

**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 Citizens Concerned for Life, Inc. Federal PAC

ADDRESS (number and street) ▼

4249 Nicollet Ave So

☐ Check if different than previously reported. (ACC)

Minneapolis

MN

55409

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00129171

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)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☒

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the
State of

MN

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

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

Type or Print Name of Treasurer Gerry Chapdelaine

Signature of Treasurer

Gerry Chapdelaine

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

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

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Minnesota Citizens Concerned for Life, Inc. Federal PAC

Report Covering the Period:

From:

| | | | | |
|-----|---|-----|---|-----------|
| M M | / | D D | / | Y Y Y Y Y |
| 10 | | 18 | | 2012 |

To:

| | | | | |
|-----|---|-----|---|-----------|
| M M | / | D D | / | Y Y Y Y Y |
| 11 | | 26 | | 2012 |

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date | | | | | | | | | | | | | | | |
|--|---|-----------------------------------|---|---|---|------|---|----------|--|--|--|--|---------|--|--|--|--|
| 6. (a) Cash on Hand January 1, <table><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td colspan="5">2012</td></tr></table> | Y | Y | Y | Y | Y | 2012 | | | | | | <table><tr><td colspan="5">7624.13</td></tr></table> | 7624.13 | | | | |
| Y | Y | Y | Y | Y | | | | | | | | | | | | | |
| 2012 | | | | | | | | | | | | | | | | | |
| 7624.13 | | | | | | | | | | | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period..... | <table><tr><td colspan="5">3387.08</td></tr></table> | 3387.08 | | | | | | | | | | | | | | | |
| 3387.08 | | | | | | | | | | | | | | | | | |
| (c) Total Receipts (from Line 19) | <table><tr><td colspan="5">19648.60</td></tr></table> | 19648.60 | | | | | <table><tr><td colspan="5">20078.60</td></tr></table> | 20078.60 | | | | | | | | | |
| 19648.60 | | | | | | | | | | | | | | | | | |
| 20078.60 | | | | | | | | | | | | | | | | | |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <table><tr><td colspan="5">23035.68</td></tr></table> | 23035.68 | | | | | <table><tr><td colspan="5">27702.73</td></tr></table> | 27702.73 | | | | | | | | | |
| 23035.68 | | | | | | | | | | | | | | | | | |
| 27702.73 | | | | | | | | | | | | | | | | | |
| 7. Total Disbursements (from Line 31)..... | <table><tr><td colspan="5">4278.00</td></tr></table> | 4278.00 | | | | | <table><tr><td colspan="5">8945.05</td></tr></table> | 8945.05 | | | | | | | | | |
| 4278.00 | | | | | | | | | | | | | | | | | |
| 8945.05 | | | | | | | | | | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | <table><tr><td colspan="5">18757.68</td></tr></table> | 18757.68 | | | | | <table><tr><td colspan="5">18757.68</td></tr></table> | 18757.68 | | | | | | | | | |
| 18757.68 | | | | | | | | | | | | | | | | | |
| 18757.68 | | | | | | | | | | | | | | | | | |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <table><tr><td colspan="5">0.00</td></tr></table> | 0.00 | | | | | | | | | | | | | | | |
| 0.00 | | | | | | | | | | | | | | | | | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D) | <table><tr><td colspan="5">0.00</td></tr></table> | 0.00 | | | | | | | | | | | | | | | |
| 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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Minnesota Citizens Concerned for Life, Inc. Federal PAC

Report Covering the Period:

From:

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 0 | | 1 | 8 | | 2 | 0 | 1 | 2 | | |

To:

| | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y | Y | Y |
| 1 | 1 | | 2 | 6 | | 2 | 0 | 1 | 2 | | |

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).....

3307.60

3307.60

(ii) Unitemized

16341.00

16771.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

19648.60

20078.60

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ►

19648.60

20078.60

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))..... ►

19648.60

20078.60

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ►

19648.60

20078.60

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures | 0.00 | 0.00 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 0.00 | 0.00 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 200.00 |
| 24. Independent Expenditures (use Schedule E) | 4278.00 | 7745.05 |
| 25. Coordinated Party Expenditures (2 U.S.C. §441a(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 | 0.00 | 1000.00 |
| 30. Federal Election Activity (2 U.S.C. §431(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)) .. | 4278.00 | 8945.05 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 4278.00 | 8945.05 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) (from Line 11(d), page 3) | 19648.60 | 20078.60 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 19648.60 | 20078.60 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ► | 0.00 | 0.00 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) ► | 0.00 | 0.00 |

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

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

FOR LINE NUMBER: PAGE 6 OF 9

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Citizens Concerned for Life, Inc. Federal PAC

Full Name (Last, First, Middle Initial)

A. Terry Hoffman

Mailing Address 7118 W River Rd

City State Zip Code
 Brooklyn Center MN 55430

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Seagate Technology LLC Electronic Technician

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 31 2012

Transaction ID : SA11AI.5064

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Anthony LeGare

Mailing Address 78467 440th St

City State Zip Code
 Hector MN 55342

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Seneca Foods Inc Mechanic

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.60

Date of Receipt

M M / D D / Y Y Y Y Y Y
 10 31 2012

Transaction ID : SA11AI.5068

Amount of Each Receipt this Period

207.60

Full Name (Last, First, Middle Initial)

C. Leslie McClellan

Mailing Address 1136 23rd Ave SW

City State Zip Code
 Stewartville MN 55976

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 Self Farmer

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 11 06 2012

Transaction ID : SA11AI.5070

Amount of Each Receipt this Period

250.00

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

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

707.60

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 OF 9

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 Citizens Concerned for Life, Inc. Federal PAC

Full Name (Last, First, Middle Initial)

A. Mary Michaels
 Mailing Address 6600 Lyndale Ave. S
 Apt. 803

 City State Zip Code
 Richfield MN 55423

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 10 / 29 / 2012

Transaction ID : SA11AI.5061

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

B. William F Palzer

Mailing Address 866 Armstrong Ave

 City State Zip Code
 St. Paul MN 55102

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

Occupation

Retired

Retired

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y
 10 / 31 / 2012

Transaction ID : SA11AI.5072

Amount of Each Receipt this Period

600.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

 FEC ID number of contributing
 federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

2600.00

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

3307.60

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 8 OF 9
 FOR LINE 24 OF FORM 3X

| | | |
|--|--|---|
| NAME OF COMMITTEE (In Full) Minnesota Citizens Concerned for Life, Inc. Federal PAC | | FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00129171 </div> |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | |

| | | | |
|--|-------------------|--|--|
| Full Name (Last, First, Middle Initial) of Payee Tigre Strategies | | Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 05 / 2012</div> | |
| Mailing Address 3817 W Dale Ave Unit 1 | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">2233.76</div> | |
| City Tampa | State FL | Zip Code 33609 | |
| Purpose of Expenditure GOTV calls | Category/ Type | Transaction ID : SE.5075 | |
| Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY | | Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President | |
| Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">3551.27</div> | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ | |

| | | | |
|--|-------------------|--|--|
| Full Name (Last, First, Middle Initial) of Payee Tigre Strategies | | Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">11 / 05 / 2012</div> | |
| Mailing Address 3817 W Dale Ave Unit 1 | | Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1598.61</div> | |
| City Tampa | State FL | Zip Code 33609 | |
| Purpose of Expenditure GOTV calls | Category/ Type | Transaction ID : SE.5077 | |
| Name of Federal Candidate Supported or Opposed by Expenditure: KURT PATRICK BILLS | | Office Sought: <input type="checkbox"/> House State: MN <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President | |
| Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2430.70</div> | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____ | |

| | |
|--|--|
| (a) SUBTOTAL of Itemized Independent Expenditures..... | <div style="border: 1px solid black; padding: 2px; display: inline-block;">3832.37</div> |
| (b) SUBTOTAL of Unitemized Independent Expenditures | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> |
| (c) TOTAL Independent Expenditures..... | <div style="border: 1px solid black; padding: 2px; display: inline-block;"></div> |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gerry Chapdelaine

[Electronically Filed]

Date

 MM / DD / YYYY

12 / 05 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 9 OF 9
 FOR LINE 24 OF FORM 3X

| | | |
|--|--|---|
| NAME OF COMMITTEE (In Full) Minnesota Citizens Concerned for Life, Inc. Federal PAC | | FEC IDENTIFICATION NUMBER ▼ C C00129171 |
| Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | MM / DD / YYYY |

| | | |
|--|-------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Tigre Strategies | | Date MM / DD / YYYY 11 / 05 / 2012 |
| Mailing Address 3817 W Dale Ave Unit 1 | | Amount 205.61 |
| City Tampa | State FL | Zip Code 33609 |
| Purpose of Expenditure GOTV calls | Category/ Type | Transaction ID : SE.5078 |
| Name of Federal Candidate Supported or Opposed by Expenditure: MICHELE M BACHMANN | | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 06 |
| Calendar Year-To-Date Per Election for Office Sought | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose |
| Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | | 2012 <input type="checkbox"/> Other (specify) ▶ |

| | | |
|--|-------------------|--|
| Full Name (Last, First, Middle Initial) of Payee Tigre Strategies | | Date MM / DD / YYYY 11 / 05 / 2012 |
| Mailing Address 3817 W Dale Ave Unit 1 | | Amount 240.02 |
| City Tampa | State FL | Zip Code 33609 |
| Purpose of Expenditure GOTV calls | Category/ Type | Transaction ID : SE.5079 |
| Name of Federal Candidate Supported or Opposed by Expenditure: CHIP CRAVAACK | | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 08 |
| Calendar Year-To-Date Per Election for Office Sought | | Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose |
| Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | | 2012 <input type="checkbox"/> Other (specify) ▶ |

| | |
|---|----------------|
| (a) SUBTOTAL of Itemized Independent Expenditures.....▶ | 445.63 |
| (b) SUBTOTAL of Unitemized Independent Expenditures.....▶ | |
| (c) TOTAL Independent Expenditures.....▶ | 4278.00 |

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Gerry Chapdelaine

[Electronically Filed]

Date

MM / DD / YYYY
12 / 05 / 2012

Signature