

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
Obermueller for Congress

ADDRESS (number and street) PO Box 211682
 Check if different than previously reported. (ACC) Eagan MN 55121

2. **FEC IDENTIFICATION NUMBER** C C00518811 3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY STATE ZIP CODE STATE DISTRICT
MN 02

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 08 / 12 / 2014 in the State of MN
(c) 30-Day **POST**-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period 07 / 01 / 2014 through 07 / 23 / 2014

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 Joanne Obermueller
Signature of Treasurer Joanne Obermueller *[Electronically Filed]* Date 07 / 31 / 2014

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

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name

Obermueller for Congress

Report Covering the Period: From: M M / D D / Y Y Y Y 07 / 01 / 2014 To: M M / D D / Y Y Y Y 07 / 23 / 2014

	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))....	41422.35	609987.01
(b) Total Contribution Refunds (from Line 20(d))	900.00	1126.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	40522.35	608861.01
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	54956.20	365190.02
(b) Total Offsets to Operating Expenditures (from Line 14).....	0.00	3184.58
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	54956.20	362005.44
8. Cash on Hand at Close of Reporting Period (from Line 27).....	270453.76	
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).....	32500.00	

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

Obermueller for Congress

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).....	21069.19	371558.07
(ii) Unitemized.....	5853.16	171665.23
(iii) TOTAL of contributions from individuals ▶	26922.35	543223.30
(b) Political Party Committees.....	0.00	1000.00
(c) Other Political Committees (such as PACs).....	14500.00	65763.71
(d) The Candidate.....	0.00	0.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	41422.35	609987.01
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
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	3184.58
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	28.63
16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶	41422.35	613200.22

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	54956.20	365190.02
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	900.00	1126.00
(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)).....	900.00	1126.00
21. OTHER DISBURSEMENTS	4000.00	4000.00
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	59856.20	370316.02

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	288887.61
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	41422.35
25. SUBTOTAL (add Line 23 and Line 24).....	330309.96
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	59856.20
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	270453.76

**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 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
Joyce Anderson

Mailing Address 2221 Country Ln

City State Zip Code
Minnetonka MN 55305-3113

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

Name of Employer Occupation
N/A Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 18 / 2014

Transaction ID : C3917915

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Barbara Berggren

Mailing Address 11 High Rd

City State Zip Code
Inver Grove Heights MN 55077-1824

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

Name of Employer Occupation
N/A 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 Y Y
07 / 21 / 2014

Transaction ID : C3918417

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
David A. Bjork

Mailing Address 1900 Mount Curve Ave

City State Zip Code
Minneapolis MN 55403

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

Name of Employer Occupation
Clark & Wamberg LLC Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
07 / 17 / 2014

Transaction ID : C3917116

Amount of Each Receipt this Period
100.00

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

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

700.00

**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 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
Aleta A Borrud MD

Mailing Address 2411 Merrihills Dr SW

City Rochester State MN Zip Code 55902-1165

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

Name of Employer Mayo Heath Systems Occupation Physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2014

Transaction ID : C3919399

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Andrew D. Brobston

Mailing Address 8865 205th St E

City Hastings State MN Zip Code 55033-8600

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

Name of Employer Brobston Development, Inc. Occupation Software 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 Y Y
 07 / 11 / 2014

Transaction ID : C3915868

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Benjamin F. Bryant

Mailing Address 105 Robert Cir

City Belle Plaine State MN Zip Code 56011-1107

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

Name of Employer N/A 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 Y Y
 07 / 08 / 2014

Transaction ID : C3914776

Amount of Each Receipt this Period
50.00

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

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

350.00

**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 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
Elizabeth A. Bryant

Mailing Address 1982 Safari Trl

City Eagan State MN Zip Code 55122-2677

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

Name of Employer NA Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 21 / 2014

Transaction ID : C3918428

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Lyn Burton

Mailing Address 2144 Edgcombe Rd

City Saint Paul State MN Zip Code 55116-2475

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

Name of Employer Affordable Housing Connection Occupation Executive Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : C3917111

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
Phyllis E Byers

Mailing Address 12600 Parkwood Dr
Apt 305

City Burnsville State MN Zip Code 55337-3629

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

Name of Employer N/A 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
 07 / 23 / 2014

Transaction ID : C3919666

Amount of Each Receipt this Period
100.00

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

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

350.00

**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 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
Augustus W. Clapp

Mailing Address 757 Osceola Ave
1

City Saint Paul State MN Zip Code 55105-3327

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

Name of Employer n/a Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 11 / 2014

Transaction ID : C3915644

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Eileen F Collard Phd

Mailing Address 4412 47th Ave S

City Minneapolis State MN Zip Code 55406-3623

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
07 / 08 / 2014

Transaction ID : C3915161

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Angela Craig

Mailing Address 1580 Blackhawk Lake Dr

City Eagan State MN Zip Code 55122-1245

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

Name of Employer St. Jude Medical Occupation Vice President, Human Resources

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1450.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 21 / 2014

Transaction ID : C3918136

Amount of Each Receipt this Period
200.00

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

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

550.00

**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 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
Richard Earl Crouter

Mailing Address 808 2nd St E

City Northfield State MN Zip Code 55057-2307

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

Name of Employer Carleton College Occupation retired faculty member

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **460.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 18 / 2014

Transaction ID : C3917213

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
Russell A. DeFauw

Mailing Address 13030 Florida Ct

City Apple Valley State MN Zip Code 55124-7943

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

Name of Employer Performance Office Papers Occupation President

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2014

Transaction ID : C3918426

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Bill K Erickson

Mailing Address 27930 Smithtown Rd

City Excelsior State MN Zip Code 55331-7911

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : C3917119

Amount of Each Receipt this Period
500.00

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

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

1025.00

**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 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
Lee J. Erickson

Mailing Address 4061 Halite Ln

City Eagan State MN Zip Code 55122-2924

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 09 / 2014

Transaction ID : C3915394

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
David Lee Ervin

Mailing Address 394 Meadowood Ln

City Burnsville State MN Zip Code 55337-6842

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

Name of Employer Information Requested Occupation Information Requested
 N/A 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 Y Y
07 / 21 / 2014

Transaction ID : C3918407

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Betty F Fedde

Mailing Address 1662 Norwood Dr

City Eagan State MN Zip Code 55122-2778

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

Name of Employer Information Requested Occupation Information Requested
 Ironwood Electronics Controller/MGT Coordiniator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 21 / 2014

Transaction ID : C3918141

Amount of Each Receipt this Period
250.00

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 11 OF 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
Michael J. Flynn

Mailing Address 616 5th St E

City Northfield State MN Zip Code 55057-2322

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

Name of Employer Carleton College Occupation Professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 09 / 2014

Transaction ID : C3915190

Amount of Each Receipt this Period
 25.00

B. Full Name (Last, First, Middle Initial)
Bruce Folken

Mailing Address 13250 Huntington Ter

City Apple Valley State MN Zip Code 55124-9480

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

Name of Employer H & R Block Occupation Tax Preparer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 21 / 2014

Transaction ID : C3918178

Amount of Each Receipt this Period
 250.00

C. Full Name (Last, First, Middle Initial)
Carol J Freeman

Mailing Address 3237 Lyndale Ave S

City Minneapolis State MN Zip Code 55408-3786

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

Name of Employer not employed Occupation not employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2014

Transaction ID : C3919168

Amount of Each Receipt this Period
 500.00

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

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

775.00

**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 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
James E Gabrielson

Mailing Address 11585 Riverview Rd NE

City Hanover State MN Zip Code 55341-4025

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

Name of Employer none (retired) Occupation Engineer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 14 / 2014

Transaction ID : C3916151

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Eugene Goetz

Mailing Address 1710 Knox Ave S

City Minneapolis State MN Zip Code 55403-2833

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

Name of Employer NA Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1000.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 19 / 2014

Transaction ID : C3918037

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Richard Zuleikha Grimm Jr.

Mailing Address 224 W Minnehaha Pkwy

City Minneapolis State MN Zip Code 55419-1367

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

Name of Employer Hennepin Health Systems Occupation Cardiologist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 14 / 2014

Transaction ID : C3916161

Amount of Each Receipt this Period
25.00

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

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

525.00

**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 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
John F Grinager

Mailing Address 1606 Diane Rd

City Mendota Heights State MN Zip Code 55118-3626

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

Name of Employer MN Department of Commerce Occupation Public Utility Rates Analyst

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **850.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 19 / 2014

Transaction ID : C3918036

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Bradley Hinker

Mailing Address 4480 Oak Chase Ln

City Eagan State MN Zip Code 55123-1815

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

Name of Employer N/A 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
 07 / 23 / 2014

Transaction ID : C3919397

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Alan B Hooper

Mailing Address 387 Pelham Blvd

City Saint Paul State MN Zip Code 55104-5248

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

Name of Employer Univ. Minnesota Occupation Professor Emeritus

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **900.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 16 / 2014

Transaction ID : C3916850

Amount of Each Receipt this Period
100.00

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)
 11a 12 11b 13a 11c 13b 11d 14 15
 PAGE 14 OF 68

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NAME OF COMMITTEE (In Full)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
Michael Raymond Huber

Mailing Address 3810 Vermilion Ct S

City Eagan State MN Zip Code 55122-3156

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : C3917117

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Ruhel Islam

Mailing Address 5728 44th Ave S

City Minneapolis State MN Zip Code 55417-3015

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

Name of Employer Information Requested Occupation Information Requested
Gandhi Mahal 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
07 / 18 / 2014

Transaction ID : C3917919

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Ernest W. Lampe

Mailing Address 317 Groveland Ave Unit 503

City Minneapolis State MN Zip Code 55403-3666

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

Name of Employer Information Requested Occupation Information Requested
retired physicians

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **1435.00**

Date of Receipt
 M M / D D / Y Y Y Y
07 / 08 / 2014

Transaction ID : C3914798

Amount of Each Receipt this Period
250.00

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 15 OF 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
Stephanie Brod Levine

Mailing Address 1057 Overlook Rd

City Mendota Heights State MN Zip Code 55118-3652

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

Name of Employer N/A Occupation Volunteer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 08 / 2014

Transaction ID : C3914801

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Thomas R Longfellow

Mailing Address 1010 Overlook Rd

City Mendota Heights State MN Zip Code 55118-3651

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **450.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 23 / 2014

Transaction ID : C3919507

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Katherine Austin Mahle

Mailing Address 1410 Spring Valley Rd

City Golden Valley State MN Zip Code 55422-4748

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

Name of Employer N/A Occupation 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
 07 / 19 / 2014

Transaction ID : C3918040

Amount of Each Receipt this Period
100.00

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

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

550.00

**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 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
Diane D. Malfeld

Mailing Address 84 Mississippi River Blvd N

City Saint Paul State MN Zip Code 55104-5613

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 19 / 2014

Transaction ID : C3918039

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
L. Edwin Martin

Mailing Address 13600 Grand Ave

City Burnsville State MN Zip Code 55337-4504

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

Name of Employer N/A 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
 07 / 21 / 2014

Transaction ID : C3918102

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
Sara Martineau

Mailing Address 1235 Yale Pl
Apt 1702

City Minneapolis State MN Zip Code 55403-1948

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

Name of Employer N/A 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
 07 / 14 / 2014

Transaction ID : C3916154

Amount of Each Receipt this Period
100.00

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

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

700.00

**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 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
Rachel Matney

Mailing Address 8651 Spring Creek Rd

City Northfield State MN Zip Code 55057-4838

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

Name of Employer Seed Partners Occupation Consultant

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : C3917074

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Susan Clements McCloskey

Mailing Address 3 Lilywood Ln

City Saint Paul State MN Zip Code 55118-6102

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

Name of Employer N/A 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
 07 / 18 / 2014

Transaction ID : C3917279

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Joyce McFarland

Mailing Address 6341 Murray Hill Rd

City Excelsior State MN Zip Code 55331-8832

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

Name of Employer Ministry of Spiritual Direction Occupation Director

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : C3917115

Amount of Each Receipt this Period
200.00

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 18 OF 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
Jerry R. Mohrig

Mailing Address 301 7th St W
Unit 1105

City Northfield State MN Zip Code 55057-2475

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

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

Transaction ID : C3915230

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Godan P Nambudiripad

Mailing Address 1716 James Place

City Burnsville State MN Zip Code 55337-4436

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

Name of Employer Information Requested Occupation Information Requested
Not employed Not employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
675.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 21 / 2014

Transaction ID : C3918425

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
Ho-Chunk Nation

Mailing Address PO Box 640

City Black River Falls State WI Zip Code 54615-0640

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

Name of Employer Information Requested Occupation Information Requested
. .

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : C3917193

Amount of Each Receipt this Period
2600.00

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

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

2750.00

**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 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
Ho-Chunk Nation

Mailing Address **PO Box 640**

City **Black River Falls** State **WI** Zip Code **54615-0640**

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

Name of Employer
Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5200.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : C4489462

Amount of Each Receipt this Period
2600.00

B. Full Name (Last, First, Middle Initial)
John Leland Neis

Mailing Address **14360 Garland Ave**

City **Apple Valley** State **MN** Zip Code **55124-8405**

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

Name of Employer
Occupation
N/A **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
07 / 03 / 2014

Transaction ID : C3913053

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Averial Nelson

Mailing Address **2420 Russell Ave S**

City **Minneapolis** State **MN** Zip Code **55405-2333**

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

Name of Employer
Occupation
Aspen Medical Clinic **Physician**

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
300.00

Date of Receipt
 M M / D D / Y Y Y Y
07 / 17 / 2014

Transaction ID : C3917118

Amount of Each Receipt this Period
100.00

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

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

2725.00

**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 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
Jeena M. Norenberg

Mailing Address 2919 County Road G

City State Zip Code
Glenwood City WI 54013-4218

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

Name of Employer Occupation
N/A Homemaker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
666.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 08 / 2014

Transaction ID : C3914765

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
Victoria P. Oshiro

Mailing Address 2800 Highland Dr

City State Zip Code
Burnsville MN 55337-2120

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

Name of Employer Occupation
N/A Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
470.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 21 / 2014

Transaction ID : C3918143

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
Gayle P Peterson

Mailing Address 497 Meadowood Ln

City State Zip Code
Burnsville MN 55337-6841

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

Name of Employer Occupation
N/A 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
 07 / 21 / 2014

Transaction ID : C3918140

Amount of Each Receipt this Period
100.00

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 21 OF 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
Lars H Peterssen

Mailing Address 1805 W Lake St
Unit 602

City Minneapolis State MN Zip Code 55408-3985

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

Name of Employer Peterssen / Keller Architecture - Minn Occupation Architect

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
 07 / 15 / 2014

Transaction ID : C3916560

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Peter J Reed

Mailing Address 2950 Dean Pkwy
Apt 1001

City Minneapolis State MN Zip Code 55416-4322

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

Name of Employer none Occupation 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 Y Y
 07 / 10 / 2014

Transaction ID : C3915513

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
Lisa Richardson

Mailing Address 988 Cherokee Ave

City West Saint Paul State MN Zip Code 55118-1111

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

Name of Employer St. Catherine University Occupation social worker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
260.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 22 / 2014

Transaction ID : C3918898

Amount of Each Receipt this Period
10.00

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

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

285.00

**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 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
Robert A. Rosenbaum

Mailing Address 1920 Irving Ave S

City State Zip Code
Minneapolis MN 55403-2823

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

Name of Employer Occupation
Dorsey & Whitney LLP lawyer

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
 07 / 09 / 2014

Transaction ID : C3915330

Amount of Each Receipt this Period
500.00

B. Full Name (Last, First, Middle Initial)
Lawrence Gilbert Sandoval

Mailing Address 9234 Hillsboro Way

City State Zip Code
Savage MN 55378-2109

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

Name of Employer Occupation
CWA Staff Rrepresentative

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 12 / 2014

Transaction ID : C3915883

Amount of Each Receipt this Period
25.00

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

Mailing Address 4000 Sunset Blvd

City State Zip Code
Saint Louis Park MN 55416-4133

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

Name of Employer Occupation
RKMC Attorney

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
 07 / 19 / 2014

Transaction ID : C3918043

Amount of Each Receipt this Period
250.00

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

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

775.00

**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 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
Diane Elizabeth Struble

Mailing Address 13400 Garfield Ave

City Burnsville State MN Zip Code 55337-2710

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

Name of Employer Information Requested Occupation Information Requested

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **520.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 21 / 2014

Transaction ID : C3918100

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
Joyce Thibodeaux

Mailing Address 113 Oakdale Loop

City Houma State LA Zip Code 70360-5932

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

Name of Employer None Occupation Not Employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **280.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 11 / 2014

Transaction ID : C3915840

Amount of Each Receipt this Period
35.00

C. Full Name (Last, First, Middle Initial)
Todd Urness

Mailing Address 2630 Countryside Dr W

City Long Lake State MN Zip Code 55356-9670

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

Name of Employer Winthrop and Weinstine Occupation Attorney

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
07 / 08 / 2014

Transaction ID : C3914764

Amount of Each Receipt this Period
500.00

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

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

635.00

**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 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
Edward F. Vennewitz

Mailing Address 35 Garden Dr

City Burnsville State MN Zip Code 55337-4143

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

Name of Employer N/A 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 Y Y
07 / 21 / 2014

Transaction ID : C3918299

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
R. Jack Walser

Mailing Address 4900 Meadville St

City Excelsior State MN Zip Code 55331-8786

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

Name of Employer N/A Occupation Retired

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
07 / 07 / 2014

Transaction ID : C3914540

Amount of Each Receipt this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Bruce A. Yernberg

Mailing Address 2118 Pioneer Rd
Trlr 147

City Red Wing State MN Zip Code 55066-3999

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

Name of Employer N/A Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **900.00**

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

Transaction ID : C3915244

Amount of Each Receipt this Period
50.00

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

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

2150.00

**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 25 OF 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
Linda Armstrong

Mailing Address 12521 Portland Ave
Apt 116

City Burnsville State MN Zip Code 55337-7511

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

Name of Employer Dakota County Occupation Librarian

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 01 / 2014

Transaction ID : C3916713A

Amount of Each Receipt this Period
25.00

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5297.35

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 06 / 2014

Transaction ID : C3916713AB

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Larry Brey

Mailing Address 3593 Avon Drive

City Woodbury State MN Zip Code 55125-2431

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

Name of Employer 3M Occupation chemist

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 01 / 2014

Transaction ID : C3916708A

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

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

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

125.00

**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 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5297.35

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 06 / 2014

Transaction ID : C3916708AB

Amount of Each Receipt this Period
100.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
John Cowles III

Mailing Address 475 Grand Hill

City State Zip Code
Saint Paul MN 55102-2612

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

Name of Employer Occupation
Unity Avenue Associates executive

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
2500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 21 / 2014

Transaction ID : C3922279A

Amount of Each Receipt this Period
1000.00

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5297.35

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 23 / 2014

Transaction ID : C3922279AB

Amount of Each Receipt this Period
1000.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

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

1000.00

**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 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
Brenda Daly

Mailing Address 1201 Keller Lake Road

City Burnsville, MN 55306 State MN Zip Code 55306-6366

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

Name of Employer retired Occupation English professor

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **265.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 13 / 2014

Transaction ID : C3917262A

Amount of Each Receipt this Period
 15.00

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5297.35**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 13 / 2014

Transaction ID : C3917262AB

Amount of Each Receipt this Period
 15.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Robert Donnelly

Mailing Address 1331 Riverside Ln

City Mendota Heights State MN Zip Code 55118-1746

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

Name of Employer self Occupation social worker

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
 07 / 10 / 2014

Transaction ID : C3917242A

Amount of Each Receipt this Period
 100.00

* Earmarked Contribution: See Below

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

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

115.00

**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 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5297.35

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 13 / 2014

Transaction ID : C3917242AB

Amount of Each Receipt this Period
100.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Barbara Forster

Mailing Address 901 S. 2nd St. #603

City State Zip Code
Mpls MN 55415

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

Name of Employer Occupation
Not employed Not employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : C3920454A

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5297.35

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 20 / 2014

Transaction ID : C3920454AB

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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 29 OF 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
Nancy Gertner

Mailing Address 2839 Xenwood Ave S

City St Louis Park State MN Zip Code 55416-1851

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

Name of Employer Self employed Occupation Farmer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
249.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 01 / 2014

Transaction ID : C3916704A

Amount of Each Receipt this Period
199.00

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5297.35

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 06 / 2014

Transaction ID : C3916704AB

Amount of Each Receipt this Period
199.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Laura Melissa Handler

Mailing Address 4551 Ches Mar Drive

City Eagan State MN Zip Code 55123-1866

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

Name of Employer Self Occupation Musician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 01 / 2014

Transaction ID : C3916703A

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

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

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

299.00

**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 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5297.35

Date of Receipt
M M / D D / Y Y Y Y
07 / 06 / 2014

Transaction ID : C3916703AB

Amount of Each Receipt this Period
100.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Robert Harlow

Mailing Address 928 W 3rd St

City State Zip Code
Red Wing MN 55066-2207

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

Name of Employer Occupation
NONE NOT EMPLOYED

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
565.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 18 / 2014

Transaction ID : C3920457A

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5297.35

Date of Receipt
M M / D D / Y Y Y Y
07 / 20 / 2014

Transaction ID : C3920457AB

Amount of Each Receipt this Period
100.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

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

100.00

**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 31 OF 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
Kimberly K Hunter

Mailing Address 1451 Edmund Ave

City Saint Paul State MN Zip Code 55104-2408

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

Name of Employer Self-Employed Occupation Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **700.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 12 / 2014

Transaction ID : C3917255A

Amount of Each Receipt this Period
250.00

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5297.35**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 13 / 2014

Transaction ID : C3917255AB

Amount of Each Receipt this Period
250.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Shirley Huskins

Mailing Address 1841 Eagle Ridge Drive

City Mendota Heights State MN Zip Code 55118-4208

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

Name of Employer none Occupation Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **285.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 14 / 2014

Transaction ID : C3920400A

Amount of Each Receipt this Period
25.00

* Earmarked Contribution: See Below

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

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

275.00

**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 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5297.35

Date of Receipt
M M / D D / Y Y Y Y
07 / 20 / 2014

Transaction ID : C3920400AB

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Shirley Huskins

Mailing Address 1841 Eagle Ridge Drive

City State Zip Code
Mendota Heights MN 55118-4208

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

Name of Employer Occupation
none Retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
285.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 16 / 2014

Transaction ID : C3920401A

Amount of Each Receipt this Period
25.00

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5297.35

Date of Receipt
M M / D D / Y Y Y Y
07 / 20 / 2014

Transaction ID : C3920401AB

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

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

25.00

**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 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
Garrison Keillor

Mailing Address 294 Summit Avenue

City St. Paul State MN Zip Code 55102-2121

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

Name of Employer self Occupation writer

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
1950.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 19 / 2014

Transaction ID : C3920463A

Amount of Each Receipt this Period
500.00

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5297.35

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 20 / 2014

Transaction ID : C3920463AB

Amount of Each Receipt this Period
500.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Louise Mattson

Mailing Address 11 Beebe Ave

City Mendota Heights State MN Zip Code 55118-1902

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

Name of Employer self-employed Occupation physician

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
250.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 16 / 2014

Transaction ID : C3920442A

Amount of Each Receipt this Period
50.00

* Earmarked Contribution: See Below

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

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

550.00

**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 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5297.35

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 20 / 2014

Transaction ID : C3920442AB

Amount of Each Receipt this Period
50.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
David H. Mindeman

Mailing Address 13440 Gunflint Ct

City State Zip Code
Apple Valley MN 55124-7375

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

Name of Employer Occupation
Not employed Not employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
350.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : C3920445A

Amount of Each Receipt this Period
50.00

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5297.35

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 20 / 2014

Transaction ID : C3920445AB

Amount of Each Receipt this Period
50.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

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

50.00

**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 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
Rochelle Rothbaum

Mailing Address 294 Richard ct

City Pomona State NY Zip Code 10970-2305

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

Name of Employer Retired Occupation Social worker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
284.38

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 02 / 2014

Transaction ID : C3916718A

Amount of Each Receipt this Period
5.00

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5297.35

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 06 / 2014

Transaction ID : C3916718AB

Amount of Each Receipt this Period
5.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Rochelle Rothbaum

Mailing Address 294 Richard ct

City Pomona State NY Zip Code 10970-2305

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

Name of Employer Retired Occupation Social worker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
284.38

Date of Receipt
 M M / D D / Y Y Y Y Y Y
07 / 16 / 2014

Transaction ID : C3920422A

Amount of Each Receipt this Period
5.00

* Earmarked Contribution: See Below

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

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

10.00

**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 36 OF 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5297.35

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2014

Transaction ID : C3920422AB

Amount of Each Receipt this Period
5.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Rochelle Rothbaum

Mailing Address 294 Richard ct

City State Zip Code
Pomona NY 10970-2305

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

Name of Employer Occupation
Retired Social worker

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
284.38

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 19 / 2014

Transaction ID : C3920423A

Amount of Each Receipt this Period
1.19

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5297.35

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 20 / 2014

Transaction ID : C3920423AB

Amount of Each Receipt this Period
1.19

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

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

1.19

**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 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
Donald C Ryberg

Mailing Address 7500 Cahill Rd. 315 C

City Edina State MN Zip Code 55439-2784

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 **275.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 02 / 2014

Transaction ID : C3916717A

Amount of Each Receipt this Period
 15.00

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date **5297.35**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 06 / 2014

Transaction ID : C3916717AB

Amount of Each Receipt this Period
 15.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

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

Mailing Address 5055 Emerson Ave S

City Minneapolis State MN Zip Code 55419-1153

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

Name of Employer Not employed Occupation Not employed

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
 07 / 12 / 2014

Transaction ID : C3917260A

Amount of Each Receipt this Period
 50.00

* Earmarked Contribution: See Below

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

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

65.00

**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 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5297.35

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 13 / 2014

Transaction ID : C3917260AB

Amount of Each Receipt this Period
50.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Richard Smith

Mailing Address 718 Vermillion St

City State Zip Code
Hastings MN 55033-2133

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

Name of Employer Occupation
Cryptosmith Educator

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
223.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 15 / 2014

Transaction ID : C3920405A

Amount of Each Receipt this Period
14.00

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5297.35

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 20 / 2014

Transaction ID : C3920405AB

Amount of Each Receipt this Period
14.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

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

14.00

**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 39 OF 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
Matthew Spohn

Mailing Address 2340 Ash St.

City State Zip Code
Denver CO 80207-3116

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

Name of Employer Occupation
Fulbright & Jaworski LLP Attorney

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
500.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 14 / 2014

Transaction ID : C3920397A

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5297.35

Date of Receipt
M M / D D / Y Y Y Y
07 / 20 / 2014

Transaction ID : C3920397AB

Amount of Each Receipt this Period
100.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Louise A. Teeter

Mailing Address 4725 Oak Way

City State Zip Code
Eagan MN 55122-2334

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

Name of Employer Occupation
Patterson Companies Exec. Admin

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
325.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 10 / 2014

Transaction ID : C3917245A

Amount of Each Receipt this Period
25.00

* Earmarked Contribution: See Below

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

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

125.00

**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 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5297.35

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 13 / 2014

Transaction ID : C3917245AB

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Dennis Lee Thompson

Mailing Address 4275 Boulder Ridge Pt.

City State Zip Code
Eagan MN 55122-1894

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

Name of Employer Occupation
none retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
480.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 16 / 2014

Transaction ID : C3920436A

Amount of Each Receipt this Period
50.00

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City State Zip Code
CAMBRIDGE MA 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation
Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5297.35

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 20 / 2014

Transaction ID : C3920436AB

Amount of Each Receipt this Period
50.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

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

50.00

**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 68
(check only one)
 11a 11b 11c 11d
 12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
Dennis Lee Thompson

Mailing Address 4275 Boulder Ridge Pt.

City Eagan State MN Zip Code 55122-1894

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

Name of Employer none Occupation retired

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
480.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2014

Transaction ID : C3922295A

Amount of Each Receipt this Period
25.00

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5297.35

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 23 / 2014

Transaction ID : C3922295AB

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

C. Full Name (Last, First, Middle Initial)
Lori J. Tripp

Mailing Address 1563 Covington Lane

City Eagan State MN Zip Code 55122-2746

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

Name of Employer Not employed Occupation Not employed

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
550.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 17 / 2014

Transaction ID : C3920447A

Amount of Each Receipt this Period
100.00

* Earmarked Contribution: See Below

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

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

125.00

**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 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
ACTBLUE

Mailing Address **P.O. BOX 382110**

City **CAMBRIDGE** State **MA** Zip Code **02238**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
5297.35

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2014

Transaction ID : C3920447AB

Amount of Each Receipt this Period

100.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

B. Full Name (Last, First, Middle Initial)
Darrell D. Weaver

Mailing Address **725 4th Avenue, NW**

City **Plainview** State **MN** Zip Code **55964-1046**

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

Name of Employer **ABA Water Systems, Inc.** Occupation **Officer/Owner**

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
360.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2014

Transaction ID : C3920440A

Amount of Each Receipt this Period

20.00

* Earmarked Contribution: See Below

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

Mailing Address **P.O. BOX 382110**

City **CAMBRIDGE** State **MA** Zip Code **02238**

FEC ID number of contributing federal political committee. **C C00401224**

Name of Employer _____ Occupation _____
Conduit total listed in Agg. field _____

Receipt For: 2014
 Primary General
 Other (specify) _____

Election Cycle-to-Date _____
5297.35

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2014

Transaction ID : C3920440AB

Amount of Each Receipt this Period

20.00

[MEMO ITEM]
Note: Above Contribution earmarked through this organization.

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

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

20.00

**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 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
Richard Charles Woolery

Mailing Address 1599 Lancaster Ln

City Eagan State MN Zip Code 55122-2720

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

Name of Employer none 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 Y Y
 07 / 07 / 2014

Transaction ID : C3917221A

Amount of Each Receipt this Period
25.00

* Earmarked Contribution: See Below

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

Mailing Address P.O. BOX 382110

City CAMBRIDGE State MA Zip Code 02238

FEC ID number of contributing federal political committee. **C** C00401224

Name of Employer Occupation Conduit total listed in Agg. field

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date
5297.35

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 13 / 2014

Transaction ID : C3917221AB

Amount of Each Receipt this Period
25.00

[MEMO ITEM]
 Note: Above Contribution earmarked through this organization.

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).....

25.00

21069.19

**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 68
	<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)
Obermueller for Congress

Full Name (Last, First, Middle Initial)
COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION (LETTER CARRIERS POLITICAL ACTION FUND)

A. Mailing Address 100 INDIANA AVE., N. W.

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00023580

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 Y
 07 / 14 / 2014

Transaction ID : C3916159

Amount of Each Receipt this Period
 500.00

Full Name (Last, First, Middle Initial)
CWA-COPE POLITICAL CONTRIBUTIONS COMMITTEE

B. Mailing Address 501 THIRD STREET, NW

City WASHINGTON State DC Zip Code 20001

FEC ID number of contributing federal political committee. **C** C00002089

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 Y
 07 / 23 / 2014

Transaction ID : C3919659

Amount of Each Receipt this Period
 1000.00

Full Name (Last, First, Middle Initial)
INT'L. ASSOCIATION OF BRIDGE, STRUCTURAL, ORNAMENTAL & REINFORCING IRON WORKERS (IPAL)

C. Mailing Address 1750 New York Ave NW
Ste 400

City Washington State DC Zip Code 20006-5315

FEC ID number of contributing federal political committee. **C** C00027359

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 Y
 07 / 23 / 2014

Transaction ID : C3919400

Amount of Each Receipt this Period
 5000.00

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

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

6500.00

**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 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
LABORERS' INTERNATIONAL UNION OF NORTH AMERICA (LIUNA) PAC

Mailing Address 905 16th St NW
FI 2

City Washington State DC Zip Code 20006-1703

FEC ID number of contributing federal political committee. **C** C00007922

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
 07 / 23 / 2014

Transaction ID : C3920351

Amount of Each Receipt this Period
 2500.00

B. Full Name (Last, First, Middle Initial)
LABORERS' INTERNATIONAL UNION OF NORTH AMERICA (LIUNA) PAC

Mailing Address 905 16th St NW
FI 2

City Washington State DC Zip Code 20006-1703

FEC ID number of contributing federal political committee. **C** C00007922

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
 07 / 23 / 2014

Transaction ID : C3920352

Amount of Each Receipt this Period
 2500.00

C. Full Name (Last, First, Middle Initial)
Treasury Employees PAC

Mailing Address 1750 H STREET, NW

City WASHINGTON State DC Zip Code 20006

FEC ID number of contributing federal political committee. **C** C00107128

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 17 / 2014

Transaction ID : C3917109

Amount of Each Receipt this Period
 500.00

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 46 OF 68
	<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)
Obermueller for Congress

A. Full Name (Last, First, Middle Initial)
UNITED ASSOCIATION POLITICAL EDUCATION COMMITTEE (UNITED ASSOCIATION OF JOURNEYMEN AND APP

Mailing Address 3 Park Pl

City Annapolis State MD Zip Code 21401-3687

FEC ID number of contributing federal political committee. **C** C00012476

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
 07 / 08 / 2014

Transaction ID : C3914766

Amount of Each Receipt this Period
 2500.00

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).....

2500.00

14500.00

**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 47 OF 68			
	<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)
Obermueller for Congress

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 07 / 06 / 2014
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 33.01
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit card processing fee	Transaction ID : D229738
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) B. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 07 / 13 / 2014
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 38.08
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit card processing fee	Transaction ID : D229827
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) C. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 07 / 20 / 2014
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 87.83
City Cambridge	State MA	
Zip Code 02138-5106	Purpose of Disbursement Credit card processing fee	Transaction ID : D230291
Candidate Name	Category/Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	158.92
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 48 OF 68			
	<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)
Obermueller for Congress

Full Name (Last, First, Middle Initial) A. ActBlue Technical Services		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 14 Arrow St		Amount of Each Disbursement this Period 50.85 Transaction ID : D230506
City Cambridge	State MA	
Zip Code 02138-5106	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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) B. Direct connect		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 3901 Centerview Dr Ste W		Amount of Each Disbursement this Period 420.21 Transaction ID : D230023
City Chantilly	State VA	
Zip Code 20151-3229	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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) c. Direct connect		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 3901 Centerview Dr Ste W		Amount of Each Disbursement this Period 338.43 Transaction ID : D230024
City Chantilly	State VA	
Zip Code 20151-3229	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: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

SUBTOTAL of Disbursements This Page (optional).....	809.49
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 49 OF 68			
	<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)
Obermueller for Congress

Full Name (Last, First, Middle Initial) A. Direct connect		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 3901 Centerview Dr Ste W		Amount of Each Disbursement this Period 57.75
City Chantilly	State VA Zip Code 20151-3229	
Purpose of Disbursement Credit card processing fee	Category/Type	Transaction ID : D230025
Candidate Name		
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:		

Full Name (Last, First, Middle Initial) B. Goodhue 21 DFL		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 17189 Co. 27 Blvd.		Amount of Each Disbursement this Period 550.00
City Pine Island	State MN Zip Code 55963	
Purpose of Disbursement Rent	Category/Type	Transaction ID : D230126
Candidate Name		
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:		

Full Name (Last, First, Middle Initial) C. Jessica Lindeen		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 206 W Russell St		Amount of Each Disbursement this Period 107.20
City Barrington	State IL Zip Code 60010-4233	
Purpose of Disbursement Mileage	Category/Type	Transaction ID : D230038
Candidate Name		
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:		

SUBTOTAL of Disbursements This Page (optional).....	714.95
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 50 OF 68			
	<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)
Obermueller for Congress

Full Name (Last, First, Middle Initial) A. Livingston Holdings, LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 02 / 2014
Mailing Address 4555 Erin Dr Ste 230			Amount of Each Disbursement this Period 2350.00 Transaction ID : D230032
City Saint Paul	State MN	Zip Code 55122-3334	
Purpose of Disbursement Rent		Category/ Type	
Candidate Name			
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:			

Full Name (Last, First, Middle Initial) B. Murphy Vogel Askew Reilly, LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 901 N Washington St			Amount of Each Disbursement this Period 1500.00 Transaction ID : D230027
City Alexandria	State VA	Zip Code 22314-5509	
Purpose of Disbursement Email		Category/ Type	
Candidate Name			
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:			

Full Name (Last, First, Middle Initial) c. Murphy Vogel Askew Reilly, LLC			Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 901 N Washington St			Amount of Each Disbursement this Period 10685.65 Transaction ID : D230028
City Alexandria	State VA	Zip Code 22314-5509	
Purpose of Disbursement Media production		Category/ Type	
Candidate Name			
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:			

SUBTOTAL of Disbursements This Page (optional).....	14535.65
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 51 OF 68			
	<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)
Obermueller for Congress

Full Name (Last, First, Middle Initial) A. Murphy Vogel Askew Reilly, LLC		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 901 N Washington St		Amount of Each Disbursement this Period 5163.33 Transaction ID : D230029
City Alexandria	State VA	
Zip Code 22314-5509	Purpose of Disbursement Media production	Category/ Type
Candidate Name	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:	

Full Name (Last, First, Middle Initial) B. Office Max		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 1271 Promenade PI		Amount of Each Disbursement this Period 79.26 Transaction ID : D230020
City Saint Paul	State MN	
Zip Code 55121-2293	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	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:	

Full Name (Last, First, Middle Initial) c. Office Max		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 1271 Promenade PI		Amount of Each Disbursement this Period 158.52 Transaction ID : D230021
City Saint Paul	State MN	
Zip Code 55121-2293	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	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:	

SUBTOTAL of Disbursements This Page (optional).....	5401.11
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 52 OF 68			
	<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)
Obermueller for Congress

Full Name (Last, First, Middle Initial) A. Office Max		Date of Disbursement M M / D D / Y Y Y Y 07 / 23 / 2014
Mailing Address 1271 Promenade Pl		Amount of Each Disbursement this Period 51.41 Transaction ID : D230125
City Saint Paul	State MN	
Zip Code 55121-2293	Purpose of Disbursement Office Supplies	Category/ Type
Candidate Name	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:	

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 3060 Williams Dr		Amount of Each Disbursement this Period 54.15 Transaction ID : D230013
City Fairfax	State VA	
Zip Code 22031-4648	Purpose of Disbursement Payroll fee	Category/ Type
Candidate Name	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:	

Full Name (Last, First, Middle Initial) c. Paychex		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 3060 Williams Dr		Amount of Each Disbursement this Period 4196.15 Transaction ID : D230015
City Fairfax	State VA	
Zip Code 22031-4648	Purpose of Disbursement Payroll Taxes	Category/ Type
Candidate Name	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:	

SUBTOTAL of Disbursements This Page (optional).....	4301.71
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 53 OF 68	
	<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)
Obermueller for Congress

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 3060 Williams Dr		Amount of Each Disbursement this Period 62.64
City Fairfax	State VA	
Zip Code 22031-4648	Purpose of Disbursement Payroll fee	Transaction ID : D230016
Candidate Name	Category/ Type	
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:		

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 3060 Williams Dr		Amount of Each Disbursement this Period 4023.04
City Fairfax	State VA	
Zip Code 22031-4648	Purpose of Disbursement Payroll Taxes	Transaction ID : D230018
Candidate Name	Category/ Type	
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:		

Full Name (Last, First, Middle Initial) c. Paychex		Date of Disbursement M M / D D / Y Y Y Y 07 / 18 / 2014
Mailing Address 3060 Williams Dr		Amount of Each Disbursement this Period 185.12
City Fairfax	State VA	
Zip Code 22031-4648	Purpose of Disbursement Payroll Taxes	Transaction ID : D230019
Candidate Name	Category/ Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	4270.80
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 54 OF 68			
	<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)
Obermueller for Congress

Full Name (Last, First, Middle Initial) A. Martin Raabe			Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014		
Mailing Address 3131 28th Ave S			Amount of Each Disbursement this Period 63.04		
City Minneapolis	State MN	Zip Code 55406-1917	Transaction ID : D230034		
Purpose of Disbursement Mileage		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) B. Martin Raabe			Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014		
Mailing Address 3131 28th Ave S			Amount of Each Disbursement this Period 96.00		
City Minneapolis	State MN	Zip Code 55406-1917	Transaction ID : D230035		
Purpose of Disbursement Mileage		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

Full Name (Last, First, Middle Initial) c. Red Wing Rotary			Date of Disbursement M M / D D / Y Y Y Y 07 / 19 / 2014		
Mailing Address PO Box 353			Amount of Each Disbursement this Period 200.00		
City Red Wing	State MN	Zip Code 55066-0353	Transaction ID : D230146		
Purpose of Disbursement Catering/meals		Category/ Type			
Candidate Name					
Office Sought:	House <input type="checkbox"/> Senate <input type="checkbox"/> President <input type="checkbox"/>	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
State:	District:				

SUBTOTAL of Disbursements This Page (optional).....	359.04
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 55 OF 68			
	<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)
Obermueller for Congress

Full Name (Last, First, Middle Initial) A. RTW, Inc.		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 8500 Normandale Lake Blvd		Amount of Each Disbursement this Period 1425.00 Transaction ID : D230026
City Minneapolis	State MN	
Zip Code 55437-3813	Purpose of Disbursement Workers compensation insurance	Category/ Type
Candidate Name	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:	

Full Name (Last, First, Middle Initial) B. United Strategies		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address PO Box 8292		Amount of Each Disbursement this Period 3000.00 Transaction ID : D230030
City Minneapolis	State MN	
Zip Code 55408	Purpose of Disbursement Fundraising/communications consultant	Category/ Type
Candidate Name	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:	

Full Name (Last, First, Middle Initial) c. United Strategies		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address PO Box 8292		Amount of Each Disbursement this Period 3000.00 Transaction ID : D230031
City Minneapolis	State MN	
Zip Code 55408	Purpose of Disbursement Fundraising/communications consultant	Category/ Type
Candidate Name	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:	

SUBTOTAL of Disbursements This Page (optional).....	7425.00
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 56 OF 68			
	<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)
Obermueller for Congress

Full Name (Last, First, Middle Initial)

A. USPS

Mailing Address 1310 Sibley Memorial Hwy

City Mendota State MN Zip Code 55150-1414

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 22 / 2014

Amount of Each Disbursement this Period: 300.00

Transaction ID : D230148

Full Name (Last, First, Middle Initial)

B. USPS

Mailing Address 1310 Sibley Memorial Hwy

City Mendota State MN Zip Code 55150-1414

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 22 / 2014

Amount of Each Disbursement this Period: 49.95

Transaction ID : D230149

Full Name (Last, First, Middle Initial)

C. USPS

Mailing Address 1310 Sibley Memorial Hwy

City Mendota State MN Zip Code 55150-1414

Purpose of Disbursement Postage

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify)

State: District:

Date of Disbursement: 07 / 11 / 2014

Amount of Each Disbursement this Period: 52.25

Transaction ID : D230051

SUBTOTAL of Disbursements This Page (optional) 402.20

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 57 OF 68	
	<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)
Obermueller for Congress

Full Name (Last, First, Middle Initial) A. Paychex		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 3060 Williams Dr		Amount of Each Disbursement this Period 7830.00
City Fairfax	State VA	
Zip Code 22031-4648	Purpose of Disbursement Payroll	Transaction ID : D230014
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) B. Emily E Baldwin		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 607 Washington Ave N Unit 514		Amount of Each Disbursement this Period 752.97
City Minneapolis	State MN	
Zip Code 55401-2467	Purpose of Disbursement Salary	Transaction ID : D230043 [MEMO ITEM]
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) c. Sean Herring		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 1788 Hennepin Ave Apt 47		Amount of Each Disbursement this Period 1471.40
City Minneapolis	State MN	
Zip Code 55403-2137	Purpose of Disbursement Salary	Transaction ID : D230045 [MEMO ITEM]
Candidate Name	Category/Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	7830.00
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 58 OF 68			
	<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)
Obermueller for Congress

Full Name (Last, First, Middle Initial) A. Jessica Lindeen		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 206 W Russell St		Amount of Each Disbursement this Period 1682.44
City Barrington	State IL	
Zip Code 60010-4233	Purpose of Disbursement Salary	Transaction ID : D230040 [MEMO ITEM]
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) B. Christopher A. Miller		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 2647 Garfield Ave		Amount of Each Disbursement this Period 613.99
City Minneapolis	State MN	
Zip Code 55408-1330	Purpose of Disbursement Salary	Transaction ID : D230046 [MEMO ITEM]
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) c. Martin Raabe		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 3131 28th Ave S		Amount of Each Disbursement this Period 829.99
City Minneapolis	State MN	
Zip Code 55406-1917	Purpose of Disbursement Salary	Transaction ID : D230036 [MEMO ITEM]
Candidate Name	Category/Type	
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:		

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 59 OF 68			
	<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)
Obermueller for Congress

Full Name (Last, First, Middle Initial) A. Andrew Zabel		Date of Disbursement M M / D D / Y Y Y Y 07 / 01 / 2014
Mailing Address 240 E. 5th St #516		Amount of Each Disbursement this Period 2479.21
City Saint Paul	State MN	Zip Code 55101
Purpose of Disbursement Salary	Category/Type	
Candidate Name	Transaction ID : D230048	
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:	[MEMO ITEM]	

Full Name (Last, First, Middle Initial) B. Paychex		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 3060 Williams Dr		Amount of Each Disbursement this Period 8136.28
City Fairfax	State VA	Zip Code 22031-4648
Purpose of Disbursement Payroll	Category/Type	
Candidate Name	Transaction ID : D230017	
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:		

Full Name (Last, First, Middle Initial) C. Emily E Baldwin		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 607 Washington Ave N Unit 514		Amount of Each Disbursement this Period 752.97
City Minneapolis	State MN	Zip Code 55401-2467
Purpose of Disbursement Salary	Category/Type	
Candidate Name	Transaction ID : D230044	
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:	[MEMO ITEM]	

SUBTOTAL of Disbursements This Page (optional).....	8136.28
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 60 OF 68			
	<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)
Obermueller for Congress

Full Name (Last, First, Middle Initial) A. Kim Greenhoe Hansen		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 9165 Barnes Ave		Amount of Each Disbursement this Period 1777.70
City Inver Grove Heights	State MN	
Zip Code 55077-4011	Purpose of Disbursement Salary	Transaction ID : D230050 [MEMO ITEM]
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) B. Jessica Lindeen		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 206 W Russell St		Amount of Each Disbursement this Period 1682.43
City Barrington	State IL	
Zip Code 60010-4233	Purpose of Disbursement Salary	Transaction ID : D230041 [MEMO ITEM]
Candidate Name	Category/Type	
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:		

Full Name (Last, First, Middle Initial) c. Christopher A. Miller		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 2647 Garfield Ave		Amount of Each Disbursement this Period 613.99
City Minneapolis	State MN	
Zip Code 55408-1330	Purpose of Disbursement Salary	Transaction ID : D230047 [MEMO ITEM]
Candidate Name	Category/Type	
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:		

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 61 OF 68			
	<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)
Obermueller for Congress

Full Name (Last, First, Middle Initial) A. Martin Raabe		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 3131 28th Ave S		Amount of Each Disbursement this Period 829.99
City Minneapolis	State MN	
Zip Code 55406-1917	Purpose of Disbursement Salary	Transaction ID : D230037
Candidate Name	Category/Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Andrew Zabel		Date of Disbursement M M / D D / Y Y Y Y 07 / 15 / 2014
Mailing Address 240 E. 5th St #516		Amount of Each Disbursement this Period 2479.20
City Saint Paul	State MN	
Zip Code 55101	Purpose of Disbursement Salary	Transaction ID : D230049
Candidate Name	Category/Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) C. Jessica Lindeen		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 206 W Russell St		Amount of Each Disbursement this Period 132.10
City Barrington	State IL	
Zip Code 60010-4233	Purpose of Disbursement Reimbursement	Transaction ID : D230039
Candidate Name	Category/Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	132.10
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 62 OF 68			
	<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)
Obermueller for Congress

Full Name (Last, First, Middle Initial) A. Blue Cross Blue Shield		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address PO Box 64560		Amount of Each Disbursement this Period 55.00
City Saint Paul	State MN	
Zip Code 55164-0560	Purpose of Disbursement Health insurance	Transaction ID : D230144
Candidate Name	Category/Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) B. Jessica Lindeen		Date of Disbursement M M / D D / Y Y Y Y 07 / 17 / 2014
Mailing Address 206 W Russell St		Amount of Each Disbursement this Period 66.40
City Barrington	State IL	
Zip Code 60010-4233	Purpose of Disbursement Mileage	Transaction ID : D230143
Candidate Name	Category/Type	
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)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) c. Emily E Baldwin		Date of Disbursement M M / D D / Y Y Y Y 07 / 10 / 2014
Mailing Address 607 Washington Ave N Unit 514		Amount of Each Disbursement this Period 140.00
City Minneapolis	State MN	
Zip Code 55401-2467	Purpose of Disbursement Reimbursement	Transaction ID : D230042
Candidate Name	Category/Type	
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:		

SUBTOTAL of Disbursements This Page (optional).....	140.00
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 63 OF 68			
	<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)
Obermueller for Congress

Full Name (Last, First, Middle Initial) A. Coventry		Date of Disbursement MM / DD / YYYY 07 / 10 / 2014
Mailing Address 6720B Rockledge Dr Ste 700		Amount of Each Disbursement this Period \$ 125.00
City Bethesda	State MD	
Zip Code 20817-1884	Purpose of Disbursement Health insurance	Transaction ID : D230141
Candidate Name	Category/Type	
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)	[MEMO ITEM]
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	Purpose of Disbursement	Transaction ID
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.		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Transaction ID
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).....	\$ 54617.25

**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 68			
	<input type="checkbox"/> 17 <input checked="" type="checkbox"/> 20a <input type="checkbox"/> 18 <input type="checkbox"/> 20b <input type="checkbox"/> 19a <input type="checkbox"/> 20c <input type="checkbox"/> 19b <input type="checkbox"/> 21				

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NAME OF COMMITTEE (In Full)
Obermueller for Congress

Full Name (Last, First, Middle Initial) A. Edward Culhane		Date of Disbursement M M / D D / Y Y Y Y 07 / 08 / 2014
Mailing Address 4857 Dupont Ave S		Amount of Each Disbursement this Period 900.00 Transaction ID : D228837
City Minneapolis	State MN Zip Code 55419-5325	
Purpose of Disbursement Refund	Candidate Name	Category/ Type
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:		

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	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.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State Zip Code	
Purpose of Disbursement	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).....	900.00
TOTAL This Period (last page this line number only).....	900.00

**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 68			
	<input type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input checked="" type="checkbox"/> 19b 21				

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NAME OF COMMITTEE (In Full)
Obermueller for Congress

Full Name (Last, First, Middle Initial) A. MINNESOTA DEMOCRATIC-FARMER-LABOR PARTY		Date of Disbursement M M / D D / Y Y Y Y 07 / 03 / 2014
Mailing Address 255 Plato Blvd E		Amount of Each Disbursement this Period 4000.00 Transaction ID : D230033
City Saint Paul	State MN	
Zip Code 55107-1623	Purpose of Disbursement Contribution	Category/ Type
Candidate Name	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:	

Full Name (Last, First, Middle Initial) B.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	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.		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	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).....	4000.00
TOTAL This Period (last page this line number only).....	4000.00

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Obermueller for Congress** Transaction ID : L574

LOAN SOURCE Full Name (Last, First, Middle Initial) Michael E. Obermueller PERS FUNDS	[PERSONAL FUNDS]	Election: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3874 Danbury Trl		

City	State	ZIP Code
Eagan	MN	55123-1550

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
30000.00	5000.00	25000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 04 / D 15 / Y 2012	M M / D D / Y none	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: <input style="width: 100%;" type="text"/>

SUBTOTALS This Period This Page (optional).....	<input style="width: 100%;" type="text" value="25000.00"/>
TOTALS This Period (last page in this line only).....	<input style="width: 100%;" type="text"/>

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

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

FOR LINE NUMBER:
(check only one)

13a
 13b

NAME OF COMMITTEE (In Full)

Transaction ID : L596

Obermueller for Congress

LOAN SOURCE Full Name (Last, First, Middle Initial)

Michael E. Obermueller

Election: 2012

Primary
 General
 Other (specify) ▼

Mailing Address
3874 Danbury Trl

City State ZIP Code
Eagan MN 55123-1550

Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period
2500.00 0.00 2500.00

TERMS

Date Incurred Date Due Interest Rate Secured:
06 / 30 / 2012 / none 0.00 % (apr) Yes No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional)..... ▶ 2500.00
TOTALS This Period (last page in this line only)..... ▶

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

SCHEDULE C (FEC Form 3)
LOANS

NAME OF COMMITTEE (In Full) **Obermueller for Congress** Transaction ID : L625

LOAN SOURCE Full Name (Last, First, Middle Initial) Michael E. Obermueller PERS FUNDS	[PERSONAL FUNDS]	Election: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address 3874 Danbury Trl		

City	State	ZIP Code
Eagan	MN	55123-1550

Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period
5000.00	0.00	5000.00

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
M 09 / D 30 / Y 2012	M M / D D / Y none	0.00 % (apr)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding:

SUBTOTALS This Period This Page (optional).....	5000.00
TOTALS This Period (last page in this line only).....	32500.00

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.