

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Eighth Congressional District Republican Party of Minnesota

Report Covering the Period: From: ^{M M / D D / Y Y Y Y} 0 4 / 0 1 / 2 0 1 0 To: ^{M M / D D / Y Y Y Y} 0 4 / 3 0 / 2 0 1 0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, ^{Y Y Y Y} 2 0 0 8	, 2,008	, 1,013,278
(b) Cash on Hand at Beginning of Reporting Period.....	, 8,628,34	
(c) Total Receipts (from Line 19).....	, 1,188,923	, 1,488,524
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	, 2,051,757	, 2,501,802
7. Total Disbursements (from Line 31).....	, 5,510,73	, 1,001,118
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	, 1,500,684	, 1,500,684
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	,	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	,	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

1003031107

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Eighth Congressional District Republican Party of Minnesota

Report Covering the Period: From: ^M0 ^M4 / ^D0 ^D1 / ^Y2 ^Y0 ^Y1 ^Y0 To: ^M0 ^M4 / ^D3 ^D0 / ^Y2 ^Y0 ^Y1 ^Y0

I. Receipts

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1 5 9 7 5	4 6 6 7 6
(ii) Unitemized	1 1 7 2 9 4 8	1 4 4 1 8 4 8
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1 1 8 8 9 2 3	1 4 8 8 5 2 4
(b) Political Party Committees		
(c) Other Political Committees (such as PACs).....		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	1 1 8 8 9 2 3	1 4 8 8 5 2 4
12. Transfers From Affiliated/Other Party Committees.....		
13. All Loans Received.....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, Interest, etc.).....		
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....		
(b) Levin Funds (from Schedule H5).....		
(c) Total Transfers (add 18(a) and 18(b))..		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	1 1 8 8 9 2 3	1 4 8 8 5 2 4
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1 1 8 8 9 2 3	1 4 8 8 5 2 4

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements

COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures	2 6 3 5 7 3	7 1 3 6 1 8
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2 6 3 5 7 3	7 1 3 6 1 8
22. Transfers to Affiliated/Other Party Committees.....	2 8 7 5 0 0	2 8 7 5 0 0
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	5 5 1 0 7 3	1 0 0 1 1 1 8
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5 5 1 0 7 3	1 0 0 1 1 1 8

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1 1 8 8 9 2 3	1 4 8 8 5 2 4
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1 1 8 8 9 2 3	1 4 8 8 5 2 4
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2 6 3 5 7 3	7 1 3 6 1 8
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2 6 3 5 7 3	7 1 3 6 1 8

1003031110

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

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

FOR LINE NUMBER: PAGE 1 OF 1
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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)
Eighth Congressional District Republican Party of Minnesota

A. Britton, Ronald L.
Full Name (Last, First, Middle Initial)
Mailing Address
303 Douglas Avenue
City State Zip Code
Eveleth MN 55734
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
4 6 6 7 6

Date of Receipt
0 4 / 1 2 / 2 0 1 0
Amount of Each Receipt this Period
2 0 6 0
Contribution In-Kind - FEC report postage

B. Britton, Ronald L.
Full Name (Last, First, Middle Initial)
Mailing Address
303 Douglas Ave
City State Zip Code
Eveleth MN 55734
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
retired
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
4 6 6 7 6

Date of Receipt
0 4 / 1 6 / 2 0 1 0
Amount of Each Receipt this Period
2 9 5 0
Contribution in kind - Phone book listing

C. Britton, Ronald L.
Full Name (Last, First, Middle Initial)
Mailing Address
303 Douglas Ave
City State Zip Code
Eveleth MN 55734
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼
4 6 6 7 6

Date of Receipt
0 4 / 2 6 / 2 0 1 0
Amount of Each Receipt this Period
1 0 9 6 5
Contribution in kind - Phone book listing

SUBTOTAL of Receipts This Page (optional).....▶ **1 5 9 7 5**
TOTAL This Period (last page this line number only).....▶ **1 5 9 7 5**

1003033111

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Eighth Congressional District Republican Party of Minnesota

Full Name (Last, First, Middle Initial)

A.

Britton, Ronald L.

Mailing Address

303 Douglas Ave

City

Eveleth

State

MN

Zip Code

55734

Purpose of Disbursement

Office Rent - 2 months

Candidate Name

0	0	1
Category/ Type		

Date of Disbursement

MM	DD	YYYY
04	06	2010

Amount of Each Disbursement this Period

1	7	9	1	7
---	---	---	---	---

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:

B.

Britton, Ronald L.

Mailing Address

303 Douglas Ave

City

Eveleth

State

MN

Zip Code

55734

Purpose of Disbursement

Contribution in kind - Postage FEC report

Candidate Name

0	0	1
Category/ Type		

Date of Disbursement

MM	DD	YYYY
04	12	2010

Amount of Each Disbursement this Period

2	0	6	0
---	---	---	---

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:

C.

Britton, Ronald L.

Mailing Address

303 Douglas Ave

City

Eveleth

State

MN

Zip Code

55734

Purpose of Disbursement

Contribution in kind - Phone book listing

Candidate Name

0	0	1
Category/ Type		

Date of Disbursement

MM	DD	YYYY
04	16	2010

Amount of Each Disbursement this Period

2	9	5	0
---	---	---	---

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).....▶

2	2	9	2	7
---	---	---	---	---

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

2	2	9	2	7
---	---	---	---	---

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 2 OF 6								
	<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Eighth Congressional District Republican Party of Minnesota

Full Name (Last, First, Middle Initial) A. Britton, Ronald L.		Date of Disbursement MM / DD / YYYY 04 / 26 / 2010
Mailing Address 303 Douglas Ave		Amount of Each Disbursement this Period 10965
City Eveleth	State MN	
Zip Code 55734	Purpose of Disbursement Contribution in kind - Phone book listing	Category/Type 001
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. Knutson, Greg		Date of Disbursement MM / DD / YYYY 04 / 01 / 2010
Mailing Address 321 Brandon Road		Amount of Each Disbursement this Period 1335
City Hoyt Lakes	State MN	
Zip Code 55750	Purpose of Disbursement Presentation paper for convention	Category/Type 001
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. Knutson, Greg		Date of Disbursement MM / DD / YYYY 04 / 01 / 2010
Mailing Address 321 Brandon Road		Amount of Each Disbursement this Period 1602
City Hoyt Lakes	State MN	
Zip Code 55750	Purpose of Disbursement Avery business cards for convention	Category/Type 001
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).....▶	13902
TOTAL This Period (last page this line number only).....▶	

10030331113

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 3 OF 6					
	<input checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b		

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NAME OF COMMITTEE (In Full)
Eighth Congressional District Republican Party of Minnesota

Full Name (Last, First, Middle Initial) A. Knutson, Greg		Date of Disbursement MM / DD / YYYY 04 / 16 / 2010
Mailing Address 321 Brandon Road		Amount of Each Disbursement this Period 1 7 1 9 3
City Hoyt Lakes	State MN	
Zip Code 55750	Purpose of Disbursement Lanyards and badge holders for convention	Category/ Type 0 0 1
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. Knutson, Greg		Date of Disbursement MM / DD / YYYY 04 / 01 / 2010
Mailing Address 321 Brandon Road		Amount of Each Disbursement this Period 2 5 5 3 0
City Hoyt Lakes	State MN	
Zip Code 55750	Purpose of Disbursement Window envelopes for convention	Category/ Type 0 0 1
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. Isanti County RPM		Date of Disbursement MM / DD / YYYY 04 / 13 / 2010
Mailing Address 31840 Lakeway Dr NE		Amount of Each Disbursement this Period 2 8 5 0 0 0
City Cambridge	State MN	
Zip Code 55008	Purpose of Disbursement Reimbursement for convention lunches	Category/ Type 0 0 1
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

SUBTOTAL of Disbursements This Page (optional).....▶	3 2 7 7 2 3
TOTAL This Period (last page this line number only).....▶	

10030331114

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 4 OF 6

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Eighth Congressional District Republican Party of Minnesota

Full Name (Last, First, Middle Initial)

A.

Mora Public Schools

Mailing Address
400 E Maple St

City **Mora** State **MN** Zip Code **55051**

Purpose of Disbursement
Meeting room charges

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
04 / 26 / 2010

Amount of Each Disbursement this Period
Category/Type
001
38000

B.

Range Office Supply

Mailing Address
319 Chestnut St

City **Virginia** State **MN** Zip Code **55792**

Purpose of Disbursement
Laser presentation paper for convention printing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
04 / 02 / 2010

Amount of Each Disbursement this Period
Category/Type
001
1335

C.

Range Office Supply

Mailing Address
319 Chestnut St

City **Virginia** State **MN** Zip Code **55792**

Purpose of Disbursement
Laser cartridges and name badges for convention printing

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement
MM / DD / YYYY
04 / 05 / 2010

Amount of Each Disbursement this Period
Category/Type
001
18838

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

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

58173

1003033115

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 5 OF 6				
	<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Eighth Congressional District Republican Party of Minnesota

Full Name (Last, First, Middle Initial) A. Range Office Supply		Date of Disbursement MM / DD / YYYY 04 / 05 / 2010
Mailing Address 319 Chestnut St		Amount of Each Disbursement this Period 1602
City Virginia	State MN	
Zip Code 55792	Purpose of Disbursement Name badges for convention printing	Category/Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) B. Range Office Supply		Date of Disbursement MM / DD / YYYY 04 / 19 / 2010
Mailing Address 319 Chestnut St		Amount of Each Disbursement this Period 1442
City Virginia	State MN	
Zip Code 55792	Purpose of Disbursement Clasp envelopes	Category/Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

Full Name (Last, First, Middle Initial) C. Range Office Supply		Date of Disbursement MM / DD / YYYY 04 / 22 / 2010
Mailing Address 319 Chestnut St		Amount of Each Disbursement this Period 32847
City Virginia	State MN	
Zip Code 55792	Purpose of Disbursement Laser cartridges for printing literature	Category/Type 001
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	State: District:	

SUBTOTAL of Disbursements This Page (optional).....▶	35891
TOTAL This Period (last page this line number only).....▶	

1003031116

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 6								
	<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
Eighth Congressional District Republican Party of Minnesota

Full Name (Last, First, Middle Initial) A. Tobies Restaurant, Inc		Date of Disbursement MM / DD / YYYY 04 / 12 / 2010
Mailing Address PO Box 397		Amount of Each Disbursement this Period 3 8 1 3 8
City Hinckley	State MN	
Zip Code 55037		Category/ Type 0 0 1
Purpose of Disbursement Meeting room charges		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code		Category/ Type
Purpose of Disbursement		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code		Category/ Type
Purpose of Disbursement		
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:	

SUBTOTAL of Disbursements This Page (optional).....▶	3 8 1 3 8
TOTAL This Period (last page this line number only).....▶	4 9 6 7 5 4

10030331117

Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
The FEC added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

USPS First Class Mail Postmarked

USPS Registered/Certified Postmarked (R/C)

USPS Priority Mail Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label

USPS Express Mail Postmarked
5/13/10

Postmark Illegible

No Postmark

Overnight Delivery Service (Specify): Shipping Date
Next Business Day Delivery

Received from House Records & Registration Office Date of Receipt

Received from Senate Public Records Office Date of Receipt

Received from Electronic Filing Office Date of Receipt

Other (Specify): Date of Receipt or Postmarked


PREPARER

5/14/10
DATE PREPARED

100303118