td>5.60</td> </tr> </table>	5.60			
City	State	Zip Code										
WASHINGTON	DC	20260										
5.60												
Purpose of Disbursement POSTAGE		Transaction ID : SB17.I222										
Candidate Name		[MEMO ITEM]										
Office Sought:	Disbursement For:											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
B. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>24</td> <td></td> <td>2013</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	10		24		2013
M M	/	D D	/	Y Y Y Y								
10		24		2013								
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period										
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City	State	Zip Code										
WASHINGTON	DC	20260										
5.60												
Purpose of Disbursement POSTAGE		Transaction ID : SB17.I223										
Candidate Name		[MEMO ITEM]										
Office Sought:	Disbursement For:											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
C. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>29</td> <td></td> <td>2013</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	10		29		2013
M M	/	D D	/	Y Y Y Y								
10		29		2013								
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>WASHINGTON</td> <td>DC</td> <td>20260</td> </tr> </table>		City	State	Zip Code	WASHINGTON	DC	20260	<table border="1"> <tr> <td>11.25</td> </tr> </table>	11.25			
City	State	Zip Code										
WASHINGTON	DC	20260										
11.25												
Purpose of Disbursement POSTAGE		Transaction ID : SB17.I224										
Candidate Name		[MEMO ITEM]										
Office Sought:	Disbursement For:											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

SUBTOTAL of Disbursements This Page (optional)	<table border="1"> <tr> <td>0.00</td> </tr> </table>	0.00
0.00		
TOTAL This Period (last page this line number only)	<table border="1"> <tr> <td></td> </tr> </table>	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 103 OF 118			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>30</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		30		2013
M M	/	D D	/	Y Y Y Y									
10		30		2013									
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period											
City WASHINGTON State DC Zip Code 20260 Purpose of Disbursement POSTAGE Candidate Name		<table border="1"> <tr> <td>5.60</td> </tr> </table> Transaction ID : SB17.I225 [MEMO ITEM]		5.60									
5.60													
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)										
State:	District:	Category/Type											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>31</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	10		31		2013
M M	/	D D	/	Y Y Y Y									
10		31		2013									
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period											
City WASHINGTON State DC Zip Code 20260 Purpose of Disbursement POSTAGE Candidate Name		<table border="1"> <tr> <td>5.60</td> </tr> </table> Transaction ID : SB17.I226 [MEMO ITEM]		5.60									
5.60													
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)										
State:	District:	Category/Type											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>01</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	11		01		2013
M M	/	D D	/	Y Y Y Y									
11		01		2013									
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period											
City WASHINGTON State DC Zip Code 20260 Purpose of Disbursement POSTAGE Candidate Name		<table border="1"> <tr> <td>5.60</td> </tr> </table> Transaction ID : SB17.I227 [MEMO ITEM]		5.60									
5.60													
Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)										
State:	District:	Category/Type											

SUBTOTAL of Disbursements This Page (optional).....	<table border="1"> <tr> <td>0.00</td> </tr> </table>	0.00
0.00		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 104 OF 118			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial)		Date of Disbursement										
A. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>05</td> <td></td> <td>2013</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	11		05		2013
M M	/	D D	/	Y Y Y Y								
11		05		2013								
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>WASHINGTON</td> <td>DC</td> <td>20260</td> </tr> </table>		City	State	Zip Code	WASHINGTON	DC	20260	<table border="1"> <tr> <td>8.90</td> </tr> </table>	8.90			
City	State	Zip Code										
WASHINGTON	DC	20260										
8.90												
Purpose of Disbursement POSTAGE		Transaction ID : SB17.I228										
Candidate Name												
Office Sought:		[MEMO ITEM]										
<table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For:</td> <td><input type="checkbox"/> Primary</td> <td><input type="checkbox"/> General</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> <td><input type="checkbox"/> Other (specify)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> President</td> <td></td> <td></td> </tr> </table>			<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)		<input type="checkbox"/> President		
<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General									
<input type="checkbox"/> Senate		<input type="checkbox"/> Other (specify)										
<input type="checkbox"/> President												
State:	District:											

Full Name (Last, First, Middle Initial)		Date of Disbursement										
B. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>07</td> <td></td> <td>2013</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	11		07		2013
M M	/	D D	/	Y Y Y Y								
11		07		2013								
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>WASHINGTON</td> <td>DC</td> <td>20260</td> </tr> </table>		City	State	Zip Code	WASHINGTON	DC	20260	<table border="1"> <tr> <td>5.60</td> </tr> </table>	5.60			
City	State	Zip Code										
WASHINGTON	DC	20260										
5.60												
Purpose of Disbursement POSTAGE		Transaction ID : SB17.I229										
Candidate Name												
Office Sought:		[MEMO ITEM]										
<table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For:</td> <td><input type="checkbox"/> Primary</td> <td><input type="checkbox"/> General</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> <td><input type="checkbox"/> Other (specify)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> President</td> <td></td> <td></td> </tr> </table>			<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)		<input type="checkbox"/> President		
<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General									
<input type="checkbox"/> Senate		<input type="checkbox"/> Other (specify)										
<input type="checkbox"/> President												
State:	District:											

Full Name (Last, First, Middle Initial)		Date of Disbursement										
C. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>08</td> <td></td> <td>2013</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	11		08		2013
M M	/	D D	/	Y Y Y Y								
11		08		2013								
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>WASHINGTON</td> <td>DC</td> <td>20260</td> </tr> </table>		City	State	Zip Code	WASHINGTON	DC	20260	<table border="1"> <tr> <td>5.96</td> </tr> </table>	5.96			
City	State	Zip Code										
WASHINGTON	DC	20260										
5.96												
Purpose of Disbursement POSTAGE		Transaction ID : SB17.I230										
Candidate Name												
Office Sought:		[MEMO ITEM]										
<table border="1"> <tr> <td><input type="checkbox"/> House</td> <td rowspan="3">Disbursement For:</td> <td><input type="checkbox"/> Primary</td> <td><input type="checkbox"/> General</td> </tr> <tr> <td><input type="checkbox"/> Senate</td> <td><input type="checkbox"/> Other (specify)</td> <td></td> </tr> <tr> <td><input type="checkbox"/> President</td> <td></td> <td></td> </tr> </table>			<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General	<input type="checkbox"/> Senate	<input type="checkbox"/> Other (specify)		<input type="checkbox"/> President		
<input type="checkbox"/> House	Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General									
<input type="checkbox"/> Senate		<input type="checkbox"/> Other (specify)										
<input type="checkbox"/> President												
State:	District:											

SUBTOTAL of Disbursements This Page (optional).....	<table border="1"> <tr> <td>0.00</td> </tr> </table>	0.00
0.00		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 105 OF 118	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. USPS		<input type="text" value="11"/> / <input type="text" value="12"/> / <input type="text" value="2013"/>
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period
City WASHINGTON State DC Zip Code 20260		<input type="text" value="5.60"/>
Purpose of Disbursement POSTAGE		Transaction ID : SB17.I231
Candidate Name		[MEMO ITEM]
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. USPS		<input type="text" value="11"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period
City WASHINGTON State DC Zip Code 20260		<input type="text" value="12.45"/>
Purpose of Disbursement POSTAGE		Transaction ID : SB17.I232
Candidate Name		[MEMO ITEM]
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. USPS		<input type="text" value="11"/> / <input type="text" value="18"/> / <input type="text" value="2013"/>
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period
City WASHINGTON State DC Zip Code 20260		<input type="text" value="6.19"/>
Purpose of Disbursement POSTAGE		Transaction ID : SB17.I233
Candidate Name		[MEMO ITEM]
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 106 OF 118			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. USPS		<input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2013"/>
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period
City WASHINGTON State DC Zip Code 20260		<input type="text" value="5.60"/>
Purpose of Disbursement POSTAGE		Transaction ID : SB17.I234
Candidate Name		[MEMO ITEM]
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. USPS		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2013"/>
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period
City WASHINGTON State DC Zip Code 20260		<input type="text" value="5.60"/>
Purpose of Disbursement POSTAGE		Transaction ID : SB17.I235
Candidate Name		[MEMO ITEM]
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. USPS		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2013"/>
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period
City WASHINGTON State DC Zip Code 20260		<input type="text" value="6.85"/>
Purpose of Disbursement POSTAGE		Transaction ID : SB17.I236
Candidate Name		[MEMO ITEM]
Office Sought:	Disbursement For:	
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 107 OF 118			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial)		Date of Disbursement
A. USPS		<input type="text" value="11"/> / <input type="text" value="26"/> / <input type="text" value="2013"/>
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period
City WASHINGTON State DC Zip Code 20260		<input type="text" value="5.60"/>
Purpose of Disbursement POSTAGE		Transaction ID : SB17.I237
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
B. USPS		<input type="text" value="11"/> / <input type="text" value="29"/> / <input type="text" value="2013"/>
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period
City WASHINGTON State DC Zip Code 20260		<input type="text" value="5.60"/>
Purpose of Disbursement POSTAGE		Transaction ID : SB17.I238
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement
C. USPS		<input type="text" value="12"/> / <input type="text" value="04"/> / <input type="text" value="2013"/>
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period
City WASHINGTON State DC Zip Code 20260		<input type="text" value="5.60"/>
Purpose of Disbursement POSTAGE		Transaction ID : SB17.I239
Candidate Name		[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	<input type="text" value="0.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 108 OF 118			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement POSTAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 06 / 2013

Amount of Each Disbursement this Period: 925.60

Transaction ID : SB17.I240

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement POSTAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 10 / 2013

Amount of Each Disbursement this Period: 6.85

Transaction ID : SB17.I241

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 475 L'ENFANT PLAZA SW

City WASHINGTON State DC Zip Code 20260

Purpose of Disbursement POSTAGE

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement: 12 / 16 / 2013

Amount of Each Disbursement this Period: 5.64

Transaction ID : SB17.I242

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) 0.00

TOTAL This Period (last page this line number only)

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 118			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>19</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	12		19		2013
M M	/	D D	/	Y Y Y Y									
12		19		2013									
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>WASHINGTON</td> <td>DC</td> <td>20260</td> </tr> </table>		City	State	Zip Code	WASHINGTON	DC	20260	<table border="1"> <tr> <td>5.60</td> </tr> </table>		5.60			
City	State	Zip Code											
WASHINGTON	DC	20260											
5.60													
Purpose of Disbursement POSTAGE		Transaction ID : SB17.I243											
Candidate Name		[MEMO ITEM]											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:		Category/Type											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. VERIZON		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td></td> <td>22</td> <td></td> <td>2013</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	11		22		2013
M M	/	D D	/	Y Y Y Y									
11		22		2013									
Mailing Address 1095 AVENUE OF THE AMERICAS		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>NEW YORK</td> <td>NY</td> <td>10036</td> </tr> </table>		City	State	Zip Code	NEW YORK	NY	10036	<table border="1"> <tr> <td>96.64</td> </tr> </table>		96.64			
City	State	Zip Code											
NEW YORK	NY	10036											
96.64													
Purpose of Disbursement CELLPHONE		Transaction ID : SB17.I259											
Candidate Name		[MEMO ITEM]											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:		Category/Type											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. US BANK		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>02</td> <td></td> <td>06</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	02		06		2014
M M	/	D D	/	Y Y Y Y									
02		06		2014									
Mailing Address P.O. BOX 790408		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>ST LOUIS</td> <td>MO</td> <td>63179</td> </tr> </table>		City	State	Zip Code	ST LOUIS	MO	63179	<table border="1"> <tr> <td>7383.95</td> </tr> </table>		7383.95			
City	State	Zip Code											
ST LOUIS	MO	63179											
7383.95													
Purpose of Disbursement CREDIT CARD PAYMENT		Transaction ID : SB17.I121											
Candidate Name		Category/Type											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:													

SUBTOTAL of Disbursements This Page (optional).....	7383.95
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 110 OF 118	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. BEST BUY		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 7601 PENN AVE S		Amount of Each Disbursement this Period 125.37
City RICHFIELD	State MN Zip Code 55423	
Purpose of Disbursement OFFICE SUPPLIES	Category/Type	Transaction ID : SB17.I211
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. OFFICE MAX		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 263 SHUMAN BLVD		Amount of Each Disbursement this Period 552.77
City NAPERVILLE	State IL Zip Code 60563	
Purpose of Disbursement OFFICE SUPPLIES	Category/Type	Transaction ID : SB17.I216
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. PALAZZO STADIUM CLUB		Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014
Mailing Address 3325 S LAS VEGAS BLVD		Amount of Each Disbursement this Period 3972.38
City LAS VEGAS	State NV Zip Code 89109	
Purpose of Disbursement EVENT CATERING	Category/Type	Transaction ID : SB17.I217
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 111 OF 118	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. PATRICK MCGOVERN'S			Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013	
Mailing Address 225 7TH STREET WEST			Amount of Each Disbursement this Period 640.85	
City ST. PAUL	State MN	Zip Code 55102	Transaction ID : SB17.I218	
Purpose of Disbursement EVENT CATERING		Category/ Type	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) B. SUN COUNTRY			Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014	
Mailing Address 1300 MENDOTA HEIGHTS ROAD			Amount of Each Disbursement this Period 669.00	
City MENDOTA HEIGHTS	State MN	Zip Code 55120	Transaction ID : SB17.I220	
Purpose of Disbursement TRAVEL		Category/ Type	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

Full Name (Last, First, Middle Initial) C. US BANK			Date of Disbursement M M / D D / Y Y Y Y 01 / 17 / 2014	
Mailing Address P.O. BOX 790408			Amount of Each Disbursement this Period 39.00	
City ST LOUIS	State MO	Zip Code 63179	Transaction ID : SB17.I214	
Purpose of Disbursement BANK FEE		Category/ Type	[MEMO ITEM]	
Candidate Name				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State: District:				

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 112 OF 118			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial)		Date of Disbursement										
A. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>24</td> <td></td> <td>2013</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	12		24		2013
M M	/	D D	/	Y Y Y Y								
12		24		2013								
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>WASHINGTON</td> <td>DC</td> <td>20260</td> </tr> </table>		City	State	Zip Code	WASHINGTON	DC	20260	<table border="1"> <tr> <td>6.06</td> </tr> </table>	6.06			
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WASHINGTON	DC	20260										
6.06												
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Candidate Name		[MEMO ITEM]										
Office Sought:	Disbursement For:											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
B. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>30</td> <td></td> <td>2013</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	12		30		2013
M M	/	D D	/	Y Y Y Y								
12		30		2013								
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>WASHINGTON</td> <td>DC</td> <td>20260</td> </tr> </table>		City	State	Zip Code	WASHINGTON	DC	20260	<table border="1"> <tr> <td>5.60</td> </tr> </table>	5.60			
City	State	Zip Code										
WASHINGTON	DC	20260										
5.60												
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Candidate Name		[MEMO ITEM]										
Office Sought:	Disbursement For:											
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State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
C. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>12</td> <td></td> <td>31</td> <td></td> <td>2013</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	12		31		2013
M M	/	D D	/	Y Y Y Y								
12		31		2013								
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period										
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City	State	Zip Code										
WASHINGTON	DC	20260										
5.60												
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Candidate Name		[MEMO ITEM]										
Office Sought:	Disbursement For:											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 113 OF 118			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial)		Date of Disbursement										
A. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>03</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	01		03		2014
M M	/	D D	/	Y Y Y Y								
01		03		2014								
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>WASHINGTON</td> <td>DC</td> <td>20260</td> </tr> </table>		City	State	Zip Code	WASHINGTON	DC	20260	<table border="1"> <tr> <td>5.60</td> </tr> </table>	5.60			
City	State	Zip Code										
WASHINGTON	DC	20260										
5.60												
Purpose of Disbursement POSTAGE		Transaction ID : SB17.I247										
Candidate Name		[MEMO ITEM]										
Office Sought:	Disbursement For:											
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State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
B. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>06</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	01		06		2014
M M	/	D D	/	Y Y Y Y								
01		06		2014								
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>WASHINGTON</td> <td>DC</td> <td>20260</td> </tr> </table>		City	State	Zip Code	WASHINGTON	DC	20260	<table border="1"> <tr> <td>5.60</td> </tr> </table>	5.60			
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WASHINGTON	DC	20260										
5.60												
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Candidate Name		[MEMO ITEM]										
Office Sought:	Disbursement For:											
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State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
C. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>14</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	01		14		2014
M M	/	D D	/	Y Y Y Y								
01		14		2014								
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period										
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City	State	Zip Code										
WASHINGTON	DC	20260										
235.60												
Purpose of Disbursement POSTAGE		Transaction ID : SB17.I249										
Candidate Name		[MEMO ITEM]										
Office Sought:	Disbursement For:											
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State: District:												

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 114 OF 118			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial)		Date of Disbursement										
A. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>16</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	01		16		2014
M M	/	D D	/	Y Y Y Y								
01		16		2014								
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>WASHINGTON</td> <td>DC</td> <td>20260</td> </tr> </table>		City	State	Zip Code	WASHINGTON	DC	20260	<table border="1"> <tr> <td>3.60</td> </tr> </table>	3.60			
City	State	Zip Code										
WASHINGTON	DC	20260										
3.60												
Purpose of Disbursement POSTAGE		Transaction ID : SB17.I250										
Candidate Name		[MEMO ITEM]										
Office Sought:	Disbursement For:											
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State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
B. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>22</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	01		22		2014
M M	/	D D	/	Y Y Y Y								
01		22		2014								
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>WASHINGTON</td> <td>DC</td> <td>20260</td> </tr> </table>		City	State	Zip Code	WASHINGTON	DC	20260	<table border="1"> <tr> <td>16.25</td> </tr> </table>	16.25			
City	State	Zip Code										
WASHINGTON	DC	20260										
16.25												
Purpose of Disbursement POSTAGE		Transaction ID : SB17.I251										
Candidate Name		[MEMO ITEM]										
Office Sought:	Disbursement For:											
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:												

Full Name (Last, First, Middle Initial)		Date of Disbursement										
C. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>29</td> <td></td> <td>2014</td> </tr> </table>	M M	/	D D	/	Y Y Y Y	01		29		2014
M M	/	D D	/	Y Y Y Y								
01		29		2014								
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period										
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>WASHINGTON</td> <td>DC</td> <td>20260</td> </tr> </table>		City	State	Zip Code	WASHINGTON	DC	20260	<table border="1"> <tr> <td>5.60</td> </tr> </table>	5.60			
City	State	Zip Code										
WASHINGTON	DC	20260										
5.60												
Purpose of Disbursement POSTAGE		Transaction ID : SB17.I252										
Candidate Name		[MEMO ITEM]										
Office Sought:	Disbursement For:											
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State: District:												

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 115 OF 118	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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Full Name (Last, First, Middle Initial)		Date of Disbursement											
A. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>29</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	01		29		2014
M M	/	D D	/	Y Y Y Y									
01		29		2014									
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>WASHINGTON</td> <td>DC</td> <td>20260</td> </tr> </table>		City	State	Zip Code	WASHINGTON	DC	20260	<table border="1"> <tr> <td>59.84</td> </tr> </table>		59.84			
City	State	Zip Code											
WASHINGTON	DC	20260											
59.84													
Purpose of Disbursement POSTAGE		Transaction ID : SB17.I253											
Candidate Name		[MEMO ITEM]											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:		Category/Type											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
B. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>30</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	01		30		2014
M M	/	D D	/	Y Y Y Y									
01		30		2014									
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period											
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WASHINGTON	DC	20260											
6.91													
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Candidate Name		[MEMO ITEM]											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:		Category/Type											

Full Name (Last, First, Middle Initial)		Date of Disbursement											
C. USPS		<table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>01</td> <td></td> <td>30</td> <td></td> <td>2014</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	01		30		2014
M M	/	D D	/	Y Y Y Y									
01		30		2014									
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period											
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>WASHINGTON</td> <td>DC</td> <td>20260</td> </tr> </table>		City	State	Zip Code	WASHINGTON	DC	20260	<table border="1"> <tr> <td>495.60</td> </tr> </table>		495.60			
City	State	Zip Code											
WASHINGTON	DC	20260											
495.60													
Purpose of Disbursement POSTAGE		Transaction ID : SB17.I255											
Candidate Name		[MEMO ITEM]											
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)											
State: District:		Category/Type											

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 116 OF 118			
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. USPS		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period 11.20
City WASHINGTON	State DC	
Zip Code 20260	Purpose of Disbursement POSTAGE	Transaction ID : SB17.I256
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. VENETIAN PALAZZO		Date of Disbursement M M / D D / Y Y Y Y 01 / 10 / 2014
Mailing Address 3355 S LAS VEGAS BLVD		Amount of Each Disbursement this Period 334.88
City LAS VEGAS	State NV	
Zip Code 89109	Purpose of Disbursement TRAVEL	Transaction ID : SB17.I258
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. VERIZON		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2013
Mailing Address 1095 AVENUE OF THE AMERICAS		Amount of Each Disbursement this Period 96.64
City NEW YORK	State NY	
Zip Code 10036	Purpose of Disbursement CELLPHONE	Transaction ID : SB17.I260
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

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

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 117 OF 118	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial) A. VERIZON		Date of Disbursement M M / D D / Y Y Y Y 12 / 26 / 2013
Mailing Address 1095 AVENUE OF THE AMERICAS		Amount of Each Disbursement this Period 90.00
City NEW YORK State NY Zip Code 10036	Purpose of Disbursement CELLPHONE	
Candidate Name		Transaction ID : SB17.I261 [MEMO ITEM]
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State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. US BANK		Date of Disbursement M M / D D / Y Y Y Y 03 / 14 / 2014
Mailing Address P.O. BOX 790408		Amount of Each Disbursement this Period 307.16
City ST LOUIS State MO Zip Code 63179	Purpose of Disbursement CREDIT CARD PAYMENT	
Candidate Name		Transaction ID : SB17.I128 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. BEST BUY		Date of Disbursement M M / D D / Y Y Y Y 01 / 31 / 2014
Mailing Address 7601 PENN AVE S		Amount of Each Disbursement this Period 184.90
City RICHFIELD State MN Zip Code 55423	Purpose of Disbursement OFFICE SUPPLIES	
Candidate Name		Transaction ID : SB17.I212 [MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional).....	307.16
TOTAL This Period (last page this line number only).....	

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 118 OF 118	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)
Friends of Stewart Mills, Inc.

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. USPS		M M / D D / Y Y Y Y 02 / 05 / 2014	
Mailing Address 475 L'ENFANT PLAZA SW		Amount of Each Disbursement this Period	
City WASHINGTON State DC Zip Code 20260		5.60	
Purpose of Disbursement POSTAGE		Transaction ID : SB17.I257	
Candidate Name		[MEMO ITEM]	
Office Sought:	House Senate President	Disbursement For:	Primary General Other (specify)
State:	District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. US BANK		M M / D D / Y Y Y Y 02 / 14 / 2014	
Mailing Address P.O. BOX 790408		Amount of Each Disbursement this Period	
City ST LOUIS State MO Zip Code 63179		30.50	
Purpose of Disbursement BANK FEE		Transaction ID : SB17.I130	
Candidate Name		[MEMO ITEM]	
Office Sought:	House Senate President	Disbursement For:	Primary General Other (specify)
State:	District:		

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C.		M M / D D / Y Y Y Y	
Mailing Address		Amount of Each Disbursement this Period	
City State Zip Code		[MEMO ITEM]	
Purpose of Disbursement		[MEMO ITEM]	
Candidate Name		[MEMO ITEM]	
Office Sought:	House Senate President	Disbursement For:	Primary General Other (specify)
State:	District:		

SUBTOTAL of Disbursements This Page (optional).....	30.50
TOTAL This Period (last page this line number only).....	162045.00