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48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

(See Reverse Side for Instructions)

To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

NAME OF COMMITTEE IN FULL Sinner for Congress]		
ADDRESS (number and street) PO Box 9614				-		
CITY, STATE, and ZIP CODE				_		
Fargo		ND 581	06			
2. NAME OF CANDIDATE		3. OFFICE SOUGHT (S		4. FEC IDENTIFICATION N	IUMBER	
Mr. George Sinner		House	ND 00	C00560441		
5. ISTHIS AN AMENDMENT? NO, THIS IS A N	EW FILING	YES, IT AMENDS THE	NOTICE FILED ON	//////		
A. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer		Date (month,	Amount	
BIRON BAKER		Self		day, year)		
				10/22/2014	2600.00	
3224 Promontory Dr						
		Transaction ID : VI	NVPND6ES42			
Bismarck	ND 58503-0903	Occupation	tata a			
D. FILL MANE MALLING ADDRESS AND TID CODE		Baker Family Medi	icine	Date (month,	Amount	
B. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer		day, year)	Amount	
Edward Kaplan		Self		10/04/0014	2000.00	
1919 M St NW				10/24/2014	2000.00	
Ste 320		Transaction ID : VI	NVPND6ZGS2			
	DO 20020 2540	Occupation				
Washington	DC 20036-3516	Real Estate Develo	opment			
C. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer		Date (month, day, year)	Amount	
Pallone for Congress				day, year)		
105 Proodusy				10/22/2014	2000.00	
495 Broadway		Transaction ID : VI	NVDND6EQN7			
		Occupation Occupation	NVFND0E3N7	_		
Long Branch	NJ 07740-5901	Собаралог				
D. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer		Date (month,	Amount	
Shakopee Mdewakanton Sioux Community				day, year)		
·	·			10/22/2014	1000.00	
2330 Sioux Trl NW						
		Transaction ID : VI	NVPND6F7R9			
Prior Lake	MN 55372-9077	Occupation				
E. FULL NAME, MAILING ADDRESS AND ZIP CODE		Name of Employer		Date (month,	Amount	
Jeana Walsh		Self		day, year)		
				10/22/2014	1000.00	
2750 42nd St NE						
		Transaction ID : VI	NVPND6F727			
Minot	ND 58703-4910	Occupation Farmer				
SIGNATURE (optional)		+	DATE	For further info	ormation contact:	
Mr. Jon Ewen		[Electronic - H. Eil 11	10/24/2014		Federal Election Commission	
		[Electronically Filed]		999 E Street, NW, Washington, DC 20463 Toll Free 800-424-9530, Local 202-694-1100		

Any information copied from reports and statements filed under the Federal Election Campaign Act 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.



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: 97 'A = G7 9 @ G B9 C I G'H9 L H'F 9 @ 5 H9 8 'HC' 5 'F 9 D C F H Z G7 < 98 I @ 'C F' + H9 A = N 5 H = C B

Form/Schedule: F65

Transaction ID: VNVPND6ZGS2

Earmarked through AMERIPAC (FEC ID C00271338)

Form/Schedule: Transaction ID:

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48 HOUR NOTICE OF CONTRIBUTIONS/LOANS RECEIVED

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To be used to report all contributions (including loans) of \$1000 or more, received within 20 days of the election.

NAME OF COMMITTEE IN FULL		7	
Sinner for Congress			
ADDRESS (number and street) PO Box 9614		1	
CITY, STATE, and ZIP CODE		4	
Fargo	ND 58106	continuation	n page
2. NAME OF CANDIDATE	3. OFFICE SOUGHT (State and District)	4. FEC IDENTIFICATION	NUMBER
Mr. George Sinner	House ND 00	C00560441	
5. ISTHIS AN AMENDMENT? NO, THIS IS A NEW FILING	YES, IT AMENDS THE NOTICE FILED ON		
A. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
stephen wheat	alembic international ltd.	day, year)	
·		10/22/2014	1000.00
PO Box 1941			
	Transaction ID : VNVPND6JA92 Occupation	_	
Honokaa HI 96727-183			
B. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
,		day, year)	
Scott Wisdahl	Self	40/22/2044	1000.00
12143 78th St NW		10/23/2014	1000.00
12.10.7001	Transaction ID : VNVPND72283		
	Occupation		
Alamo ND 58830-934	⁴⁶ Farmer		
C. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
		day, year)	
	Occupation		
		B	
D. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month, day, year)	Amount
	Occupation		
	Cocupation		
E. FULL NAME, MAILING ADDRESS AND ZIP CODE	Name of Employer	Date (month,	Amount
		day, year)	
	Occupation		

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: 97 'A = G7 9 @ G B9 C I G'H9 L H'F9 @ 5 H98 'HC'5 'F9 DC F HZ G7 < 98 I @ 'C F' + H9 A = N5 H + C B

Form/Schedule: F65

Transaction ID: VNVPND72283

Excessive contribution refunded. See 30G Report.

Form/Schedule: Transaction ID: