Image# 14330048118

RECEIVED
SECRETARY OF THE SENATE
PUBLIC RECORD
2014 MAY 12 PM 2:55

RQ-2

FEDERAL ELECTION COMMISSION
WASHINGTON, D.C. 20463

April 4, 2014

BART J. WARD, TREASURER
ABELER4SENATE
600 EAST MAIN STREET
ANOKA, MN 55303

Response Due Date
05/09/2014

IDENTIFICATION NUMBER: C00546630

REFERENCE: YEAR-END REPORT (10/01/2013 - 12/31/2013)

Dear Treasurer:

This letter is prompted by the Commission's preliminary review of the report referenced above. This notice requests information essential to full public disclosure of your federal election campaign finances. **An adequate response must be received at the Senate Public Records Office by the response date noted above. Failure to adequately respond by the response date noted above could result in an audit or enforcement action**. Additional information is needed for the following **2** item(s):

1. Itemized disbursements must include a brief statement or description of why each disbursement was made. Please amend Schedule B supporting Line 17 of your report to clarify the following description(s): "In-kind" and "Invoice." For further guidance regarding acceptable purposes of disbursement, please refer to 11 CFR 104.3(b)(4)(i)(A).

Additional clarification regarding inadequate purposes of disbursement published in the Federal Register is available on the FEC website at www.fec.gov/law/policy/purposeofdisbursement/inadequate_purpose_list_3507.pdf. A non-exhaustive list of acceptable purposes is also available on the FEC website at http://www.fec.gov/rad/pacs/documents/ExamplesofAdequatePurposes.pdf.

2. Schedule B of your report discloses reimbursements to individuals for the following disbursement(s): "Reimburse Campaign Book Amazon," "Reimburse for Apple Headphones from RadioShack, Pegboard-Menards, Belken 30P MDS-Sears Photos-Costco," "Reimburse for Gas, Costco, Kwik Trip, North Country and Casey's," "Reimburse for Printing from Do All," and "Reimburse Usr Stereo/Headset." Please be advised that when itemizing reimbursements to individuals for goods or services, if the payment to the original vendor aggregates in excess of $200 in an election cycle, a memo entry including the

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name and address of the original vendor, as well as the date, amount and purpose of the original purchase must be provided. Please amend your report to include the missing information on Schedule B and clearly identify each memo entry supporting a reimbursement. If itemization is not necessary, you must indicate so in an amendment to this report. (11 CFR §§ 104.3(b)(4)(i) and 104.9, and Advisory Opinions 1992-1 and 1996-20, footnote 3)

Please note, you will not receive an additional notice from the Commission on this matter. Adequate responses must be received by the Commission on or before the due date noted above to be taken into consideration in determining whether audit action will be initiated. Failure to comply with the provisions of the Act may also result in an enforcement action against the committee. Any response submitted by your committee will be placed on the public record and will be considered by the Commission prior to taking enforcement action. **Requests for extensions of time in which to respond will not be considered.**

A written response or an amendment to your original report(s) correcting the above problems should be filed with the Senate Public Records Office. Please contact the Senate Public Records Office at (202) 224-0322 for instructions on how and where to file an amendment. If you should have any questions regarding this matter or wish to verify the adequacy of your response, please contact me on our toll-free number (800) 424-9530 (at the prompt press 5 to reach the Reports Analysis Division) or my local number (202) 694-1395.

Sincerely,

Benjamin G. Holly

Ben Holly
Senior Campaign Finance Analyst
Reports Analysis Division

417

14020354190

FEC FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

RECEIVED
SECRETARY OF THE SENATE
PUBLIC

14 MAY 12 PM 2:55

Office Use Only

1. NAME OF COMMITTEE (in full) — TYPE OR PRINT ▼ — Example: If typing, type over the lines. 12FE4M5

ABELER4SENATE

ADDRESS (number and street) ▼ 600 EAST MAIN STREET

☐ Check if different than previously reported. (ACC)

ANOKA — MN — 55303 -

2. **FEC IDENTIFICATION NUMBER ▼** C C00546630

CITY ▲ STATE ▲ ZIP CODE ▲

3. IS THIS REPORT ☒ NEW (N) **OR** ☒ AMENDED (A) — OMIT

STATE ▼ DISTRICT: MN

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- ☐ April 15 Quarterly Report (Q1)
- ☐ July 15 Quarterly Report (Q2)
- ☐ October 15 Quarterly Report (Q3)
- ☒ January 31 Year-End Report (YE)
- ☐ Termination Report (TER)

(b) 12-Day **PRE**-Election Report for the:

☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R)
☐ Convention (12C) ☐ Special (12S)

Election on MM / DD / YYYY in the State of

(c) 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 10 / 01 / 2013 through 12 / 31 / 2013

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 BART WARD

Signature of Treasurer *BART WARD* [signature] Date 05 / 06 / 2014

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

Office Use Only							

FEC FORM 3
(Revised 02/2003)

FE5AN018

14020354191

SUMMARY PAGE
of Receipts and Disbursements

Write or Type Committee Name
ABELER4SENATE

Report Covering the Period: From: MM 10 / DD 01 / YYYY 2013 To: MM 12 / DD 31 / YYYY 2013

	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))..	26897.49	81751.49
(b) Total Contribution Refunds (from Line 20(d))..	0.00	100.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))...	26897.49	81651.49
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)..	36659.74	59814.67
(b) Total Offsets to Operating Expenditures (from Line 14)...	0.00	2566.09
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))...	36659.74	57248.58
8. Cash on Hand at Close of Reporting Period (from Line 27)...	24806.45	
9. Debts and Obligations Owed **TO** the Committee (Itemize all on Schedule C and/or Schedule D)...	0.00	
10. Debts and Obligations Owed **BY** the Committee (Itemize all on Schedule C and/or Schedule D)...	0.00	

For further information contact:

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

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

14020354192

DETAILED SUMMARY PAGE
of Receipts

FEC **Form 3** (Revised 12/2003)

Write or Type Committee Name

ABELER4SENATE

Report Covering the Period: From: 10 / 01 / 2013 To: 12 / 31 / 2013

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)...	19180.49	58081.49
(ii) Unitemized.....	7717.00	23540.00
(iii) TOTAL of contributions from individuals . ▶	26897.49	81621.49
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs)...	0.00	0.00
(d) The Candidate.....	0.00	130.00
(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..	26897.49	81751.49
12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES..	0.00	0.00
13. LOANS: (a) Made or Guaranteed by the Candidate...	0.00	0.00
(b) All Other Loans...	0.00	0.00
(c) TOTAL LOANS (add Lines 13(a) and (b))...	0.00	0.00
14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)...	0.00	2566.09
15. OTHER RECEIPTS (Dividends, Interest, etc.).....	0.00	403.54
16. **TOTAL RECEIPTS** (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)... ▶	26897.49	84721.12

14020354193

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES...	36659.74	59814.67
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES ..	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate...	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b))...	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees...	0.00	100.00
(b) Political Party Committees...	0.00	0.00
(c) Other Political Committees (such as PACs) ...	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c))...	0.00	100.00
21. OTHER DISBURSEMENTS ...	0.00	0.00
22. **TOTAL DISBURSEMENTS** (add Lines 17, 18, 19(c), 20(d), and 21) ▶	36659.74	59914.67

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD...	34568.70
24 TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3)...	26897.49
25. SUBTOTAL (add Line 23 and Line 24)...	61466.19
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22)...	36659.74
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25)...	24806.45

14020354194

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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

NAME OF COMMITTEE (In Full)
ABELER4SENATE

A.
Full Name (Last, First, Middle Initial): MICHAEL S BALFANZ
Mailing Address: 8715 NE RIVER ROAD
City: RICE State: MN Zip Code: 56367
FEC ID number of contributing federal political committee: C
Name of Employer: SELF EMPLOYED
Occupation: CHIROPRACTOR
Receipt For: 2014
[X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 520.00
Date of Receipt: 11 / 16 / 2013
Transaction ID : SA11AI.4979
Amount of Each Receipt this Period: 520.00

B.
Full Name (Last, First, Middle Initial): JAMES BARR
Mailing Address: 4719 BANNING AVE
City: WHITEBEAR LAKE State: MN Zip Code: 55110
FEC ID number of contributing federal political committee: C
Name of Employer: BARR FAMILY CHIROPRACTIC & SPO
Occupation: SELF EMPLOYED
Receipt For: 2014
[X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 500.00
Date of Receipt: 10 / 01 / 2013
Transaction ID : SA11AI.4975
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial): ARLONA V BERGMAN
Mailing Address: 15220 NOWTHEN BLVD
City: ANOKA State: MN Zip Code: 55303
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation: RETIRED
Receipt For: 2014
[X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 500.00
Date of Receipt: 10 / 20 / 2013
Transaction ID : SA11AI.5031
Amount of Each Receipt this Period: 500.00

SUBTOTAL of Receipts This Page (optional) 1520.00

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

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SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A.
Full Name (Last, First, Middle Initial): BRUCE BOMIER
Mailing Address: 3430 RUM RIVER DRIVE
City: ANOKA | State: MN | Zip Code: 55303
FEC ID number of contributing federal political committee: C
Name of Employer: INSTITUTE OS ENVIRONMENTAL AS.
Occupation:
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 10 / 23 / 2013
Transaction ID : SA11AI.4956
Amount of Each Receipt this Period: 1000.00

B.
Full Name (Last, First, Middle Initial): BARBRO BROST
Mailing Address: 2840 COUNTY ROAD 24
City: LONG LAKE | State: MN | Zip Code: 55356
FEC ID number of contributing federal political committee: C
Name of Employer: BARBRO BROST CHIROPRACTIC
Occupation: CHIROPRACTOR
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 1000.00

Date of Receipt: 10 / 02 / 2013
Transaction ID : SA11AI.5036
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial): STEPHEN J COLLINS
Mailing Address: 527 COON RAPIDS BLVD
City: COON RAPIDS | State: MN | Zip Code: 55433
FEC ID number of contributing federal political committee: C
Name of Employer: ABUNDANT LIFE FAMILY CHIROPRAC
Occupation: CHIROPRACTOR
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 260.00

Date of Receipt: 11 / 11 / 2013
Transaction ID : SA11AI.4992
Amount of Each Receipt this Period: 260.00

SUBTOTAL of Receipts This Page (optional) 1760.00

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

14020354196

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A.
Full Name (Last, First, Middle Initial): PATRICIA CULLEN
Mailing Address: 2104 PALACE AVE
City: SAINT PAUL
State: MN
Zip Code: 55105
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation: CARE PROVIDER
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 400.00
Date of Receipt: 12 / 11 / 2013
Transaction ID : SA11AI.5024
Amount of Each Receipt this Period: 200.00

B.
Full Name (Last, First, Middle Initial): GREGG DENVER
Mailing Address: 107 SE 10TH ST SUITE 1
City: GRAND RAPIDS
State: MN
Zip Code: 55744
FEC ID number of contributing federal political committee: C
Name of Employer: DENVER CHIRO
Occupation:
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 260.00
Date of Receipt: 12 / 10 / 2013
Transaction ID : SA11AI.5091
Amount of Each Receipt this Period: 260.00
VANCO

C.
Full Name (Last, First, Middle Initial): CATHRINE L DOCK
Mailing Address: P O BOX 98
City: ANOKA
State: MN
Zip Code: 55303
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation: HOMEMAKER
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 2500.00
Date of Receipt: 11 / 24 / 2013
Transaction ID : SA11AI.4981
Amount of Each Receipt this Period: 1250.00

SUBTOTAL of Receipts This Page (optional) 1710.00

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

14020354197

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A.
Full Name (Last, First, Middle Initial): GERALD P DOCK
Mailing Address: P O BOX 98
City: ANOKA
State: MN
Zip Code: 55303
FEC ID number of contributing federal political committee: C
Name of Employer: GREENHAVEN MARKETING
Occupation: SELF EMPLOYED
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 2500.00
Date of Receipt: 11 / 24 / 2013
Transaction ID : SA11AI.4980
Amount of Each Receipt this Period: 1250.00

B.
Full Name (Last, First, Middle Initial): MICHAEL E ERICKSON
Mailing Address: 400 PLEASANT AVE S
City: PARK RAPIDS
State: MN
Zip Code: 56470
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 250.00
Date of Receipt: 11 / 13 / 2013
Transaction ID : SA11AI.4991
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial): JOEL FENSKE
Mailing Address: 19957 MCKENDRY PATH
City: FARMINGTON
State: MN
Zip Code: 55024
FEC ID number of contributing federal political committee: C
Name of Employer: KINGSWAY CHIROPRACTIC
Occupation: CHIROPRACTOR
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 260.00
Date of Receipt: 12 / 07 / 2013
Transaction ID : SA11AI.5004
Amount of Each Receipt this Period: 260.00

SUBTOTAL of Receipts This Page (optional) 1760.00

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

14020354198

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A.
Full Name (Last, First, Middle Initial): GLENN FRISCH
Mailing Address: 4137 WOODLAND RD
City: CIRCLE PINES
State: MN
Zip Code: 55014
FEC ID number of contributing federal political committee: C
Name of Employer: LEXINGTON SQUARE CHIROPRACTIC
Occupation: CHIROPRACTIC
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 260.00
Date of Receipt: 12 / 20 / 2013
Transaction ID : SA11AI.5005
Amount of Each Receipt this Period: 260.00

B.
Full Name (Last, First, Middle Initial): SONSTEBY M GLENN
Mailing Address: 14485 WACO ST. NW
City: RAMSEY
State: MN
Zip Code: 55303
FEC ID number of contributing federal political committee: C
Name of Employer: SLIMS AUTO REPAIR
Occupation: OWNER
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 1000.00
Date of Receipt: 11 / 22 / 2013
Transaction ID : SA11AI.4982
Amount of Each Receipt this Period: 1000.00

C.
Full Name (Last, First, Middle Initial): JAY M GREENBERG
Mailing Address: 1227 S PARK ST
City: REDWING
State: MN
Zip Code: 55066
FEC ID number of contributing federal political committee: C
Name of Employer: REDWING CHIROPRACTIC
Occupation: CHIROPRACTOR
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 650.00
Date of Receipt: 10 / 07 / 2013
Transaction ID : SA11AI.5039
Amount of Each Receipt this Period: 150.00

SUBTOTAL of Receipts This Page (optional) 1410.00

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

14020354199

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A.
Full Name (Last, First, Middle Initial): SIRAK HAILU
Mailing Address: 78 10TH ST E, UNIT 2708
City: SAINT PAUL | State: MN | Zip Code: 55101
FEC ID number of contributing federal political committee: C
Name of Employer: NB CHIROPRACHTIC CLINIC
Occupation:
Receipt For: 2014
[X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 250.00
Date of Receipt: 12 / 23 / 2013
Transaction ID : SA11AI.4995
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial): KYLE HAMS
Mailing Address: 19661 SALMONSON RIVER RD
City: MORA | State: MN | Zip Code: 55051
FEC ID number of contributing federal political committee: C
Name of Employer: SELF
Occupation: D.C.
Receipt For: 2014
[X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 400.00
Date of Receipt: 12 / 11 / 2013
Transaction ID : SA11AI.5092
Amount of Each Receipt this Period: 400.00
VANCO

C.
Full Name (Last, First, Middle Initial): DENNIS HANSON
Mailing Address: 306 NORTH MILL ST, PO BOX 555
City: FERTILE | State: MN | Zip Code: 56540
FEC ID number of contributing federal political committee: C
Name of Employer: HANSON CHIRO
Occupation:
Receipt For: 2014
[X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 260.00
Date of Receipt: 12 / 19 / 2013
Transaction ID : SA11AI.5093
Amount of Each Receipt this Period: 260.00
VANCO

SUBTOTAL of Receipts This Page (optional) 910.00

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

14020354200

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A.
Full Name (Last, First, Middle Initial): DOUGLAS G HARDEN
Mailing Address: 1355 Geneva Ave N, Ste 100
City: Oakdale | State: MN | Zip Code: 55128
FEC ID number of contributing federal political committee: C
Name of Employer: CHIROPRACTOR NEWPORT
Occupation: CHIROPRACTOR
Receipt For: 2014
[X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 500.00
Date of Receipt: 12 / 30 / 2013
Transaction ID : SA11AI.5008
Amount of Each Receipt this Period: 500.00

B.
Full Name (Last, First, Middle Initial): ORMELLE HEDBLAD
Mailing Address: 3841 STONEHAVEN CT
City: ANOKA | State: MN | Zip Code: 55303
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation: RETIRED
Receipt For: 2014
[X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 250.00
Date of Receipt: 10 / 01 / 2013
Transaction ID : SA11AI.5032
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial): BRIAN HEDMAN
Mailing Address: 2027 4TH AVE
City: WINDOM | State: MN | Zip Code: 56101
FEC ID number of contributing federal political committee: C
Name of Employer: HEDMAN CHIRO CENTER
Occupation: DR.
Receipt For: 2014
[X] Primary [ ] General [ ] Other (specify)
Election Cycle-to-Date: 260.00
Date of Receipt: 12 / 31 / 2013
Transaction ID : SA11AI.5111
Amount of Each Receipt this Period: 260.00
VANCO

SUBTOTAL of Receipts This Page (optional) 1010.00

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

14020354201

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A.
Full Name (Last, First, Middle Initial): KATHLEEN M HIGGINS
Mailing Address: 7801 GLORIA CIRCLE
City: MOUNDS VIEW | State: MN | Zip Code: 55112
FEC ID number of contributing federal political committee: C
Name of Employer: ALL WAYS HEALTH
Occupation: CHIROPRACTOR
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 250.00

Date of Receipt: 12 / 04 / 2013
Transaction ID : SA11AI.5003
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial): THOMAS HOLBROOK
Mailing Address: 5219 OJIBWA RD
City: BRAINERD | State: MN | Zip Code: 56401
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 325.00

Date of Receipt: 12 / 07 / 2013
Transaction ID : SA11AI.5006
Amount of Each Receipt this Period: 300.00

C.
Full Name (Last, First, Middle Initial): HEATHER INGBRETSON
Mailing Address: 1325 PIKE LAKE RD
City: NEW BRIGHTON | State: MN | Zip Code: 55113
FEC ID number of contributing federal political committee: C
Name of Employer: ADVANCED INJURY REHABILITATION
Occupation: CHIROPRACTOR
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 350.00

Date of Receipt: 12 / 14 / 2013
Transaction ID : SA11AI.5021
Amount of Each Receipt this Period: 150.00

SUBTOTAL of Receipts This Page (optional) 700.00

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

14020354202

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A.
Full Name (Last, First, Middle Initial): CHRIS JOHNSON
Mailing Address: 1575 WEST 7TH ST
City: SAINT PAUL
State: MN
Zip Code: 55102
FEC ID number of contributing federal political committee: C
Name of Employer: SELF
Occupation: OWNER
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 250.00
Date of Receipt: 12 / 27 / 2013
Transaction ID : SA11AI.5096
Amount of Each Receipt this Period: 250.00
VANCO

B.
Full Name (Last, First, Middle Initial): ANDREW KOLLAR III
Mailing Address: 1443 RICE CREEK RD NE
City: FRIDLEY
State: MN
Zip Code: 55432
FEC ID number of contributing federal political committee: C
Name of Employer: UNIVERSAL CHIROPRACTIC HEALTH
Occupation:
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 500.00
Date of Receipt: 12 / 15 / 2013
Transaction ID : SA11AI.4996
Amount of Each Receipt this Period: 500.00

C.
Full Name (Last, First, Middle Initial): PETER LADD
Mailing Address: 1089 A ROBERT ST
City: W ST PAUL
State: MN
Zip Code: 55118
FEC ID number of contributing federal political committee: C
Name of Employer: W ST PAUL CHIRO
Occupation: OWNER
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 250.00
Date of Receipt: 12 / 27 / 2013
Transaction ID : SA11AI.5097
Amount of Each Receipt this Period: 250.00
VANCO

SUBTOTAL of Receipts This Page (optional) 1000.00

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

14020354203

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A.
Full Name (Last, First, Middle Initial): JEFFREY M LAVELL
Mailing Address: 2900 COSTA LN
City: LITTLE CANADA
State: MN
Zip Code: 55117
FEC ID number of contributing federal political committee: C
Name of Employer: SPECIFIC FAMILY CHIRO & WELLNE
Occupation: CHIROPRACTOR
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 250.00
Date of Receipt: 10 / 03 / 2013
Transaction ID : SA11AI.5037
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial): JEFF LINDOO
Mailing Address: 2107 RIDGEWOOD DR NW
City: ALEXANDRIA
State: MN
Zip Code: 56308
FEC ID number of contributing federal political committee: C
Name of Employer: THRIFTY WHITE PHARMACY
Occupation: PHARMACIST
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 250.00
Date of Receipt: 10 / 20 / 2013
Transaction ID : SA11AI.5051
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial): LINDA MARQUARDT
Mailing Address: 1602 ASH STREET
City: ALEXANDRIA
State: MN
Zip Code: 56308
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation: SELF EMPLOYED
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 867.50
Date of Receipt: 11 / 01 / 2013
Transaction ID : SA11AI.5188
Amount of Each Receipt this Period: 597.50
In-kind - November Rent- Alexandria Office

SUBTOTAL of Receipts This Page (optional) 1097.50

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

14020354204

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A.
Full Name (Last, First, Middle Initial): LINDA MARQUARDT
Mailing Address: 1602 ASH STREET
City: ALEXANDRIA
State: MN
Zip Code: 56308
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation: SELF EMPLOYED
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 1491.93

Date of Receipt: 12 / 01 / 2013
Transaction ID : SA11AI.5190
Amount of Each Receipt this Period: 624.43
In-kind - December Rent- Alexandria

B.
Full Name (Last, First, Middle Initial): MICHAEL MARQUARDT
Mailing Address: 1602 ASH STREET
City: ALEXANDRIA
State: MN
Zip Code: 56308
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation: SELF EMPLOYED
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 1208.65

Date of Receipt: 10 / 01 / 2013
Transaction ID : SA11AI.5186
Amount of Each Receipt this Period: 612.56
In-kind - October Rent- Alexandria Office

C.
Full Name (Last, First, Middle Initial): JAY MCLAREN
Mailing Address: 515 HARBOR COURT
City: SHOREVIEW
State: MN
Zip Code: 55126
FEC ID number of contributing federal political committee: C
Name of Employer: MEDICA
Occupation: LOBBYIST
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 225.00

Date of Receipt: 11 / 25 / 2013
Transaction ID : SA11AI.4950
Amount of Each Receipt this Period: 125.00

SUBTOTAL of Receipts This Page (optional) 1361.99

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

14020354205

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A.
Full Name (Last, First, Middle Initial): LUCIA MCLAREN
Mailing Address: 515 HARBOR COURT
City: SHOREVIEW State: MN Zip Code: 55126
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation: HOMEMAKER
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 225.00
Date of Receipt: 11 / 25 / 2013
Transaction ID : SA11AI.4951
Amount of Each Receipt this Period: 125.00

B.
Full Name (Last, First, Middle Initial): QUIRK J MICHAEL
Mailing Address: 1406 E. 40TH ST. SUITE 1
City: HIBBING State: MN Zip Code: 55746
FEC ID number of contributing federal political committee: C
Name of Employer: QUIRK CHIROPRACTIC
Occupation:
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 250.00
Date of Receipt: 11 / 09 / 2013
Transaction ID : SA11AI.4960
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial): ALAN NEUMANN
Mailing Address: 2380 59TH ST
City: BUFFALO State: MN Zip Code: 55313
FEC ID number of contributing federal political committee: C
Name of Employer: CORNER MEDICAL
Occupation: OWNER
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 2500.00
Date of Receipt: 12 / 28 / 2013
Transaction ID : SA11AI.5098
Amount of Each Receipt this Period: 2500.00
VANCO

SUBTOTAL of Receipts This Page (optional) 2875.00

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

14020354206

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A.
Full Name (Last, First, Middle Initial): BARNES M PATRICK
Mailing Address: 4470 HARBOR PLACE DRIVE
City: SHOREVIEW State: MN Zip Code: 55126
FEC ID number of contributing federal political committee: C
Name of Employer: SELF EMPLOYED
Occupation: CHIROPRACTOR
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 250.00
Date of Receipt: 11 / 04 / 2013
Transaction ID : SA11AI.4974
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial): DAVID P PHILIPS
Mailing Address: 8050 PENN AVE S #525
City: BLOOMINGTON State: MN Zip Code: 55420
FEC ID number of contributing federal political committee: C
Name of Employer: VIPER CERVICAL CHIROPRACTIC
Occupation: VC CHIROPRACTOR
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 286.00
Date of Receipt: 10 / 01 / 2013
Transaction ID : SA11AI.5055
Amount of Each Receipt this Period: 286.00

C.
Full Name (Last, First, Middle Initial): NATHAN SAJ
Mailing Address: 1610 HWY 52
City: ROCHESTER State: MN Zip Code: 55901
FEC ID number of contributing federal political committee: C
Name of Employer: ABSOLUTE CHIROPRACTIC
Occupation:
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 260.00
Date of Receipt: 11 / 04 / 2013
Transaction ID : SA11AI.4961
Amount of Each Receipt this Period: 260.00

SUBTOTAL of Receipts This Page (optional) 796.00

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

14020354207

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A.
Full Name (Last, First, Middle Initial): STEVE SCHAMS
Mailing Address: 306 MAIN ST, STE 1
City: LA CRESCENT State: MN Zip Code: 55947
FEC ID number of contributing federal political committee: C
Name of Employer: SCHAMS CHIROPRACTIC
Occupation:
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 260.00
Date of Receipt: 11 / 04 / 2013
Transaction ID : SA11AI.4969
Amount of Each Receipt this Period: 260.00

B.
Full Name (Last, First, Middle Initial): KEITH R SCHLEPER
Mailing Address: 39 8TH AVE N
City: WAITE PARK State: MN Zip Code: 56387
FEC ID number of contributing federal political committee: C
Name of Employer: CHIROPRACTIC CONNECTION
Occupation:
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 250.00
Date of Receipt: 11 / 05 / 2013
Transaction ID : SA11AI.4962
Amount of Each Receipt this Period: 250.00

C.
Full Name (Last, First, Middle Initial): BRIAN SCHMITZ
Mailing Address: 2837 209TH LANE
City: OAK GROVE State: MN Zip Code: 55011
FEC ID number of contributing federal political committee: C
Name of Employer: RUM RIVER CHIRO
Occupation:
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 260.00
Date of Receipt: 12 / 03 / 2013
Transaction ID : SA11AI.5090
Amount of Each Receipt this Period: 260.00
VANCO

SUBTOTAL of Receipts This Page (optional) 770.00

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

14020354208

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

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

FOR LINE NUMBER: (check only one)
[X] 11a [ ] 11b [ ] 11c [ ] 11d
[ ] 12 [ ] 13a [ ] 13b [ ] 14 [ ] 15

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A.
Full Name (Last, First, Middle Initial): CHARLES STRAUMAN
Mailing Address: 17238 MILLWOOD RD
City: MINNETONKA
State: MN
Zip Code: 55345
FEC ID number of contributing federal political committee: C
Name of Employer: STRAUMAN HOLISTIC CHIROPRACTIC
Occupation: CHIROPRACTOR
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 250.00

Date of Receipt: 11 / 09 / 2013
Transaction ID : SA11AI.4990
Amount of Each Receipt this Period: 250.00

B.
Full Name (Last, First, Middle Initial): THOMAS WILSON
Mailing Address: 1353 BURROUGHS RD
City: DETROIT LAKES
State: MN
Zip Code: 56591
FEC ID number of contributing federal political committee: C
Name of Employer: SELF
Occupation: D.C.
Receipt For: 2014
[X] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date: 250.00

Date of Receipt: 12 / 30 / 2013
Transaction ID : SA11AI.5107
Amount of Each Receipt this Period: 250.00
VANCO

C.
Full Name (Last, First, Middle Initial):
Mailing Address:
City:
State:
Zip Code:
FEC ID number of contributing federal political committee: C
Name of Employer:
Occupation:
Receipt For:
[ ] Primary [ ] General
[ ] Other (specify)
Election Cycle-to-Date:

Date of Receipt: / /
Amount of Each Receipt this Period:

SUBTOTAL of Receipts This Page (optional) 500.00

TOTAL This Period (last page this line number only) 19180.49

14020354209

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A. Full Name (Last, First, Middle Initial)
BARB ABELER

Mailing Address 600 EAST MAIN STREET

City: ANOKA State: MN Zip Code: 55303

Purpose of Disbursement: REIMBURSEMENTS- ITEMIZED

Category/Type: 002

Candidate Name: ABELER4SENATE

Office Sought: [ ] House [X] Senate [ ] President

State: MN District:

Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 12 / 16 / 2013

Amount of Each Disbursement this Period: 1766.28

Transaction ID : SB17.5161

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

Mailing Address 12547 RIVERDALE BLVD

City: COON RAPIDS State: MN Zip Code: 55303

Purpose of Disbursement: gas

Category/Type: 002

Candidate Name: ABELER4SENATE

Office Sought: [ ] House [X] Senate [ ] President

State: MN District:

Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 07 / 03 / 2013

Amount of Each Disbursement this Period: 145.60

Transaction ID : SB17.5161.8

[MEMO ITEM]

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

Mailing Address 12547 RIVERDALE BLVD

City: COON RAPIDS State: MN Zip Code: 55303

Purpose of Disbursement: gas

Category/Type: 002

Candidate Name: ABELER4SENATE

Office Sought: [ ] House [X] Senate [ ] President

State: MN District:

Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 22 / 2013

Amount of Each Disbursement this Period: 71.25

Transaction ID : SB17.5161.9

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) 1766.28

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

14020354210

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A.
Full Name (Last, First, Middle Initial): COSTCO
Mailing Address: 12547 RIVERDALE BLVD
City: COON RAPIDS State: MN Zip Code: 55303
Purpose of Disbursement: gas
Category/Type: 002
Candidate Name: ABELER4SENATE
Office Sought: [ ] House [X] Senate [ ] President
State: MN District:
Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 16 / 2013
Amount of Each Disbursement this Period: 66.25
Transaction ID : SB17.5161.10
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial): COSTCO
Mailing Address: 12547 RIVERDALE BLVD
City: COON RAPIDS State: MN Zip Code: 55303
Purpose of Disbursement: gas
Category/Type: 002
Candidate Name: ABELER4SENATE
Office Sought: [ ] House [X] Senate [ ] President
State: MN District:
Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 08 / 2013
Amount of Each Disbursement this Period: 38.00
Transaction ID : SB17.5161.11
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial): COSTCO
Mailing Address: 12547 RIVERDALE BLVD
City: COON RAPIDS State: MN Zip Code: 55303
Purpose of Disbursement: gas
Category/Type: 002
Candidate Name: ABELER4SENATE
Office Sought: [ ] House [X] Senate [ ] President
State: MN District:
Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 25 / 2013
Amount of Each Disbursement this Period: 68.50
Transaction ID : SB17.5161.12
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) 0.00

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

14020354211

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

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

Mailing Address 12547 RIVERDALE BLVD

City: COON RAPIDS State: MN Zip Code: 55303

Purpose of Disbursement: gas

Category/Type: 002

Candidate Name: ABELER4SENATE

Office Sought: [ ] House [X] Senate [ ] President

State: MN District:

Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 23 / 2013

Amount of Each Disbursement this Period: 64.26

Transaction ID : SB17.5161.13

[MEMO ITEM]

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

Mailing Address 12547 RIVERDALE BLVD

City: COON RAPIDS State: MN Zip Code: 55303

Purpose of Disbursement: gas

Category/Type: 002

Candidate Name: ABELER4SENATE

Office Sought: [ ] House [X] Senate [ ] President

State: MN District:

Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 03 / 2013

Amount of Each Disbursement this Period: 42.36

Transaction ID : SB17.5161.14

[MEMO ITEM]

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

Mailing Address 12547 RIVERDALE BLVD

City: COON RAPIDS State: MN Zip Code: 55303

Purpose of Disbursement: gas

Category/Type: 002

Candidate Name: ABELER4SENATE

Office Sought: [ ] House [X] Senate [ ] President

State: MN District:

Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 06 / 2013

Amount of Each Disbursement this Period: 77.80

Transaction ID : SB17.5161.15

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) 0.00

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

14020354212

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A. Full Name (Last, First, Middle Initial): COSTCO
Mailing Address: 12547 RIVERDALE BLVD
City: COON RAPIDS State: MN Zip Code: 55303
Purpose of Disbursement: gas
Category/Type: 002
Candidate Name: ABELER4SENATE
Office Sought: [ ] House [X] Senate [ ] President
State: MN District:
Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 06 / 2013
Amount of Each Disbursement this Period: 48.05
Transaction ID : SB17.5161.16
[MEMO ITEM]

B. Full Name (Last, First, Middle Initial): COSTCO
Mailing Address: 12547 RIVERDALE BLVD
City: COON RAPIDS State: MN Zip Code: 55303
Purpose of Disbursement: gas
Category/Type: 002
Candidate Name: ABELER4SENATE
Office Sought: [ ] House [X] Senate [ ] President
State: MN District:
Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 09 / 16 / 2013
Amount of Each Disbursement this Period: 36.59
Transaction ID : SB17.5161.17
[MEMO ITEM]

C. Full Name (Last, First, Middle Initial): COSTCO
Mailing Address: 12547 RIVERDALE BLVD
City: COON RAPIDS State: MN Zip Code: 55303
Purpose of Disbursement: gas
Category/Type: 002
Candidate Name: ABELER4SENATE
Office Sought: [ ] House [X] Senate [ ] President
State: MN District:
Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 02 / 2013
Amount of Each Disbursement this Period: 68.15
Transaction ID : SB17.5161.18
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) 0.00

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

14020354213

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A.
Full Name (Last, First, Middle Initial): COSTCO
Mailing Address: 12547 RIVERDALE BLVD
City: COON RAPIDS State: MN Zip Code: 55303
Purpose of Disbursement: gas for Alex
Category/Type: 002
Candidate Name: ABELER4SENATE
Office Sought: [ ] House [X] Senate [ ] President
State: MN District:
Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 11 / 2013
Amount of Each Disbursement this Period: 34.83
Transaction ID : SB17.5161.19
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial): COSTCO
Mailing Address: 12547 RIVERDALE BLVD
City: COON RAPIDS State: MN Zip Code: 55303
Purpose of Disbursement: gas
Category/Type: 002
Candidate Name: ABELER4SENATE
Office Sought: [ ] House [X] Senate [ ] President
State: MN District:
Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 31 / 2013
Amount of Each Disbursement this Period: 29.77
Transaction ID : SB17.5161.20
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial): COSTCO
Mailing Address: 12547 RIVERDALE BLVD
City: COON RAPIDS State: MN Zip Code: 55303
Purpose of Disbursement: gas
Category/Type: 002
Candidate Name: ABELER4SENATE
Office Sought: [ ] House [X] Senate [ ] President
State: MN District:
Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 11 / 2013
Amount of Each Disbursement this Period: 51.65
Transaction ID : SB17.5161.21
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) 0.00

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

14020354214

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A.
Full Name (Last, First, Middle Initial): COSTCO
Mailing Address: 12547 RIVERDALE BLVD
City: COON RAPIDS State: MN Zip Code: 55303
Purpose of Disbursement: gas
Category/Type: 002
Candidate Name: ABELER4SENATE
Office Sought: [ ] House [X] Senate [ ] President
State: MN District:
Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 15 / 2013
Amount of Each Disbursement this Period: 18.75
Transaction ID : SB17.5161.22
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial): COSTCO
Mailing Address: 12547 RIVERDALE BLVD
City: COON RAPIDS State: MN Zip Code: 55303
Purpose of Disbursement: gas
Category/Type: 002
Candidate Name: ABELER4SENATE
Office Sought: [ ] House [X] Senate [ ] President
State: MN District:
Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 14 / 2013
Amount of Each Disbursement this Period: 51.00
Transaction ID : SB17.5161.23
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial): COSTCO
Mailing Address: 12547 RIVERDALE BLVD
City: COON RAPIDS State: MN Zip Code: 55303
Purpose of Disbursement: gas
Category/Type: 002
Candidate Name: ABELER4SENATE
Office Sought: [ ] House [X] Senate [ ] President
State: MN District:
Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 17 / 2013
Amount of Each Disbursement this Period: 36.75
Transaction ID : SB17.5161.24
[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) 0.00

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

14020354215

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A.
Full Name (Last, First, Middle Initial): COSTCO
Mailing Address: 12547 RIVERDALE BLVD
City: COON RAPIDS State: MN Zip Code: 55303
Purpose of Disbursement: gas
Category/Type: 002
Candidate Name: ABELER4SENATE
Office Sought: [ ] House [X] Senate [ ] President
State: MN District:
Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 13 / 2013
Amount of Each Disbursement this Period: 66.15
Transaction ID : SB17.5161.25
[MEMO ITEM]

B.
Full Name (Last, First, Middle Initial): COSTCO
Mailing Address: 12547 RIVERDALE BLVD
City: COON RAPIDS State: MN Zip Code: 55303
Purpose of Disbursement: gas
Category/Type: 002
Candidate Name: ABELER4SENATE
Office Sought: [ ] House [X] Senate [ ] President
State: MN District:
Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 29 / 2013
Amount of Each Disbursement this Period: 41.25
Transaction ID : SB17.5161.26
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial): BARB ABELER
Mailing Address: 600 EAST MAIN STREET
City: ANOKA State: MN Zip Code: 55303
Purpose of Disbursement: REIMBURSE GAS
Category/Type: 002
Candidate Name: ABELER4SENATE
Office Sought: [ ] House [X] Senate [ ] President
State: MN District:
Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 30 / 2013
Amount of Each Disbursement this Period: 405.38
Transaction ID : SB17.5172

SUBTOTAL of Disbursements This Page (optional) 405.38

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

14020354216

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A.
Full Name (Last, First, Middle Initial): Rep. JAMES J ABELER
Mailing Address: 600 EAST MAIN STREET
City: ANOKA State: MN Zip Code: 55303
Purpose of Disbursement: REIMBURSEMENTS- ITEMIZED
Category/Type: 006
Candidate Name: ABELER4SENATE
Office Sought: [ ] House [X] Senate [ ] President
State: MN District:
Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 17 / 2013
Amount of Each Disbursement this Period: 81.32
Transaction ID : SB17.5162

B.
Full Name (Last, First, Middle Initial): COSTCO
Mailing Address: 12547 RIVERDALE BLVD
City: COON RAPIDS State: MN Zip Code: 55303
Purpose of Disbursement: PHOTO PRINTING/ IMAGES TO DVD
Category/Type: 006
Candidate Name: ABELER4SENATE
Office Sought: [ ] House [X] Senate [ ] President
State: MN District:
Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 23 / 2013
Amount of Each Disbursement this Period: 23.68
Transaction ID : SB17.5162.3
[MEMO ITEM]

C.
Full Name (Last, First, Middle Initial): Rep. JAMES J ABELER
Mailing Address: 600 EAST MAIN STREET
City: ANOKA State: MN Zip Code: 55303
Purpose of Disbursement: REIMBURSE CAMPAIGN BOOK AMAZON- SEE TRANSACTION SPLIT
Category/Type: 006
Candidate Name: Rep. JAMES J ABELER
Office Sought: [ ] House [X] Senate [ ] President
State: MN District:
Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 17 / 2013
Amount of Each Disbursement this Period: 18.83
Transaction ID : SB17.5163

SUBTOTAL of Disbursements This Page (optional) 100.15

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

14020354217

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A. Full Name (Last, First, Middle Initial)
Rep. JAMES J ABELER

Mailing Address 600 EAST MAIN STREET

City: ANOKA State: MN Zip Code: 55303

Purpose of Disbursement: REIMBURSE FOOD FOR VOLUNTEERS- ITEMIZED

Category/Type: 007

Candidate Name: ABELER4SENATE

Office Sought: [ ] House [X] Senate [ ] President

State: MN District:

Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 12 / 17 / 2013

Amount of Each Disbursement this Period: 88.65

Transaction ID : SB17.5164

B. Full Name (Last, First, Middle Initial)
ABELER CHIROPRACTIC

Mailing Address 300 E MAIN ST

City: ANOKA State: MN Zip Code: 55303

Purpose of Disbursement: REIMBURSE OFFICE SERVICES

Category/Type: 001

Candidate Name: ABELER4SENATE

Office Sought: [ ] House [X] Senate [ ] President

State: MN District:

Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 12 / 26 / 2013

Amount of Each Disbursement this Period: 210.00

Transaction ID : SB17.5176

C. Full Name (Last, First, Middle Initial)
ABELER PROPERTIES

Mailing Address 600 E MAIN ST

City: ANOKA State: MN Zip Code: 55303

Purpose of Disbursement: OFFICE SPACE RENTAL OLD POST OFFICE

Category/Type: 001

Candidate Name: ABELER4SENATE

Office Sought: [ ] House [X] Senate [ ] President

State: MN District:

Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 01 / 2013

Amount of Each Disbursement this Period: 3400.00

Transaction ID : SB17.5143

SUBTOTAL of Disbursements This Page (optional) 3698.65

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

14020354218

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A.
Full Name (Last, First, Middle Initial): Dave Abeler
Mailing Address: 3800 Mississippi Dr NW
City: Coon Rapids State: MN Zip Code: 55448
Purpose of Disbursement: Campaign Design Work
Category/Type: 006
Candidate Name: ABELER4SENATE
Office Sought: [ ] House [X] Senate [ ] President
State: MN District:
Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 04 / 2013
Amount of Each Disbursement this Period: 1000.00
Transaction ID : SB17.5178

B.
Full Name (Last, First, Middle Initial): Dave Abeler
Mailing Address: 3800 Mississippi Dr NW
City: Coon Rapids State: MN Zip Code: 55448
Purpose of Disbursement: Campaign Design Work
Category/Type: 006
Candidate Name: ABELER4SENATE
Office Sought: [ ] House [X] Senate [ ] President
State: MN District:
Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 19 / 2013
Amount of Each Disbursement this Period: 1059.00
Transaction ID : SB17.5179

C.
Full Name (Last, First, Middle Initial): ENDLESS SKY PRODUCTIONS
Mailing Address: 2751 HENNEPIN AVE S #32
City: MINNEAPOLIS State: MN Zip Code: 55408
Purpose of Disbursement: MEDIA SERVICES, VIDEO
Category/Type: 004
Candidate Name: ABELER4SENATE
Office Sought: [ ] House [X] Senate [ ] President
State: MN District:
Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 18 / 2013
Amount of Each Disbursement this Period: 500.00
Transaction ID : SB17.5148

SUBTOTAL of Disbursements This Page (optional) 2559.00

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

14020354219

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A.
Full Name (Last, First, Middle Initial)
ENDLESS SKY PRODUCTIONS

Mailing Address 2751 HENNEPIN AVE S #32

City: MINNEAPOLIS State: MN Zip Code: 55408

Purpose of Disbursement: MEDIA SERVICES, VIDEO, WRITING, CONSULTING

Category/Type: 004

Candidate Name: ABELER4SENATE

Office Sought: [ ] House [X] Senate [ ] President

State: MN District:

Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 25 / 2013

Amount of Each Disbursement this Period: 500.00

Transaction ID : SB17.5149

B.
Full Name (Last, First, Middle Initial)
ENDLESS SKY PRODUCTIONS

Mailing Address 2751 HENNEPIN AVE S #32

City: MINNEAPOLIS State: MN Zip Code: 55408

Purpose of Disbursement: MEDIA SERVICES

Category/Type: 004

Candidate Name: ABELER4SENATE

Office Sought: [ ] House [X] Senate [ ] President

State: MN District:

Disbursement For: 2014 [ ] Primary [ ] General [X] Other (specify) 2014

Date of Disbursement: 12 / 05 / 2013

Amount of Each Disbursement this Period: 869.00

Transaction ID : SB17.5150

C.
Full Name (Last, First, Middle Initial)
ENDLESS SKY PRODUCTIONS

Mailing Address 2751 HENNEPIN AVE S #32

City: MINNEAPOLIS State: MN Zip Code: 55408

Purpose of Disbursement: MEDIA SERVICES

Category/Type: 004

Candidate Name: ABELER4SENATE

Office Sought: [ ] House [X] Senate [ ] President

State: MN District:

Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 12 / 10 / 2013

Amount of Each Disbursement this Period: 500.00

Transaction ID : SB17.5151

SUBTOTAL of Disbursements This Page (optional) 1869.00

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

14020354220

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

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[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A.
Full Name (Last, First, Middle Initial): ENDLESS SKY PRODUCTIONS
Mailing Address: 2751 HENNEPIN AVE S #32
City: MINNEAPOLIS State: MN Zip Code: 55408
Purpose of Disbursement: MEDIA SERVICES
Category/Type: 004
Candidate Name: ABELER4SENATE
Office Sought: [ ] House [X] Senate [ ] President
State: MN District:
Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 17 / 2013
Amount of Each Disbursement this Period: 1000.00
Transaction ID : SB17.5152

B.
Full Name (Last, First, Middle Initial): ENDLESS SKY PRODUCTIONS
Mailing Address: 2751 HENNEPIN AVE S #32
City: MINNEAPOLIS State: MN Zip Code: 55408
Purpose of Disbursement: MEDIA SERVICES
Category/Type: 004
Candidate Name: ABELER4SENATE
Office Sought: [ ] House [X] Senate [ ] President
State: MN District:
Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 23 / 2013
Amount of Each Disbursement this Period: 500.00
Transaction ID : SB17.5153

C.
Full Name (Last, First, Middle Initial): ERIC MARQUARDT
Mailing Address: 8944 DYRUD LN
City: OSAKIS State: MN Zip Code: 56360
Purpose of Disbursement: REIMBURSE FOR PRINTING FROM DO ALL
Category/Type: 006
Candidate Name: ABELER4SENATE
Office Sought: [ ] House [X] Senate [ ] President
State: MN District:
Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 04 / 2013
Amount of Each Disbursement this Period: 271.77
Transaction ID : SB17.5144

SUBTOTAL of Disbursements This Page (optional) 1771.77

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

14020354221

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A. Full Name (Last, First, Middle Initial)
DO ALL PRINTING

Mailing Address 6360 HWY 10 NW

City: RAMSEY State: MN Zip Code: 55303

Purpose of Disbursement
Eric paid for the printing, and was reimbursed

Category/Type: 004

Candidate Name
ABELER4SENATE

Office Sought: [ ] House [X] Senate [ ] President
State: MN District:

Disbursement For: 2014
[X] Primary [ ] General
[ ] Other (specify)

Date of Disbursement: 10 / 30 / 2013

Amount of Each Disbursement this Period: 271.77

Transaction ID : SB17.5144.0

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
ERIC MARQUARDT

Mailing Address 8944 DYRUD LN

City: OSAKIS State: MN Zip Code: 56360

Purpose of Disbursement
REIMBURSE USR STEREO/HEADSET

Category/Type: 001

Candidate Name
ABELER4SENATE

Office Sought: [ ] House [X] Senate [ ] President
State: MN District:

Disbursement For: 2014
[X] Primary [ ] General
[ ] Other (specify)

Date of Disbursement: 12 / 03 / 2013

Amount of Each Disbursement this Period: 174.75

Transaction ID : SB17.5146

C. Full Name (Last, First, Middle Initial)
ERIC MARQUARDT

Mailing Address 8944 DYRUD LN

City: OSAKIS State: MN Zip Code: 56360

Purpose of Disbursement
REIMBURSE FOR COFFEE MAKER & TEA-WALGREENS

Category/Type: 001

Candidate Name
ABELER4SENATE

Office Sought: [ ] House [X] Senate [ ] President
State: MN District:

Disbursement For: 2014
[X] Primary [ ] General
[ ] Other (specify)

Date of Disbursement: 12 / 23 / 2013

Amount of Each Disbursement this Period: 59.56

Transaction ID : SB17.5168

SUBTOTAL of Disbursements This Page (optional) 234.31

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

14020354222

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A. Full Name (Last, First, Middle Initial)
LINDA MARQUARDT

Mailing Address 1602 ASH STREET

City: ALEXANDRIA State: MN Zip Code: 56308

Purpose of Disbursement: In-kind - November Rent- Alexandria Office

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 01 / 2013

Amount of Each Disbursement this Period: 597.50

Transaction ID : SB17.5189

B. Full Name (Last, First, Middle Initial)
LINDA MARQUARDT

Mailing Address 1602 ASH STREET

City: ALEXANDRIA State: MN Zip Code: 56308

Purpose of Disbursement: In-kind - December Rent- Alexandria

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 12 / 01 / 2013

Amount of Each Disbursement this Period: 624.43

Transaction ID : SB17.5191

C. Full Name (Last, First, Middle Initial)
MICHAEL MARQUARDT

Mailing Address 1602 ASH STREET

City: ALEXANDRIA State: MN Zip Code: 56308

Purpose of Disbursement: In-kind - October Rent- Alexandria Office

Candidate Name

Category/Type

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 01 / 2013

Amount of Each Disbursement this Period: 612.56

Transaction ID : SB17.5187

SUBTOTAL of Disbursements This Page (optional) 1834.49

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

14020354223

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

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

Mailing Address 2211 North First Street

City: San Jose | State: CA | Zip Code: 95131

Purpose of Disbursement: CREDIT CARD PROC FEES

Category/Type: 003

Candidate Name: ABELER4SENATE

Office Sought: [ ] House [X] Senate [ ] President

State: MN District:

Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 12 / 30 / 2013

Amount of Each Disbursement this Period: 30.82

Transaction ID : SB17.5198

B. Full Name (Last, First, Middle Initial)
PRESTO GRAPHICS

Mailing Address 848 E River Rd

City: ANOKA | State: MN | Zip Code: 55303

Purpose of Disbursement: PRINT LETTERS, BROCHURE CARDS, BUSINESS CARDS

Category/Type: 006

Candidate Name: ABELER4SENATE

Office Sought: [ ] House [X] Senate [ ] President

State: MN District:

Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 24 / 2013

Amount of Each Disbursement this Period: 852.57

Transaction ID : SB17.5133

C. Full Name (Last, First, Middle Initial)
PRESTO GRAPHICS

Mailing Address 848 E River Rd

City: ANOKA | State: MN | Zip Code: 55303

Purpose of Disbursement: PAPERSTOCK TRIMMED

Category/Type: 006

Candidate Name: ABELER4SENATE

Office Sought: [ ] House [X] Senate [ ] President

State: MN District:

Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 12 / 27 / 2013

Amount of Each Disbursement this Period: 5.36

Transaction ID : SB17.5173

SUBTOTAL of Disbursements This Page (optional) 888.75

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

14020354224

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A.
Full Name (Last, First, Middle Initial): PRESTO GRAPHICS
Mailing Address: 848 E River Rd
City: ANOKA State: MN Zip Code: 55303
Purpose of Disbursement: PRINTING PIN CARD
Category/Type: 006
Candidate Name: ABELER4SENATE
Office Sought: [ ] House [X] Senate [ ] President
State: MN District:
Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 30 / 2013
Amount of Each Disbursement this Period: 236.71
Transaction ID : SB17.5171

B.
Full Name (Last, First, Middle Initial): REBYL SPORTS
Mailing Address: 295 NORTHDALE BLVD NW
City: COON RAPIDS State: MN Zip Code: 55448
Purpose of Disbursement: REIMBURSE FOOD COSTCO
Category/Type: 003
Candidate Name: ABELER4SENATE
Office Sought: [ ] House [X] Senate [ ] President
State: MN District:
Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 10 / 21 / 2013
Amount of Each Disbursement this Period: 351.50
Transaction ID : SB17.5138

C.
Full Name (Last, First, Middle Initial): REBYL SPORTS
Mailing Address: 295 NORTHDALE BLVD NW
City: COON RAPIDS State: MN Zip Code: 55448
Purpose of Disbursement: 110 TEE PRINTED SHIRTS
Category/Type: 006
Candidate Name: ABELER4SENATE
Office Sought: [ ] House [X] Senate [ ] President
State: MN District:
Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 12 / 30 / 2013
Amount of Each Disbursement this Period: 674.98
Transaction ID : SB17.5170

SUBTOTAL of Disbursements This Page (optional) 1263.19

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

14020354225

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A. Full Name (Last, First, Middle Initial)
SPEEDPRO IMAGING

Mailing Address 8090 UNIVERSITY AVE NE

City: FRIDLEY State: MN Zip Code: 55432

Purpose of Disbursement: BANNER PRODUCTION

Category/Type: 006

Candidate Name:

Office Sought: [ ] House [ ] Senate [ ] President

State: District:

Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 08 / 2013

Amount of Each Disbursement this Period: 171.40

Transaction ID : SB17.5113

B. Full Name (Last, First, Middle Initial)
WARD & CO.

Mailing Address 1918 1ST AVE, ANOKA

City: ANOKA State: MN Zip Code: 55303

Purpose of Disbursement: REIMBURSE FOR OFFICE SERVICES

Category/Type: 001

Candidate Name: ABELER4SENATE

Office Sought: [ ] House [X] Senate [ ] President

State: MN District:

Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 12 / 26 / 2013

Amount of Each Disbursement this Period: 282.00

Transaction ID : SB17.5169

C. Full Name (Last, First, Middle Initial)
WORLD DATA CORPORATION

Mailing Address 8944 DYRUD LANE

City: OSAKIS State: MN Zip Code: 56360

Purpose of Disbursement: INVOICE 152

Category/Type: 001

Candidate Name: ABELER4SENATE

Office Sought: [ ] House [X] Senate [ ] President

State: MN District:

Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 10 / 07 / 2013

Amount of Each Disbursement this Period: 1170.00

Transaction ID : SB17.5112

SUBTOTAL of Disbursements This Page (optional) 1623.40

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

14020354226

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
[X] 17 [ ] 18 [ ] 19a [ ] 19b
[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A. Full Name (Last, First, Middle Initial)
WORLD DATA CORPORATION

Mailing Address 8944 DYRUD LANE

City: OSAKIS State: MN Zip Code: 56360

Purpose of Disbursement: INVOICE 153

Category/Type: 001

Candidate Name: ABELER4SENATE

Office Sought: [ ] House [X] Senate [ ] President
State: MN District:

Disbursement For: 2014
[X] Primary [ ] General
[ ] Other (specify)

Date of Disbursement: 10 / 11 / 2013

Amount of Each Disbursement this Period: 1205.00

Transaction ID : SB17.5114

B. Full Name (Last, First, Middle Initial)
WORLD DATA CORPORATION

Mailing Address 8944 DYRUD LANE

City: OSAKIS State: MN Zip Code: 56360

Purpose of Disbursement: INVOICES 154, 155, 156

Category/Type: 001

Candidate Name: ABELER4SENATE

Office Sought: [ ] House [X] Senate [ ] President
State: MN District:

Disbursement For: 2014
[X] Primary [ ] General
[ ] Other (specify)

Date of Disbursement: 10 / 18 / 2013

Amount of Each Disbursement this Period: 1177.91

Transaction ID : SB17.5115

C. Full Name (Last, First, Middle Initial)
WORLD DATA CORPORATION

Mailing Address 8944 DYRUD LANE

City: OSAKIS State: MN Zip Code: 56360

Purpose of Disbursement: INVOICES 157, 158

Category/Type: 001

Candidate Name: ABELER4SENATE

Office Sought: [ ] House [X] Senate [ ] President
State: MN District:

Disbursement For: 2014
[X] Primary [ ] General
[ ] Other (specify)

Date of Disbursement: 10 / 28 / 2013

Amount of Each Disbursement this Period: 1370.88

Transaction ID : SB17.5116

SUBTOTAL of Disbursements This Page (optional) 3753.79

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

14020354227

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A. Full Name (Last, First, Middle Initial)
WORLD DATA CORPORATION

Mailing Address 8944 DYRUD LANE

City: OSAKIS State: MN Zip Code: 56360

Purpose of Disbursement: INVOICE 159

Category/Type: 001

Candidate Name: ABELER4SENATE

Office Sought: [ ] House [X] Senate [ ] President
State: MN District:

Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 04 / 2013

Amount of Each Disbursement this Period: 1401.50

Transaction ID : SB17.5118

B. Full Name (Last, First, Middle Initial)
WORLD DATA CORPORATION

Mailing Address 8944 DYRUD LANE

City: OSAKIS State: MN Zip Code: 56360

Purpose of Disbursement: INVOICE 160

Category/Type: 001

Candidate Name: ABELER4SENATE

Office Sought: [ ] House [X] Senate [ ] President
State: MN District:

Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 04 / 2013

Amount of Each Disbursement this Period: 520.00

Transaction ID : SB17.5119

C. Full Name (Last, First, Middle Initial)
WORLD DATA CORPORATION

Mailing Address 8944 DYRUD LANE

City: OSAKIS State: MN Zip Code: 56360

Purpose of Disbursement: INVOICE 161

Category/Type: 001

Candidate Name: ABELER4SENATE

Office Sought: [ ] House [X] Senate [ ] President
State: MN District:

Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 11 / 12 / 2013

Amount of Each Disbursement this Period: 1104.50

Transaction ID : SB17.5120

SUBTOTAL of Disbursements This Page (optional) 3026.00

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

14020354228

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A.
Full Name (Last, First, Middle Initial): WORLD DATA CORPORATION
Mailing Address: 8944 DYRUD LANE
City: OSAKIS State: MN Zip Code: 56360
Purpose of Disbursement: INVOICE 162
Category/Type: 001
Candidate Name: ABELER4SENATE
Office Sought: [ ] House [X] Senate [ ] President
State: MN District:
Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 18 / 2013
Amount of Each Disbursement this Period: 1176.00
Transaction ID : SB17.5122

B.
Full Name (Last, First, Middle Initial): WORLD DATA CORPORATION
Mailing Address: 8944 DYRUD LANE
City: OSAKIS State: MN Zip Code: 56360
Purpose of Disbursement: REIMBURSMENT FOR OFFICEMAX PRINTER
Category/Type: 001
Candidate Name: ABELER4SENATE
Office Sought: [ ] House [X] Senate [ ] President
State: MN District:
Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 18 / 2013
Amount of Each Disbursement this Period: 207.80
Transaction ID : SB17.5125

C.
Full Name (Last, First, Middle Initial): WORLD DATA CORPORATION
Mailing Address: 8944 DYRUD LANE
City: OSAKIS State: MN Zip Code: 56360
Purpose of Disbursement: REIMBURSE ST JAMES FUNDRAISER
Category/Type: 007
Candidate Name: ABELER4SENATE
Office Sought: [ ] House [X] Senate [ ] President
State: MN District:
Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)
Date of Disbursement: 11 / 22 / 2013
Amount of Each Disbursement this Period: 30.00
Transaction ID : SB17.5126

SUBTOTAL of Disbursements This Page (optional) 1413.80

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

14020354229

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A. Full Name (Last, First, Middle Initial)
WORLD DATA CORPORATION

Mailing Address 8944 DYRUD LANE

City: OSAKIS State: MN Zip Code: 56360

Purpose of Disbursement: INVOICE 163

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014
[X] Primary [ ] General
[ ] Other (specify)

Date of Disbursement: 11 / 22 / 2013

Amount of Each Disbursement this Period: 2626.80

Transaction ID : SB17.5127

B. Full Name (Last, First, Middle Initial)
WORLD DATA CORPORATION

Mailing Address 8944 DYRUD LANE

City: OSAKIS State: MN Zip Code: 56360

Purpose of Disbursement: INVOICE 165

Candidate Name:

Category/Type: 001

Office Sought: [ ] House [ ] Senate [ ] President
State: District:

Disbursement For: 2014
[X] Primary [ ] General
[ ] Other (specify)

Date of Disbursement: 12 / 03 / 2013

Amount of Each Disbursement this Period: 1484.90

Transaction ID : SB17.5128

C. Full Name (Last, First, Middle Initial)
WORLD DATA CORPORATION

Mailing Address 8944 DYRUD LANE

City: OSAKIS State: MN Zip Code: 56360

Purpose of Disbursement: INVOICE 166 (COMM)

Candidate Name: ABELER4SENATE

Category/Type: 001

Office Sought: [ ] House [X] Senate [ ] President
State: MN District:

Disbursement For: 2014
[X] Primary [ ] General
[ ] Other (specify)

Date of Disbursement: 12 / 03 / 2013

Amount of Each Disbursement this Period: 685.00

Transaction ID : SB17.5129

SUBTOTAL of Disbursements This Page (optional) 4796.70

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

14020354230

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)
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[ ] 20a [ ] 20b [ ] 20c [ ] 21

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NAME OF COMMITTEE (In Full)
ABELER4SENATE

A. Full Name (Last, First, Middle Initial)
WORLD DATA CORPORATION

Mailing Address 8944 DYRUD LANE

City: OSAKIS State: MN Zip Code: 56360

Purpose of Disbursement: INVOICE 167

Category/Type: 001

Candidate Name: ABELER4SENATE

Office Sought: [ ] House [X] Senate [ ] President

State: MN District:

Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 12 / 10 / 2013

Amount of Each Disbursement this Period: 1600.00

Transaction ID : SB17.5130

B. Full Name (Last, First, Middle Initial)
WORLD DATA CORPORATION

Mailing Address 8944 DYRUD LANE

City: OSAKIS State: MN Zip Code: 56360

Purpose of Disbursement: INVOICE 168

Category/Type: 001

Candidate Name: ABELER4SENATE

Office Sought: [ ] House [X] Senate [ ] President

State: MN District:

Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 12 / 17 / 2013

Amount of Each Disbursement this Period: 1948.30

Transaction ID : SB17.5131

C. Full Name (Last, First, Middle Initial)
WORLD DATA CORPORATION

Mailing Address 8944 DYRUD LANE

City: OSAKIS State: MN Zip Code: 56360

Purpose of Disbursement: INVOICE 169

Category/Type: 001

Candidate Name: ABELER4SENATE

Office Sought: [ ] House [X] Senate [ ] President

State: MN District:

Disbursement For: 2014 [X] Primary [ ] General [ ] Other (specify)

Date of Disbursement: 12 / 23 / 2013

Amount of Each Disbursement this Period: 1754.50

Transaction ID : SB17.5132

SUBTOTAL of Disbursements This Page (optional) 5302.80

TOTAL This Period (last page this line number only) 36307.46

14020354231

14020354232

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20013

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ANOKA, MN 55303

TO SECRETARY OF SENATE
OFFICE OF PUBLIC RECORDS
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NANCY ERICKSON
SECRETARY

DANA K. MCCALLUM
SUPERINTENDENT

HART SENATE OFFICE BLDG
SUITE 232
WASHINGTON, DC 20510-7116
PHONE (202) 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

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OVERNIGHT DELIVERY SERVICE:	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
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