

**FEC FORM 3X**

**REPORT OF RECEIPTS AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

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

12FE4M5

Minnesota DFL Senate Caucus

ADDRESS (number and street) PO Box 7307

Check if different than previously reported. (ACC)

St Paul

MN

55107

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00380352

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report (Q1)
- July 15 Quarterly Report (Q2)
- October 15 Quarterly Report (Q3)
- January 31 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- Feb 20 (M2)
  - Mar 20 (M3)
  - Apr 20 (M4)
  - May 20 (M5)
  - Jun 20 (M6)
  - Jul 20 (M7)
  - Aug 20 (M8)
  - Sep 20 (M9)
  - Oct 20 (M10)
  - Nov 20 (M11) (Non-Election Year Only)
  - Dec 20 (M12) (Non-Election Year Only)
  - Jan 31 (YE)

- (c) 12-Day PRE-Election Report for the:
- Primary (12P)
  - General (12G)
  - Runoff (12R)
  - Convention (12C)
  - Special (12S)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

- (d) 30-Day POST-Election Report for the:
- General (30G)
  - Runoff (30R)
  - Special (30S)

Election on [MM] / [DD] / [YYYY] in the State of [ ]

5. Covering Period

[MM] / [DD] / [YYYY] through [MM] / [DD] / [YYYY]

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Keefe, Libby, A, ,

Type or Print Name of Treasurer

Signature of Treasurer Keefe, Libby, A, ,

[Electronically Filed]

Date [MM] / [DD] / [YYYY]

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only									
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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Minnesota DFL Senate Caucus

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>		<input type="text" value="8184.58"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="8184.58"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="18005.00"/>	<input type="text" value="18005.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="26189.58"/>	<input type="text" value="26189.58"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="11937.39"/>	<input type="text" value="11937.39"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="14252.19"/>	<input type="text" value="14252.19"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**Minnesota DFL Senate Caucus**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized .....	8505.00	8505.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	8505.00	8505.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	9500.00	9500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	18005.00	18005.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	18005.00	18005.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	18005.00	18005.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	852.39	852.39
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	852.39	852.39
22. Transfers to Affiliated/Other Party Committees.....	11085.00	11085.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. 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
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	11937.39	11937.39
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11937.39	11937.39

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	18005.00	18005.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	18005.00	18005.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	852.39	852.39
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	852.39	852.39

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 13
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
**Minnesota DFL Senate Caucus**

**A. AMERISOURCEBERGEN CORPORATION POLITICAL ACTION COMMITTEE (ABC PAC)**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1300 Morris Dr  
Ste 100

City Chesterbrook State PA Zip Code 19087-5559

FEC ID number of contributing federal political committee. **C** C00400929

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1500.00

Date of Receipt  
MM / DD / YYYY  
02 / 20 / 2020

**Transaction ID : VTEC4Y4QCS3**

Amount of Each Receipt this Period  
1500.00

Memo Item

**B. BEST BUY CO., INC EMPLOYEE POLITICAL FORUM**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7601 Penn Ave S

City Minneapolis State MN Zip Code 55423-3683

FEC ID number of contributing federal political committee. **C** C00405076

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
MM / DD / YYYY  
02 / 20 / 2020

**Transaction ID : VTEC4Y4QCR5**

Amount of Each Receipt this Period  
2500.00

Memo Item

**C. COMCAST CORPORATION POLITICAL ACTION COMMITTEE- FEDERAL**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1701 John F Kennedy Blvd  
Fl 49

City Philadelphia State PA Zip Code 19103-2855

FEC ID number of contributing federal political committee. **C** C00248716

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
MM / DD / YYYY  
02 / 20 / 2020

**Transaction ID : VTEC4Y4QCP9**

Amount of Each Receipt this Period  
500.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	4500.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 7 OF 13
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**Minnesota DFL Senate Caucus**

**A. DORSEY NATIONAL FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 S 6th St  
Ste 1500

City Minneapolis State MN Zip Code 55402-1498

FEC ID number of contributing federal political committee. **C** C00018945

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y  
 02 / 20 / 2020

**Transaction ID : VTEC4Y4QCQ7**

Amount of Each Receipt this Period  
5000.00

Memo Item

**B.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y

Amount of Each Receipt this Period

Memo Item

**C.**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  
 M  M /  D  D /  Y  Y  Y  Y

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5000.00
<b>TOTAL</b> This Period (last page this line number only).....	9500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Minnesota DFL Senate Caucus**

**A. Bogan, Shemaka, , ,**

Full Name (Last, First, Middle Initial)

Mailing Address 793 Lambert Ln NE

City Albertville State MN Zip Code 55301

Purpose of Disbursement List Building

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 14 / 2020

FEC Identification Number: C

Transaction ID : VTDCWAE3X

Amount of Each Disbursement this Period: 310.00

Memo Item

**B. Drake Bank Federal**

Full Name (Last, First, Middle Initial)

Mailing Address 60 Plato Blvd E

City Saint Paul State MN Zip Code 55107-1820

Purpose of Disbursement Bank Charges

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 03 / 2020

FEC Identification Number: C

Transaction ID : VTDCWAE3X

Amount of Each Disbursement this Period: 47.12

Memo Item

**C. Drake Bank Federal**

Full Name (Last, First, Middle Initial)

Mailing Address 60 Plato Blvd E

City Saint Paul State MN Zip Code 55107-1820

Purpose of Disbursement Bank Charges

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 01 / 03 / 2020

FEC Identification Number: C

Transaction ID : VTDCWAE3X

Amount of Each Disbursement this Period: 31.06

Memo Item

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

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

388.18



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Minnesota DFL Senate Caucus**

Full Name (Last, First, Middle Initial) <b>A. Drake Bank Federal</b>		Date of Disbursement MM / DD / YYYY 01 / 03 / 2020
Mailing Address 60 Plato Blvd E		FEC Identification Number C [ ] <b>Transaction ID : VTDCWAE3X</b> Amount of Each Disbursement this Period [ ] 11.39
City Saint Paul	State MN	Zip Code 55107-1820
Purpose of Disbursement Bank Charges		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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Drake Bank Federal</b>		Date of Disbursement MM / DD / YYYY 02 / 03 / 2020
Mailing Address 60 Plato Blvd E		FEC Identification Number C [ ] <b>Transaction ID : VTDCWAE3Y</b> Amount of Each Disbursement this Period [ ] 10.41
City Saint Paul	State MN	Zip Code 55107-1820
Purpose of Disbursement Bank Charges		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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Drake Bank Federal</b>		Date of Disbursement MM / DD / YYYY 02 / 03 / 2020
Mailing Address 60 Plato Blvd E		FEC Identification Number C [ ] <b>Transaction ID : VTDCWAE3Y</b> Amount of Each Disbursement this Period [ ] 21.65
City Saint Paul	State MN	Zip Code 55107-1820
Purpose of Disbursement Bank Charges		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:	<input type="checkbox"/> Memo Item	

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

43.45

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Minnesota DFL Senate Caucus**

Full Name (Last, First, Middle Initial) <b>A. Drake Bank Federal</b>		Date of Disbursement MM / DD / YYYY 02 / 03 / 2020
Mailing Address 60 Plato Blvd E		FEC Identification Number C [ ] <b>Transaction ID : VTDCWAE3Y</b> Amount of Each Disbursement this Period [ ] 56.56
City Saint Paul	State MN	Zip Code 55107-1820
Purpose of Disbursement Bank Charges		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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Drake Bank Federal</b>		Date of Disbursement MM / DD / YYYY 03 / 03 / 2020
Mailing Address 60 Plato Blvd E		FEC Identification Number C [ ] <b>Transaction ID : VTDCWAE4Q</b> Amount of Each Disbursement this Period [ ] 212.77
City Saint Paul	State MN	Zip Code 55107-1820
Purpose of Disbursement Bank Charges		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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Drake Bank Federal</b>		Date of Disbursement MM / DD / YYYY 03 / 03 / 2020
Mailing Address 60 Plato Blvd E		FEC Identification Number C [ ] <b>Transaction ID : VTDCWAE4C</b> Amount of Each Disbursement this Period [ ] 66.24
City Saint Paul	State MN	Zip Code 55107-1820
Purpose of Disbursement Bank Charges		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:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 335.57
<b>TOTAL</b> This Period (last page this line number only).....▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Minnesota DFL Senate Caucus**

Full Name (Last, First, Middle Initial)

### A. Drake Bank Federal

Mailing Address 60 Plato Blvd E

City  
Saint Paul

State  
MN

Zip Code  
55107-1820

Purpose of Disbursement  
Bank Charges

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	3		2	0	2	0

FEC Identification Number

C [ ]

Transaction ID : VTDCWAE4Q  
Amount of Each Disbursement this Period

[ ] 27.19

Memo Item

Full Name (Last, First, Middle Initial)

### B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify)

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

Full Name (Last, First, Middle Initial)

### C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C [ ]

Amount of Each Disbursement this Period

[ ]

Memo Item

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

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

[ ] 27.19

[ ] 794.39

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Minnesota DFL Senate Caucus**

Full Name (Last, First, Middle Initial)

**A. Minnesota DFL State Central Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		07		2020

Mailing Address 255 Plato Blvd E

FEC Identification Number

C	C00025254
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**Transaction ID : VTDCWAE3X**

Amount of Each Disbursement this Period

3135.00
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Memo Item

City Saint Paul	State MN	Zip Code 55107-1623
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Purpose of Disbursement  
Transfer

Candidate Name

Category/  
Type

Office Sought:	Disbursement For:
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. Minnesota DFL State Central Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		07		2020

Mailing Address 255 Plato Blvd E

FEC Identification Number

C	C00025254
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**Transaction ID : VTDCWAE3X**

Amount of Each Disbursement this Period

1435.00
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Memo Item

City Saint Paul	State MN	Zip Code 55107-1623
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Purpose of Disbursement  
Transfer

Candidate Name

Category/  
Type

Office Sought:	Disbursement For:
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. Minnesota DFL State Central Committee**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		06		2020

Mailing Address 255 Plato Blvd E

FEC Identification Number

C	C00025254
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**Transaction ID : VTDCWAE3X**

Amount of Each Disbursement this Period

1885.00
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Memo Item

City Saint Paul	State MN	Zip Code 55107-1623
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Purpose of Disbursement  
Transfer

Candidate Name

Category/  
Type

Office Sought:	Disbursement For:
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

State: District:

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

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

6455.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**Minnesota DFL Senate Caucus**

Full Name (Last, First, Middle Initial) <b>A. Minnesota DFL State Central Committee</b>		Date of Disbursement MM / DD / YYYY 02 / 19 / 2020
Mailing Address 255 Plato Blvd E		FEC Identification Number C00025254 <b>Transaction ID : VTDCWAE3Y</b> Amount of Each Disbursement this Period 1405.00
City Saint Paul	State MN	Zip Code 55107-1623
Purpose of Disbursement Transfer		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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>B. Minnesota DFL State Central Committee</b>		Date of Disbursement MM / DD / YYYY 02 / 26 / 2020
Mailing Address 255 Plato Blvd E		FEC Identification Number C00025254 <b>Transaction ID : VTDCWAE4Q</b> Amount of Each Disbursement this Period 1400.00
City Saint Paul	State MN	Zip Code 55107-1623
Purpose of Disbursement Transfer		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:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) <b>C. Minnesota DFL State Central Committee</b>		Date of Disbursement MM / DD / YYYY 03 / 12 / 2020
Mailing Address 255 Plato Blvd E		FEC Identification Number C00025254 <b>Transaction ID : VTDCWAE6E</b> Amount of Each Disbursement this Period 1825.00
City Saint Paul	State MN	Zip Code 55107-1623
Purpose of Disbursement Transfer		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:	<input type="checkbox"/> Memo Item	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	4630.00
<b>TOTAL</b> This Period (last page this line number only).....▶	11085.00