PAGE 1 / 43

#### **REPORT OF RECEIPTS AND DISBURSEMENTS**

PONIVI 3	For An Autho	rized Com	mittee		Office Use Only  12FE4M5				
1. NAME OF TY COMMITTEE (in full)	PE OR PRINT ▼		ample: If typing, t er the lines.	ype 12F]	E4M5				
Gerson for Congress						ı			
ADDRESS (number and street)	PO Box 1465								
Charle if different									
Check if different than previously reported. (ACC)	Burnsville			MN	5533	7			
2. FEC IDENTIFICATION NUM	IBER ▼	CITY ▲		STATE 4		ZIP CODE ▲			
C C00523738	3.	IS THIS REPORT	NEW (N)		MENDED A)	STATE ▼ DISTRICT  MN  02  1			
4. TYPE OF REPORT (Choose	se One) (b)	12-Day PRF	-Election Report f	or the					
(a) Quarterly Reports:						П			
X April 15 Quarterly Rep	port (Q1)	Ш	Primary (12P)	Ger	eral (12G)	Runoff (12R)			
			Convention (12C	) Spe	cial (12S)				
July 15 Quarterly Rep	ort (Q2)		M M / D	D / Y Y	Y " Y	in the			
October 15 Quarterly	Report (Q3)	Election on				State of			
January 31 Year-End	Report (YE) (c)	30-Day <b>POS</b>	T-Election Report	for the:					
		П	General (30G)		off (30R)	Special (30S)			
			deneral (30d)	Hui	ion (30H)	Special (303)			
Termination Report (Ti	ER)	Election on	M M / D	D / Y Y	Y	in the State of			
5. Covering Period 01	/ 01 / Y	<sup>Y</sup> 2023	through	M M / D 3	D / Y 1	Y Y Y Y 2023			
I certify that I have examined this  Type or Print Name of Treasurer	Report and to the b Gerson, David, , ,	est of my kn	nowledge and belie	ef it is true, corre	ect and com	nplete.			
	David, , ,		[Electronically Filed	[] Date	M M /	12 / Y Y Y Y Y Y 2023			
NOTE: Submission of false, erroneou	s, or incomplete info	rmation may	subject the person	signing this Repo	rt to the per	nalties of 52 U.S.C. §30109			
Office					_	FO FORM 6			
Use Only						EC FORM 3 Revised 05/2016)			

#### **SUMMARY PAGE**

of Receipts and Disbursements

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name Gerson for Congress

F	eport	t Covering the Period: From:	01 01 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	M 03 M / D 7 Y Y 2023 Y
			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))	0.00	0.00
	(b)	Total Contribution Refunds (from Line 20(d))	0.00	0.00
	(c)	Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	0.00	0.00
7.	Net	Operating Expenditures		
	(a)	Total Operating Expenditures (from Line 17)	0.00	0.00
	(b)	Total Offsets to Operating Expenditures (from Line 14)	0.00	0.00
	(c)	Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	0.00	0.00
8.		sh on Hand at Close of porting Period (from Line 27)	0.00	
9.	the	ots and Obligations Owed <b>TO</b> Committee (Itemize all on medule C and/or Schedule D)	0.00	
10.	the	ots and Obligations Owed BY Committee (Itemize all on aedule C and/or Schedule D)	171460.36	

#### 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 05/2016)

PAGE 3 / 43

Write or Type Committee Name

#### **Gerson for Congress**

	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)	0.00	0.00
	(ii) Unitemized	0.00	0.00
	(iii) TOTAL of contributions from individuals	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(d) The Candidate(e) TOTAL CONTRIBUTIONS	0.00	0.00
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	0.00
2.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00
3.	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
1.	OFFSETS TO OPERATING		
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00
5.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00
6.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	0.00	0.00

#### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3 (Revised 05/2016)

PAGE 4 / 43

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	0.00	0.00
18.	TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19	LOAN REPAYMENTS:		
10.	(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	0.00	0.00
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	0.00	0.00
	(Such as FAOS)		, ,
	(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))	0.00	0.00
21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	0.00	0.00
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPOR	RTING PERIOD	0.00
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	0.00
25.	SUBTOTAL (add Line 23 and Line 24)		0.00
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	0.00
27.	CASH ON HAND AT CLOSE OF REPORTING	G PERIOD	0.00

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

FOR LINE NUMBER: (check only one)

PAGE 5

13a

			Detailed Garrinary 1 a	age	13b
NAME OF COMMITTEE (In Full) Gerson for Congress			Transa	action ID : SC/10.4392	
9					
LOAN SOURCE Full Name (Last, First, Mic	ddle Initial)				
Gerson, David, Adam, ,				Primary	
Mailing Address				General Other (appoint)	
PO Box 1465				Other (specify)	
City	State	ZIP Code	•	X Personal Funds of the	Candidate
Burnsville	MN	55337		T Grooman's array or the	
Original Amount of Loan	Cumulative Pa	yment To D	ate Ba	lance Outstanding at Close of T	his Period
16554.96			0.00	1655	4.96
9 9	7	7		1	
TERMS Date Incurred		Date Due	Interest Ra (If none, ent		d:
M05M / D29D / Y Ž01Ž Y	M M / D D	/ Y 1/1	(/20ž0 <sup>Y</sup>	0.00 % (apr) Yes	s x No
List All Endorsers or Guarantors (if any) t	o Loan Source				
Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
		<u> </u>	Amount		
City State	ZIP Code		Guaranteed Outstanding:	, , , , , , , , , , , , , , , , , , , ,	
2. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address		(	Occupation		
			-		
			Amount Guaranteed		
City	ZIP Code		Outstanding:	9 9	
3. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address		(	Occupation		
	T		Amount Guaranteed		7
City	ZIP Code		Outstanding:	7 7	
4. Full Name (Last, First, Middle Initial)	'	1	Name of Employer		
Mailing Address		(	Occupation		
			Amount		
City State	ZIP Code		Guaranteed		
Oity	Zii Oodc		Outstanding:	7	
SUBTOTALS This Period This Page (optional).			······	16554	4.96
TOTALS This Period (last page in this line only	v)			7 7 7	
12.3.120 mile oni	···				-
Carry outstanding balance only to LINE 3, Sci	nedule D, for this	s line. If no	Schedule D, carry for	rward to appropriate line of Si	ummary.

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

FOR LINE NUMBER: (check only one)

PAGE

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13a 13b

OF

NAME OF COMMITTEE (In Full)  Gerson for Congress			Transa	action ID : SC/10.4365
Gerson, David, Adam,		Idle Initial)	☐ Memo Iten	n Election: 2012  x Primary General
Mailing Address PO Box 1465				Other (specify) ▼
City		State	ZIP Code	Personal Funds of the Candidate
Burnsville Original Amount of Loan		Cumulative Pay	55337	lance Outstanding at Close of This Period
	0000.00	Cumulative Ta	0.00	10000.00
TERMS Date Incurred			ate Due Interest Ra	
M07M / D19D / Y Ž0	01Ž <sup>Y</sup>	M M / D D		0.00 % (apr) Yes X No
List All Endorsers or Guarant	` ,	o Loan Source		
1. Full Name (Last, First, Midd	dle Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7
2. Full Name (Last, First, Middle	le Initial)		Name of Employer	
Mailing Address			Occupation	
Cit.	04-4-	710 01-	Amount Guaranteed	
City	State	ZIP Code	Outstanding:	7
3. Full Name (Last, First, Middl	le Initial)		Name of Employer	
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	7
4. Full Name (Last, First, Midd	le Initial)		Name of Employer	
Mailing Address			Occupation	
			Amount	
City	State	ZIP Code	Guaranteed Outstanding:	7
SUBTOTALS This Period This Page	ge (optional)		<b></b>	10000.00
TOTALS This Period (last page in	this line only	·)		7 7 7
Carry outstanding balance only to	n LINE 3 Sch	edule D. for this	line. If no Schedule D. carry for	rward to appropriate line of Summary.

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

PAGE 7 OF
FOR LINE NUMBER:
(check only one)

**X** 13a

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4381
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2012
Gerson, David, Adam, ,	madio miliary	Memo Item    Clection: 2012
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code  F5007  Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00	l ,	0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M07 <sup>M</sup> / D24 <sup>D</sup> / Y Ž01Ž Y	M M / D D	/ Y YNA Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City State	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
CURTOTAL C This Deviced This Dags (entires	n	
SUBTOTALS This Period This Page (optiona	1)	5000.00
TOTALS This Period (last page in this line o	nly)	······································
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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FOR LINE NUMBER: (check only one)

13a

				Detailed of	arriiriary r aş					13b
AME OF COMMITTEE (In Full) Gerson for Congress					Transac	tion ID	: SC/10.446	8		
LOAN SOURCE Full Name (Last, Gerson, David, Adam, ,  Mailing Address PO Box 1465	First, Mid	dle Initial)			Memo Item	G	on: 2012 rimary eneral ther (specif	y) <b>▼</b>		
City Burnsville		State MN	ZIP Cod 55337	e		×	Personal Fu	nds of the	Cano	didate
Original Amount of Loan	5.00	Cumulative Pay	yment To I	Oate 0.00	Bala	ince Ou	tstanding at		This I	Period
TERMS Date Incurred  M07 <sup>M</sup> / D24 <sup>D</sup> / Y Z012	Y	D D D	Pate Due		nterest Rate If none, enter 0.		% (apr)	Secure		No
List All Endorsers or Guarantors		Loan Source								
1. Full Name (Last, First, Middle I	nitial)			Name of Emp	lloyer					
Mailing Address				Occupation						
City	State	ZIP Code		Amount Guaranteed Outstanding:		,	,			
2. Full Name (Last, First, Middle In	itial)	•		Name of Emp	loyer					
Mailing Address				Occupation						
City	State	ZIP Code		Amount Guaranteed Outstanding:		,	7			
3. Full Name (Last, First, Middle In	itial)			Name of Emp	loyer					
Mailing Address				Occupation						
City	State	ZIP Code		Amount Guaranteed Outstanding:		7	7			
4. Full Name (Last, First, Middle In	itial)	•		Name of Emp	loyer					
Mailing Address				Occupation						
City	State	ZIP Code		Amount Guaranteed Outstanding:		7	7			
SUBTOTALS This Period This Page (					··•			7	5.00	
Carry outstanding balance only to LII	NE 3, Sch	edule D, for this	line. If n	o Schedule D	, carry forv	vard to	appropriat	e line of S	umm	arv.

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

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FOR LINE NUMBER: (check only one)

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		13b
AME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4128
LOAN SOURCE Full Name (Last, First, M Gerson, David, Adam, , Mailing Address PO Box 1465	iddle Initial)	☐ Memo Item  Election: 2012  ## Primary  General  Other (specify) ▼
City Burnsville	State MN	ZIP Code 55337  Personal Funds of the Candidate
Original Amount of Loan 5000.00	Cumulative Pay	yment To Date  Balance Outstanding at Close of This Period  0.00  5000.00
TERMS Date Incurred  M07M / D26D / Y Z012 Y	M " M / D " D	Date Due Interest Rate (If none, enter 0)  One of the property
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
City	ZIP Code	Amount Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
City	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)  FOTALS This Period (last page in this line on		, , , , , , , , , , , , , , , , , , , ,
		s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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13a

OF

						_				130
AME OF COMMITTEE (In Full) Gerson for Congress					Trans	saction	ID : SC/10.4	389		
LOAN SOURCE Full Name (Last, First Gerson, David, Adam, ,  Mailing Address PO Box 1465	st, Middle	e Initial)			Memo Ite	em Ele	ction: 2012 Primary General Other (spec			
	C+	toto I	ZID Cod	do.						
City Burnsville		tate MN	ZIP Cod 55337	ie		×	Personal	Funds of	the Car	ndidate
Original Amount of Loan		Cumulative Pay	ment To	Date		Balance (	Outstanding	at Close	of This	Period
5000.00		7		0.00			,		5000.00	_
TERMS Date Incurred		Da	ate Due		Interest F			Se	cured:	
M08 <sup>M</sup> / D01 <sup>D</sup> / Y Z012 Y	М	M / D D	/ Y	<sup>Y</sup> na <sup>Y</sup> Y		0.00	% (apr)		Yes	<b>x</b> No
List All Endorsers or Guarantors (if a	any) to L	oan Source								
1. Full Name (Last, First, Middle Initia	al)			Name of Em	ployer					
Mailing Address				Occupation						
				Amount						
City	ate	ZIP Code	Guaranteed Outstanding:							
2. Full Name (Last, First, Middle Initial	1)			Name of Employer						
Mailing Address				Occupation						
	1			Amount Guaranteed	-					
City	ate	ZIP Code		Outstanding:		7	7			
3. Full Name (Last, First, Middle Initial	1)			Name of Em	ployer					
Mailing Address				Occupation						
City.	-1-	ZID Code		Amount Guaranteed						
,		ZIP Code		Outstanding:		7	7			
4. Full Name (Last, First, Middle Initial	1)			Name of Em	ployer					
Mailing Address				Occupation						
C:A.	ate	ZIP Code		Amount Guaranteed						
City	ale	ZIP Code		Outstanding:		7	7			
SUBTOTALS This Period This Page (opti	onal)				····• [		7	7	5000.00	)
TOTALS This Period (last page in this lin	ie only)				▶		7	7		<u>الــٰ</u>
Carry outstanding balance only to LINE	3, Sched	lule D, for this	line. If r	no Schedule	D, carry f	orward	to appropri	ate line	of Sum	mary.

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

FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4129
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2012
Gerson, David, Adam, ,	Wilder Filler	☐ Memo Item
Mailing Address PO Box 1465		Other (specify) ▼
City	State	ZIP Code  Scool Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00		0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M08M / D10D / Y Z01Ž Y	M M / D D	/ YNAY Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if an	y) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
CURTOTAL O This Deviced This Deve (aution	-10	
SUBTOTALS This Period This Page (option	aı)	5000.00
TOTALS This Period (last page in this line	only)	······································
Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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**X** 13a 13b

43

Transaction ID: SC/10.4470 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 6.00 0.00 6.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 <sup>D</sup>10<sup>D</sup> <sup>M</sup>80<sup>M</sup> Ž01Ž YNA Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 6.00 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.

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

FOR LINE NUMBER: (check only one)

**PAGE** 

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**X** 13a 13b

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Transaction ID: SC/10.4130 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 1000.00 0.00 1000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D17D <sup>M</sup>80<sup>M</sup> Ž01Ž YNA Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 1000.00 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.

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

FOR LINE NUMBER: (check only one)

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13a

			Detailed Summary	rage		13b
NAME OF COMMITTEE (In Full)			Tran	saction ID : SC/10.413	31	
Gerson for Congress						
LOAN SOURCE Full Name (Last, First, Mid	ldle Initial)		☐ Memo Ite			
Gerson, David, Adam, ,				X Primary General		
Mailing Address PO Box 1465				Other (speci	fy) ▼	
City	State	ZIP Code	9			
Burnsville	MN	55337		Y Personal Fu	unds of the Ca	ndidate
Original Amount of Loan	Cumulative Pay	yment To D	ate E	Balance Outstanding a	t Close of This	s Period
1000.00	7		0.00	2	1000.0	0
TERMS Date Incurred	D	Date Due	Interest F (If none, e		Secured:	
M 08 <sup>M</sup> / D20 <sup>D</sup> / Y Z01Z Y	M M / D D	/ Y	NA Y	0.00 % (apr)	Yes	× No
List All Endorsers or Guarantors (if any) to	o Loan Source					
1. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address		-	Occupation			
			Amount			1
City	ZIP Code		Guaranteed Outstanding:	7		
2. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address			Occupation			
			Amount			1
City	ZIP Code		Guaranteed Outstanding:	7 7		
3. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address			Occupation			
			Amount			1
City	ZIP Code		Guaranteed Outstanding:			
4. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address			Occupation			
			Amount			1
City	ZIP Code		Guaranteed Outstanding:	, , , , ,		
SUBTOTALS This Period This Page (optional)					1000.0	0
			<u>_</u>	7	1000.0	0
TOTALS This Period (last page in this line only	·) ······		·····•	7	7	
Carry outstanding balance only to LINE 3, Sch	edule D, for this	s line. If no	Schedule D, carry t	forward to appropriat	te line of Sum	mary.

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

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Transaction ID: SC/10.4442 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 479.33 0.00 479.33 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 <sup>D</sup>22<sup>D</sup> M 02M ž013 Y 1/1/2020 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 479.33 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.

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

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4444
LOAN SOURCE Full Name (Last, First, I	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item    Clection: 2014	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code  F5007  Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
3000.00	,	0.00 3000.00
TERMS Date Incurred	[	Date Due Interest Rate Secured: (If none, enter 0)
M02M / D25D / Y Ž01Š Y	M M / D D	7
List All Endorsers or Guarantors (if any	) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	<u> </u>	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
CURTOTALC This Deviced This Days (autisms	.n	
SUBTOTALS This Period This Page (optional		3000.00
TOTALS This Period (last page in this line of	nly)	······································
Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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			Detailed Garrinary 1	age	13b
NAME OF COMMITTEE (In Full)	Transaction ID : SC/10.4464				
Gerson for Congress					
LOAN SOURCE Full Name (Last, First, Mic	ddle Initial)		☐ Memo Ite	em Election: 2014	
Gerson, David, Adam, ,				x Primary	
				General	
Mailing Address PO Box 1465				Other (specify) ▼	
City	State	ZIP Code	)	- I - I - I - I - I - I - I - I - I - I	0 "11
Burnsville	MN	55337		Personal Funds of the	Candidate
Original Amount of Loan	Cumulative Pag	yment To D	ate B	Balance Outstanding at Close of	This Period
3000.00			0.00	30	00.00
TERMS Date Incurred	D	Date Due	Interest R (If none, er		ed:
M03M / D26D / Y Ž01Š Y	M M / D D	/ Y 1/1	(/20ž0 <sup>Y</sup>	0.00	es X No
List All Endorsers or Guarantors (if any) t	o Loan Source			· · · ·	
1. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
		<u> </u>	Amount		
City	ZIP Code		Guaranteed Outstanding:	7 7	
2. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
		,	Amount		
City	ZIP Code		Guaranteed  Outstanding:	7 7 7 7	
3. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
			Amount		
City	ZIP Code		Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
			Amount		_
City State	ZIP Code		Guaranteed Outstanding:	7 7 7	
	'	<u>'</u>			
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TOTALS This Period (last page in this line only	/)		······	7 7	
Carry outstanding balance only to LINE 3, Sch	nedule D. for this	s line. If no	Schedule D. carry fo	orward to appropriate line of S	Summarv.

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

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4502
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item    Clection: 2014	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code  F5007  Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
4000.00	J,	0.00 4000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
<sup>M</sup> 04 <sup>M</sup> / □18□ / Y Ž013 Y	M M / D D	/ Y 1½1/2Ŏ Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any	) to Loan Source	
Full Name (Last, First, Middle Initial)	,	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (options		
ODDIVIALS THIS PERIOD THIS Page (options	ai)	4000.00
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Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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Transaction ID: SC/10.4545 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 4000.00 0.00 4000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 <sup>D</sup>13<sup>D</sup> M 05M ž013 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 4000.00 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.

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

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		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4591
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item    Clection: 2014	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code  F5007  Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00	,	0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M06 <sup>M</sup> / D10 <sup>D</sup> / Y Ž013 Y	M M / D D	/ Y 1/1/20 Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any	) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
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Carry outstanding balance only to LINE 3, S	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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OF

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	ME OF COMMITTEE (In Full) Serson for Congress				Tran	saction ID : SC/10.4622
		-· · • •				T =
	LOAN SOURCE Full Name (Last, Gerson, David, Adam, ,	First, Mic	ldle Initial)		☐ Memo Ite	em Election: 2014  x Primary
						General
	Mailing Address PO Box 1465					Other (specify)
	City		State	ZIP Co	de	Personal Funds of the Candidate
	Burnsville		MN	55337		reisonal runus of the Candidate
	Original Amount of Loan		Cumulative Pay	yment To	Date E	Balance Outstanding at Close of This Period
	131	.12	,		0.00	131.12
	TERMS Date Incurred		D	Date Due	Interest F (If none, e	
	M06 <sup>M</sup> / D30 <sup>D</sup> / Y Ž013	Y	M M / D D	/ Y	1)1/20 Y	0.00 % (apr) Yes No
	List All Endorsers or Guarantors	(if any) to	o Loan Source			
	1. Full Name (Last, First, Middle I	nitial)			Name of Employer	
	Mailing Address				Occupation	
					Amount	
	City	State	ZIP Code		Guaranteed Outstanding:	7
	2. Full Name (Last, First, Middle In	itial)			Name of Employer	
	Mailing Address				Occupation	
					Amount	
	City	State	ZIP Code		Guaranteed Outstanding:	, , , , , , , ,
	3. Full Name (Last, First, Middle In	itial)	'		Name of Employer	
	Mailing Address				Occupation	
					Amount	
	City	State	ZIP Code		Guaranteed Outstanding:	
	4. Full Name (Last, First, Middle In	itial)	'		Name of Employer	
	Mailing Address				Occupation	
				Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	, , , , , , , , , , , , , , , , , , , ,
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_	Carry outstanding balance only to LI	NE 3, Sch	edule D, for this	s line. If	no Schedule D, carry f	orward to appropriate line of Summary.
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Use separate schedule(s) for each category of the Detailed Summary Page

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5169
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item    Clection: 2014	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code  F5007  Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00		0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M07 <sup>M</sup> / D05 <sup>D</sup> / Y 2013 Y	M M / D D	0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any	/) to Loan Source	
1. Full Name (Last, First, Middle Initial)	,	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
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SOBIOIALS This Period This Page (option	aı)	5000.00
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Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5170
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	☐ Memo Item    Clection: 2014   ★ Primary   General	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code  Scool Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00		0.00 5000.00
TERMS Date Incurred	С	Date Due Interest Rate Secured:
M07 <sup>M</sup> / D29 <sup>D</sup> / Y Ž013 Y	M M / D D	/
List All Endorsers or Guarantors (if any	) to Loan Source	
1. Full Name (Last, First, Middle Initial)	,	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (options		
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Carry outstanding balance only to LINE 3,	Schedule D, for this	s line. If no Schedule D, carry forward to appropriate line of Summary.

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			Detailed durinitary i	age	13b
NAME OF COMMITTEE (In Full)			Trans	action ID : SC/10.5172	
Gerson for Congress					
LOAN SOURCE Full Name (Last, First, Mic	ldle Initial)		☐ Memo Ite	m Election: 2014	
Gerson, David, Adam, ,				x Primary	
				General	
Mailing Address PO Box 1465				Other (specify)	
City	State	ZIP Code	)		0 "1.
Burnsville	MN	55337		Personal Funds of the	Candidate
Original Amount of Loan	Cumulative Pag	yment To D	ate B	alance Outstanding at Close of T	his Period
5000.00			0.00	5000	0.00
TERMS Date Incurred	D	Date Due	Interest R		<u></u> :
M08M / P19P / Y Ž01Š Y	M M / D D	/ Y 1		0.00 % (apr) Yes	x No
List All Endorsers or Guarantors (if any) to	o Loan Source				
1. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
		ļ.	Amount		
City	ZIP Code		Guaranteed Outstanding:	7 7 7	
2. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
			Amount		
City State	ZIP Code		Guaranteed Outstanding:	7 7 7 7 7	
3. Full Name (Last, First, Middle Initial)	'		Name of Employer		
Mailing Address			Occupation		
			Amount		
City State	ZIP Code		Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address			Occupation		
			Amount		_
City	ZIP Code		Guaranteed Outstanding:	7	
SUBTOTALS This Period This Page (optional)			······································	5000	0.00
TOTALS This Period (last page in this line only	·)		······	7 7	
Carry outstanding balance only to LINE 3, Sch	nedule D, for this	s line. If no	Schedule D, carry fo	orward to appropriate line of Su	ummary.

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

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		13b		
AME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5173		
LOAN SOURCE Full Name (Last, First, Mailing Address PO Box 1465	Middle Initial)	☐ Memo Item		
City Burnsville	State MN	ZIP Code 55337  Personal Funds of the Candidate		
Original Amount of Loan 5000.00	Cumulative Pa	ayment To Date  Balance Outstanding at Close of This Period  0.00  5000.00		
TERMS Date Incurred  M09M / D12D / Y Z013 Y	M M / D D	Date Due Interest Rate (If none, enter 0)  O / Y 1/1/20 Y 0.00 % (apr) Yes X 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	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	ZIP Code	Amount Guaranteed Outstanding:		
UBTOTALS This Period This Page (optional)				
	Schedule D. for thi	is line. If no Schedule D, carry forward to appropriate line of Summary.		

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

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	13b

NAME OF COMMITTEE (In Gerson for Congres			Trans	action ID : SC/10.5174	
Gerson, David, A	•	☐ Memo Iter	Election: 2014  X Primary General		
Mailing Address PO Box 1465				Other (specify)	
City		State	ZIP Code	▼ Personal Funds of the Candidate	
Burnsville		MN	55337	1 Cradital Funds of the Candidate	
Original Amount of Loa	an	Cumulative Page	yment To Date Ba	alance Outstanding at Close of This Period	
	3000.00		0.00	3000.00	
TERMS Date Inc	urred	С	Pate Due Interest Ra (If none, en		
M09M / D30D /	<sup>Y</sup> ž01š <sup>Y</sup>	M M / D D		0.00 % (apr) Yes X No	
List All Endorsers or C	, ,,	o Loan Source			
1. Full Name (Last, Fire	st, Middle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed Outstanding:	, , , , , , , ,	
2. Full Name (Last, Firs	t, Middle Initial)		Name of Employer	Name of Employer	
Mailing Address			Occupation		
0:1	0	710 0 1	Amount Guaranteed		
City	State	ZIP Code	Outstanding:	9 9	
3. Full Name (Last, Firs	t, Middle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed		
•		Zir Code	Outstanding:	7	
4. Full Name (Last, Firs	t, Middle Initial)		Name of Employer		
Mailing Address			Occupation		
City	State	ZIP Code	Amount Guaranteed		
City	State	ZIP Code	Outstanding:	9 9	
SUBTOTALS This Period	This Page (optional)			3000.00	
TOTALS This Period (last	page in this line only	v)	· · · · · · · · · · · · · · · · · · ·	9 9 555	
Carry outstanding halance	a only to LINE 2 Sob	nedule D. for this	s line If no Schedule D. correcte	rward to appropriate line of Summary.	
Carry outstanding palance	e only to LINE 3. Sch	iedule D, for this	s ime. ii no Schedule D, carry fo	rward to appropriate line of Summary.	

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5202
LOAN SOURCE Full Name (Last, First, N	liddle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item    Clection: 2014	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code  F5007  Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00		0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured:
M10M / D04D / Y Ž013 Y	M M / D D	/ Y 1ÿ1/2ŏ Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
2. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
	1	Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	· '	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
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TOTALS This Period (last page in this line or	nly)	······································
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NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID: SC/10.5203
		·
LOAN SOURCE Full Name (Last, First, Mic Gerson, David, Adam, ,	ldle Initial)	☐ Memo Item Election: 2014   ▼ Primary
		General Other (consent to
Mailing Address PO Box 1465		Other (specify) ▼
City	State	ZIP Code  ** Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pay	rment To Date Balance Outstanding at Close of This Period
5000.00	7	0.00 5000.00
TERMS Date Incurred	С	ate Due Interest Rate Secured: (If none, enter 0)
M10M / D16D / Y Ž01Š Y	M M / D D	/ Y 1/1/20 Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to	o Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional).		5000.00
TOTALS This Period (last page in this line only	y)	······································
Carry outstanding balance only to LINE 3, Sch	edule D, for this	line. If no Schedule D, carry forward to appropriate line of Summary.

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

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FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5204
LOAN SOURCE Full Name (Last, First, I	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item    Clection: 2014	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code  F5007  Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00	l ,	0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M10M / D23D / Y Ž01Š Y	M M / D D	/ Y 1ÿ1/2ŏ Y 0.00
List All Endorsers or Guarantors (if any	) to Loan Source	
Full Name (Last, First, Middle Initial)	,	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
	I	Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
CURTOTAL C. This Deviced This Device (entires	Λ.	
SUBTOTALS This Period This Page (optional		5000.00
TOTALS This Period (last page in this line of	nly)	······································
Carry outstanding balance only to LINE 3, 5	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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OF

						130			
	ME OF COMMITTEE (In Full) Serson for Congress				Trans	saction ID : SC/10.5205			
Ľ									
	LOAN SOURCE Full Name (Last, Gerson, David, Adam, ,	First, Mic	ldle Initial)		☐ Memo Ite	m Election: 2014  x Primary			
						General			
	Mailing Address PO Box 1465					Other (specify)			
City State ZIP Coc			de	✗ Personal Funds of the Candidate					
	Burnsville		MN	55337		1 ersonal i unus of the Candidate			
	Original Amount of Loan		Cumulative Pay	yment To	Date B	alance Outstanding at Close of This Period			
	5000	0.00			0.00	5000.00			
	TERMS Date Incurred		D	Date Due	Interest R (If none, er				
	M11M / D04D / Y Ž01Š	Y	M M / D D	/ Y	1)1/20 Y	0.00 % (apr) Yes No			
	List All Endorsers or Guarantors	(if any) to	o Loan Source						
	1. Full Name (Last, First, Middle I				Name of Employer				
	Mailing Address				Occupation				
					Amount				
	City	State	ZIP Code		Guaranteed Outstanding:				
	2. Full Name (Last, First, Middle In	itial)			Name of Employer				
	Mailing Address				Occupation				
					Amount				
•	City	State	ZIP Code		Guaranteed Outstanding:				
	3. Full Name (Last, First, Middle In	itial)			Name of Employer				
	Mailing Address				Occupation				
					Amount				
	City	State	ZIP Code		Guaranteed Outstanding:				
	4. Full Name (Last, First, Middle In	itial)			Name of Employer				
	Mailing Address				Occupation				
					Amount				
	City	State	ZIP Code		Guaranteed Outstanding:	9			
			•		_				
SI	UBTOTALS This Period This Page (	optional)			······	5000.00			
т	OTALS This Period (last page in this	s line only	·)		······	, , , , , , , , , , , , , , , , , , , ,			
С	arry outstanding balance only to LI	NE 3, Sch	nedule D, for this	s line. If	no Schedule D, carry fo	prward to appropriate line of Summary.			
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Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE NUMBER: (check only one)

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OF

		130
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5206
		I
LOAN SOURCE Full Name (Last, First, Mic Gerson, David, Adam, ,	ddle Initial)	☐ Memo Item
Mailing Address PO Box 1465		General Other (specify) ▼
City	State	ZIP Code
Burnsville	MN	55337 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period
4000.00	2	0.00 4000.00
TERMS Date Incurred	С	ate Due Interest Rate Secured: (If none, enter 0)
M11M / D13D / Y Ž01Š Y	M M / D D	/ Y 1/1/20 Y 0.00
List All Endorsers or Guarantors (if any) t	o Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	-	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)		4000.00
TOTALS This Period (last page in this line only	/)	······································
Carry outstanding balance only to LINE 3, Sci	nedule D, for this	line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

NAME OF COMMITTEE (In F Gerson for Congress			Transa	action ID : SC/10.5207				
Gerson, David, Ad	•	☐ Memo Iter	n Election: 2014  x Primary  General					
Mailing Address PO Box 1465				Other (specify) ▼				
City		State	ZIP Code	X Personal Funds of the Candidate				
Burnsville		MN	55337					
Original Amount of Loan		Cumulative Page		alance Outstanding at Close of This Period				
	3000.00		0.00	3000.00				
TERMS Date Incu	rred	С	Pate Due Interest Ra					
M11M / D19D /	<sup>Y</sup> Ž013 <sup>Y</sup>	M M / D D	/ Y 1ў1/2Ŏ Y	0.00 % (apr) Yes X No				
List All Endorsers or Gu	· · · · · · · · · · · · · · · · · · ·	o Loan Source						
1. Full Name (Last, First	t, Middle Initial)		Name of Employer					
Mailing Address			Occupation	Occupation				
City	State	ZIP Code	Amount Guaranteed Outstanding:	Guaranteed				
2. Full Name (Last, First,	Middle Initial)		Name of Employer					
Mailing Address			Occupation					
		T	Amount Guaranteed					
City	State	ZIP Code	Outstanding:	9 9 9				
3. Full Name (Last, First,	Middle Initial)		Name of Employer					
Mailing Address			Occupation					
City	State	ZIP Code	Amount Guaranteed					
City		ZIF Code	Outstanding:	9 9 9				
4. Full Name (Last, First,	Middle Initial)		Name of Employer					
Mailing Address			Occupation	Occupation				
City	State ZIP Code		Amount Guaranteed					
Oity	State	Zii Oode	Outstanding:	9 9				
SUBTOTALS This Period Th	nis Page (optional)			3000.00				
TOTALS This Period (last p	age in this line only	·) ·······		, , , , ,				
Carry outstanding balance	only to LINE 2 C-L	nodulo D. for #1-1	a line If no Cohodule D. source for	rward to appropriate line of Comme				
Carry outstanging balance	UNITY TO LINE 3, SCh	ieauie D, for this	s line. It no Schedule D, carry to	rward to appropriate line of Summary.				

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

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				,	13b			
NAME OF COMMITTEE (In Full) Gerson for Congress			Tra	nsaction ID : SC/10.5208				
LOAN SOURCE Full Name (Last, First, Mid	Idle Initial)			Election: 2044				
Gerson, David, Adam, ,	due iriital)		☐ Memo I	Item Election: 2014  x Primary  General				
Mailing Address PO Box 1465				Other (specify)				
City	State	ZIP Code	)	Y Personal Funds of the Cand	lidate			
Burnsville	MN	55337						
Original Amount of Loan	Cumulative Pay	yment To D		Balance Outstanding at Close of This F	Period			
4000.00	9	9	0.00	4000.00				
TERMS Date Incurred	D	ate Due	Interest (If none,					
M11M / D29D / Y Ž01Š Y	M M / D D	/ Y 1)	/1/2Ŏ <sup>Y</sup>	0.00 % (apr) Yes	No			
List All Endorsers or Guarantors (if any) t	o Loan Source							
1. Full Name (Last, First, Middle Initial)		1	Name of Employer					
Mailing Address		(	Occupation					
		,	Amount					
City	City State ZIP Code			Guaranteed Outstanding:				
2. Full Name (Last, First, Middle Initial)			Name of Employer					
Mailing Address	Mailing Address			Occupation				
			Amount Guaranteed					
City	City State ZIP Code			7 7 7				
3. Full Name (Last, First, Middle Initial)		1	Name of Employer					
Mailing Address		(	Occupation					
			Amount					
City	ZIP Code		Guaranteed Outstanding:	7 7				
4. Full Name (Last, First, Middle Initial)		1	Name of Employer					
Mailing Address			Occupation					
			Amount					
City	ZIP Code		Guaranteed Outstanding:	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
SUBTOTALS This Period This Page (optional)————————————————————————————————————								
TOTALS This Period (last page in this line only	/)		······		j			
Carry outstanding balance only to LINE 3. Sci	adula D for this	s line If no	Schedule D. carry	forward to appropriate line of Summ	an/			

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

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Transaction ID: SC/10.5209 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 4000.00 0.00 4000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 M 12M D09D ž013 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 4000.00 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.

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5210
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	whate milal	Memo Item    Clection: 2014
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code  F5007  Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
3000.00		0.00 3000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M12M / D16D / Y Ž013 Y	M M / D D	/ Y 1ÿ1/2ŏ Y 0.00
List All Endorsers or Guarantors (if any	/) to Loan Source	
Full Name (Last, First, Middle Initial)	,	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	-	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (option		
CODICIALS This Fellou This Fage (option	ai)	3000.00
TOTALS This Period (last page in this line	only)	······································
Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5542
LOAN SOURCE Full Name (Last, First, N	liddle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	Memo Item    Clection: 2014	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code  F5007  Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
3000.00	ļ,	0.00 3000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M01M / D08D / Y Ž014 Y	M M / D D	/ Y 1ÿ1/2ŏ Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
	T	Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional		
- CODICIALS This renor this rage (optional	,	3000.00
TOTALS This Period (last page in this line or	nly)	······································
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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Transaction ID: SC/10.5543 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville 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: (If none, enter 0) 0.00 <sup>D</sup>16<sup>D</sup> M 01M ž014 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 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.

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

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Transaction ID: SC/10.5544 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 <sup>D</sup>26<sup>D</sup> M 02M ž014 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)------10000.00 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.

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OF

						•			130
AME OF COMMITTEE (In Full)  Gerson for Congress					Trans	saction I	D : SC/10.55	B7	
LOAN SOURCE Full Name (Last, F Gerson, David, Adam, , Mailing Address PO Box 1465	irst, Mid	Idle Initial)			Memo Ite	Elec	ction: 2014 Primary General Other (speci	fy) <b>▼</b>	
City		State MN	ZIP Cod	le		×	Personal F	unds of th	ne Candidate
Burnsville			55337						
Original Amount of Loan	20	Cumulative Pay	ment To			alance (	Outstanding a		
391.0	00		· · · · · · · · · · · · · · · · · · ·	0.00			9	7	391.00
TERMS Date Incurred		D	ate Due		Interest R (If none, er			Secu	red:
M10M / D28D / Y Ž014	Υ	M M / D D	/ Y	YNA Y		0.00	% (apr)		Yes X No
List All Endorsers or Guarantors (in	f any) to	o Loan Source							
1. Full Name (Last, First, Middle Ini	tial)			Name of Em	ployer				
Mailing Address				Occupation					
				Amount	_				
City	State	ZIP Code		Guaranteed Outstanding:					
2. Full Name (Last, First, Middle Init	ial)			Name of Em	ployer				
Mailing Address				Occupation					
				Amount					
City	State	ZIP Code		Guaranteed Outstanding:			1 4		
3. Full Name (Last, First, Middle Init	ial)			Name of Em	ployer				
Mailing Address				Occupation					
				Amount					
City	State	ZIP Code		Guaranteed Outstanding:		7			
4. Full Name (Last, First, Middle Init	ial)	'		Name of Employer					
Mailing Address				Occupation					
				Amount					
City	State	ZIP Code		Guaranteed Outstanding:		7	7		
SUBTOTALS This Period This Page (optional)				391.00					
TOTALS This Period (last page in this	line only	')			▶		,	7	
Carry outstanding balance only to LIN	E 3, Sch	edule D, for this	line. If r	no Schedule I	D, carry fo	orward t	to appropria	te line of	Summary.

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		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5608
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2016
Gerson, David, Adam, ,	Memo Item    Clection: 2016	
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code  F5007  Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
3500.00		0.00 3500.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M03 <sup>M</sup> / D04 <sup>D</sup> / Y 2015 Y	M M / D D	/ Y YNAY Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	<u> </u>	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optiona	n	
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TOTALS This Period (last page in this line o	nly)	······································
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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Transaction ID: SC/10.5867 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2016 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify)  $\blacktriangledown$ City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville 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: (If none, enter 0) 0.00 <sup>D</sup>12<sup>D</sup> <sup>M</sup>80<sup>M</sup> Ž015 YNA Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 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.

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NAME OF COMMITTEE (In Full)			Tra	ansaction ID : SC/10.5980		
Gerson for Congress						
LOAN SOURCE Full Name (Last, First, Mid	ldle Initial)		☐ Memo			
Gerson, David, Adam, ,				Primary		
Mailing Address		General Other (specify) ▼				
PO Box 1465			— Ctrici (specify) •			
City	State	ZIP Code	•	Personal Funds of the Candidate		
Burnsville	MN	55337				
Original Amount of Loan	Cumulative Pay	yment To D	ate	Balance Outstanding at Close of This Period		
10000.00		,	0.00	10000.00		
TERMS Date Incurred	D	ate Due	Interest (If none,	t Rate Secured:		
M09M / D08D / Y Ž015 Y	NA <sup>Y</sup>	0.00 % (apr) Yes X No				
List All Endorsers or Guarantors (if any) to	o Loan Source					
1. Full Name (Last, First, Middle Initial)		1	Name of Employer			
Mailing Address	Mailing Address			Occupation		
		1	Amount			
City State	ZIP Code		Guaranteed Outstanding:	7 7		
Full Name (Last, First, Middle Initial)  Mailing Address			Name of Employer			
			Occupation			
		1	Amount			
City State	ZIP Code		Guaranteed Outstanding:	7 7 7 7		
3. Full Name (Last, First, Middle Initial)	3. Full Name (Last, First, Middle Initial)					
Mailing Address	Mailing Address					
		1	Amount			
City State	ZIP Code		Guaranteed Outstanding:	9 9		
4. Full Name (Last, First, Middle Initial)  Mailing Address			Name of Employer			
			Occupation			
			Amount			
City	ZIP Code	(	Guaranteed Outstanding:	7		
		<u> </u>				
SUBTOTALS This Period This Page (optional) 10000.00						
TOTALS This Period (last page in this line only)						
Carry outstanding balance only to LINE 3. Sch	nedule D for this	s line If no	Schedule D. carn	y forward to appropriate line of Summany		

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

FOR LINE NUMBER: (check only one)

PAGE

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Transaction ID: SC/10.6013 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2016 Memo Item Primary Gerson, David, Adam, , General Mailing Address Other (specify)  $\blacktriangledown$ PO Box 1465 City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Cumulative Payment To Date Balance Outstanding at Close of This Period Original Amount of Loan 33932.59 28539.64 5392.95 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D30 D M09M Ž015 YNA Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5392.95 TOTALS This Period (last page in this line only)..... 171460.36 Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.