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FORM 3

REPORT OF RECEIPTS AND DISBURSEMENTS

101111110	For An Au	Off	Office Use Only			
NAME OF COMMITTEE (in full)	TYPE OR PRINT		xample: If typing, type ver the lines.	12FE4M5		
Gerson for Congress	; 					
			1 1 1 1 1 1			
ADDRESS (number and street)	PO Box 1465					
▼						
Check if different than previously reported. (ACC)	Burnsville			MN 553	337	
	NUMBER W	CITY ▲		STATE ▲	ZIP CODE ▲	
C C00523738	NUMBER V	3. IS THIS REPORT	x NEW (N) OR	AMENDED (A)	STATE ▼ DISTRICT	
4. TYPE OF REPORT ((a) Quarterly Reports:		(b) 12-Day PRE	E-Election Report for t			
April 15 Quarterl	y Report (Q1)	닏	Primary (12P)	General (12G)	Runoff (12R)	
July 15 Quarterly	/ Report (Q2)	Ш	Convention (12C)	Special (12S)		
-	rterly Report (Q3)	Election on	M M / D I	/ Y Y Y Y	in the State of	
January 31 Year-	End Report (YE)	(c) 30-Day PO \$	ST-Election Report for	the:		
			General (30G)	Runoff (30R)	Special (30S)	
Termination Repo	ort (TER)	Election on	M " M / D " I	/ Y " Y " Y " Y	in the State of	
5. Covering Period	01 / 01 /	Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	through	03 / D D / Y	ү ү ү 2017	
I certify that I have examined Type or Print Name of Treasu	Gerson, David,		nowledge and belief it	is true, correct and co	mplete.	
Signature of Treasurer	Gerson, David, , ,		[Electronically Filed]	Date 04	14 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
NOTE: Submission of false, erro	oneous, or incomplete	information may	subject the person sign	ning this Report to the p	enalties of 52 U.S.C. §30109	
Office Use Only					FEC FORM 3 (Revised 05/2016)	

SUMMARY PAGE

of Receipts and Disbursements

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name Gerson for Congress

2017 2017 03 01 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period **Election Cycle-to-Date** Net Contributions (other than loans) **Total Contributions** (a) 0.00 2165.63 (other than loans) (from Line 11(e)) (b) Total Contribution Refunds 0.00 0.00 (from Line 20(d)) (c) Net Contributions (other than loans) 0.00 2165.63 (subtract Line 6(b) from Line 6(a)) 7. Net Operating Expenditures (a) Total Operating Expenditures 131.93 45328.52 (from Line 17) (b) Total Offsets to Operating 0.00 0.00 Expenditures (from Line 14)..... (c) Net Operating Expenditures 45328.52 131.93 (subtract Line 7(b) from Line 7(a)) Cash on Hand at Close of 103539.64 Reporting Period (from Line 27)..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 275000.00 Schedule C and/or Schedule D).....

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

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FEC Form 3 (Revised 05/2016)

Write or Type Committee Name

Gerson for Congress

I. RECEIPTS		COLUMN A Total This Period	COLUMN B Election Cycle-to-Date	
11.	CONTRIBUTIONS (other than loans) FROM:			
	(a) Individuals/Persons Other Than Political Committees			
	(i) Itemized (use Schedule A)	0.00	1650.00	
	(ii) Unitemized	0.00	515.63	
	(iii) TOTAL of contributions from individuals	0.00	2165.63	
	(b) Political Party Committees	0.00	0.00	
	(c) Other Political Committees (such as PACs)	0.00	0.00	
	(d) The Candidate	0.00	0.00	
	(other than loans) (add Lines 11(a)(iii), (b), (c), and (d))	0.00	2165.63	
2.	TRANSFERS FROM OTHER AUTHORIZED COMMITTEES	0.00	0.00	
3.	LOANS:			
	(a) Made or Guaranteed by the Candidate	0.00	32011.00	
	(b) All Other Loans	0.00	0.00	
	(c) TOTAL LOANS (add Lines 13(a) and (b))	0.00	32011.00	
4.	OFFSETS TO OPERATING			
	EXPENDITURES (Refunds, Rebates, etc.)	0.00	0.00	
5.	OTHER RECEIPTS (Dividends, Interest, etc.)	0.00	0.00	
6.	TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)	0.00	34176.63	

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3 (Revised 05/2016)

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	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17.	OPERATING EXPENDITURES	131.93	45328.52
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	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 20(a), (b), and (c))	0.00	0.00
21.	OTHER DISBURSEMENTS	0.00	0.00
22.	TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21)	131.93	45328.52
	III. CASH SU	JMMARY	
23.	CASH ON HAND AT BEGINNING OF REPO	rting period	103671.57
24	TOTAL RECEIPTS THIS PERIOD (from Line	16, page 3)	0.00
25.	SUBTOTAL (add Line 23 and Line 24)		103671.57
26.	TOTAL DISBURSEMENTS THIS PERIOD (fro	om Line 22)	131.93
27.	CASH ON HAND AT CLOSE OF REPORTIN	IG PERIOD	103539.64

SCHEDULE B (FEC Form 3) ITEMIZED DISBURSEMENTS

NAME OF COMMITTEE (In Full) Gerson for Congress

5 46 FOR LINE NUMBER: **PAGE** Use separate schedule(s) (check only one) for each category of the **X** 17 18 19a 19b Detailed Summary Page 20a 20b 20c 21 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. Date of Disbursement 02 16 2017 Zip Code FEC Identification Number 85260 003 Amount of Each Disbursement this Period Category/ Type 30.34

Full Name (Last, First, Middle Initial) Go Daddy Mailing Address 14455 N. Hayden Rd. #219 City State Α7 Scottsdale Purpose of Disbursement Website Registratoin Candidate Name Office Sought: House Disbursement For: 2018 Senate Primary General Transaction ID: SB17.6936 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) **USPS** Date of Disbursement Mailing Address 7287 153rd St 2017 31 City State Zip Code **FEC Identification Number** MN Apple Valley 55124 Purpose of Disbursement Postage 003 Candidate Name Amount of Each Disbursement this Period Category/ Type 2.59 Disbursement For: 2018 Office Sought: House Senate Primary General Transaction ID: SB17.6935 Other (specify) President Memo Item State: District: Full Name (Last, First, Middle Initial) c. USPS Date of Disbursement Mailing Address 7287 153rd St 30 2017 City Zip Code State **FEC Identification Number** Apple Valley MN 55124 Purpose of Disbursement 003 Candidate Name Amount of Each Disbursement this Period Category/ Type 99.00 Office Sought: Disbursement For: 2018 House Senate Primary General Transaction ID: SB17.6937 President Other (specify) Memo Item State: District: SUBTOTAL of Disbursements This Page (optional)..... 131.93 TOTAL This Period (last page this line number only)..... 131.93

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

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FOR LINE NUMBER: (check only one)

13a

OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4392
LOAN SOURCE Full Name (Last, First, M	liddle Initial)	Memo Item Election: 2012
Gerson, David, Adam, ,	nadic iiiliaij	Memo Item Clection: 2012
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
16554.96	,	0.00 16554.96
TERMS Date Incurred]	Date Due Interest Rate Secured: (If none, enter 0)
M05M / D29D / Y Ž01Ž Y	M M / D D	/ Y 1/1/2020 Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
	I	Amount Guaranteed
City State	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional	\	
COSTOTALO TINO I ENOU TINO FAGE (OPTIONAL	,	16554.96
TOTALS This Period (last page in this line or	nly)	······································
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

PAGE 7
FOR LINE NUMBER: (check only one)

13a

OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4365
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2012
Gerson, David, Adam, ,	madie miliary	Memo Item Clection: 2012
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
10000.00		0.00 10000.00
TERMS Date Incurred	[Date Due Interest Rate Secured: (If none, enter 0)
M07 ^M / D19 ^D / Y Ž01Ž Y	M M / D D	/ Y YNAY Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optiona	N	
CODICIALO IIIIS I ellou IIIIS Page (optiona		10000.00
TOTALS This Period (last page in this line o	nly)	······································
Carry outstanding balance only to LINE 3, S	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

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13b Transaction ID: SC/10.4381 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2012 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D24D M 07M Ž01Ž YNA Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

						130	
	ME OF COMMITTEE (In Full) Serson for Congress				Trans	saction ID : SC/10.4468	
\sqsubseteq							
	LOAN SOURCE Full Name (Last,	First, Mid	ldle Initial)		☐ Memo Ite		
	Gerson, David, Adam, ,					Primary	
	Mailing Address					General	
	Mailing Address PO Box 1465					Other (specify) ▼	
	City		State	ZIP Co	de	✗ Personal Funds of the Candidate	
	Burnsville		MN	55337			
	Original Amount of Loan		Cumulative Pay	yment To	Date B	alance Outstanding at Close of This Period	
	5	5.00	7		0.00	5.00	
	TERMS Date Incurred		С	Date Due	Interest R (If none, er		
	M07M / D24D / Y Ž01Ž	Υ	M M / D D	/ Y	YNA Y	0.00 % (apr) Yes X No	
	List All Endorsers or Guarantors	(if any) to	o Loan Source				
	1. Full Name (Last, First, Middle I				Name of Employer		
	Mailing Address				Occupation		
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:		
	2. Full Name (Last, First, Middle In	itial)			Name of Employer		
	Mailing Address				Occupation Amount Guaranteed		
	Mailing Address						
	Cit.	04-4-	71D OI-				
	City	State	ZIP Code		Outstanding:	9	
	3. Full Name (Last, First, Middle In	itial)			Name of Employer		
	Mailing Address				Occupation		
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	7	
	4. Full Name (Last, First, Middle In	itial)	'		Name of Employer		
	Mailing Address				Occupation		
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	7	
		ı	1		I		
SI	UBTOTALS This Period This Page (optional)			······	5.00	
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	carry outstanding balance only to LII	NF 3 Sch	nedule D for this	s line If	no Schedule D. carry fo	prward to appropriate line of Summary.	
٠ ٧	arry outstanding palatice offig to Li	TE 0, 301	icaule D, IOI IIII	5 mi c. II	ino ochiedule D, carry it	or ward to appropriate line or Summary.	

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

FOR LINE NUMBER: (check only one)

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OF

						130	
	ME OF COMMITTEE (In Full) Serson for Congress				Trans	saction ID : SC/10.4128	
Ľ							
	LOAN SOURCE Full Name (Last, Gerson, David, Adam, ,	First, Mic	ldle Initial)		☐ Memo Ite	m Election: 2012 x Primary	
						General	
	Mailing Address PO Box 1465					Other (specify)	
	City		State	ZIP Co	de	✗ Personal Funds of the Candidate	
	Burnsville		MN	55337		reisonal runus of the Candidate	
	Original Amount of Loan		Cumulative Pay	yment To	Date B	alance Outstanding at Close of This Period	
	5000	0.00			0.00	5000.00	
	TERMS Date Incurred		D	Date Due	Interest R (If none, er		
	^M 07 ^M / ^D 26 ^D / Y Ž01Ž	Y	M M / D D	/ Y	YNA Y	0.00 % (apr) Yes No	
	List All Endorsers or Guarantors	(if any) to	o Loan Source				
	1. Full Name (Last, First, Middle I				Name of Employer		
	Mailing Address				Occupation		
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	9 9	
	2. Full Name (Last, First, Middle In	itial)			Name of Employer		
	Mailing Address				Occupation		
					Amount		
•	City	State	ZIP Code		Guaranteed Outstanding:	. , ,	
	3. Full Name (Last, First, Middle In	itial)			Name of Employer		
	Mailing Address				Occupation		
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	7	
	4. Full Name (Last, First, Middle In	itial)			Name of Employer		
	Mailing Address				Occupation		
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	9 9	
			_				
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С	carry outstanding balance only to LI	NE 3. Sch	nedule D. for this	s line. If	no Schedule D. carrv fo	prward to appropriate line of Summary.	
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Use separate schedule(s) for each category of the Detailed Summary Page

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FOR LINE NUMBER: (check only one)

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	13b

LOAN SOURCE Full Name Gerson, David, Adar	•	ddle Initial)	Men	no Item Election: 2012 x Primary General
Mailing Address PO Box 1465				Other (specify) ▼
City Burnsville		State	ZIP Code	✗ Personal Funds of the Candidate
Original Amount of Loan			yment To Date	Balance Outstanding at Close of This Period
, , , ,	5000.00	,	0.00	5000.00
TERMS Date Incurre	d			rest Rate Secured: one, enter 0)
M08M / D01D / Y	ž01Ž ^Y	M M / D	/ Y Yna Y Y	0.00 % (apr) Yes X No
List All Endorsers or Guar	rantors (if any)	to Loan Source		
1. Full Name (Last, First, N	Middle Initial)		Name of Employe	er
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed	
		2 0000	Outstanding: Name of Employe	or
2. Full Name (Last, First, M	ilidale iriitial)		Name of Employe	-1
Mailing Address			Occupation	
City	State	ZIP Code	Amount Guaranteed Outstanding:	, ,
3. Full Name (Last, First, M	liddle Initial)		Name of Employe	er
Mailing Address			Occupation	
			Amount Guaranteed	
City	State	ZIP Code	Outstanding:	
4. Full Name (Last, First, M	liddle Initial)		Name of Employe	er
Mailing Address			Occupation	
			Amount Guaranteed	
City	State	ZIP Code	Outstanding:	7
JBTOTALS This Period This	Page (optional)			5000.00
	g. (optional)			5000.00

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

FOR LINE NUMBER: (check only one)

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OF

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

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

FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4470
LOAN SOURCE Full Name (Last, First,	Middle Initial)	Election: 0040
Gerson, David, Adam, ,	viidale Illitial)	☐ Memo Item
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
6.00		0.00 6.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
^M 08 ^M / □10 □ / □ Ž01Ž □ Y	M M / D D	/ Y YNA Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (options	al)	
CODICIALS THIS FEHOU THIS FAGE (OPHONE	٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠٠	6.00
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Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4130
LOAN SOURCE Full Name (Last, First, M	Middle Initial)	Memo Item Election: 2012
Gerson, David, Adam, ,	madio miliary	Memo Item Clection: 2012
Mailing Address PO Box 1465		Other (specify) ▼
City	State	ZIP Code Second Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
1000.00	,	0.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M08M / D17D / Y Ž01Ž Y	M M / D D	/ Y YNA Y O.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional	l)·····	1000.00
TOTALS This Period (last page in this line o	nly)	······
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4131
LOAN SOURCE Full Name (Last, First, I	Middle Initial)	Memo Item Election: 2012
Gerson, David, Adam, ,	viidale iiitialij	Memo Item Clection: 2012
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
1000.00	l ,	0.00 1000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M08M / D20D / Y Ž01Ž Y	M M / D D	0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source	
Full Name (Last, First, Middle Initial)	<u>, </u>	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount Guaranteed
City	ZIP Code	Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
	I	Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	-	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
CURTOTAL C This Deviced This Degre (entires	Λ.	
SUBTOTALS This Period This Page (optional		1000.00
TOTALS This Period (last page in this line of	nly)	······································
Carry outstanding balance only to LINE 3, 5	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4442
LOAN SOURCE Full Name (Last, First, N	liddle Initial)	Floation: 2044
Gerson, David, Adam, ,	ilidale illitial)	Memo Item Election: 2014 x Primary General
Mailing Address PO Box 1465		Other (specify) ▼
City	State	ZIP Code Second Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
479.33	,	0.00 479.33
TERMS Date Incurred		Date Due Interest Rate Secured: (If none, enter 0)
M02M / D22D / Y Ž013 Y	M M / D D	/ Y 1/Ĭ/20Ž0 Y 0.00
List All Endorsers or Guarantors (if any)	to Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional		
		7
TOTALS This Period (last page in this line or	nly)	······
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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OF

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

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

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				Detailed 0	Juli III II II II I	age				13b
AME OF COMMITTEE (In Full) Gerson for Congress					Trans	action II) : SC/10.44	164		
LOAN SOURCE Full Name (Last, F Gerson, David, Adam, , Mailing Address PO Box 1465	irst, Middle	Initial)			Memo Ite	×	ion: 2014 Primary General Other (spec			
City Burnsville	Sta		ZIP Cod 55337	e		x	Personal F	unds of th	ne Can	didate
Original Amount of Loan		umulative Pay	ment To [Oate 0.00	-	alance O	utstanding		of This 000.00	
TERMS Date Incurred	Y M 1 N	D	ate Due		Interest R (If none, er		% (apr)	Secu	red:	K No
List All Endorsers or Guarantors (i		an Source								
1. Full Name (Last, First, Middle Ini	tial)			Name of Emp	oloyer					
Mailing Address				Occupation						
City State ZIP Code				Amount Guaranteed Outstanding:						
2. Full Name (Last, First, Middle Init	ial)			Name of Emp	oloyer					
Mailing Address				Occupation						
City	State Z	IP Code		Amount Guaranteed Outstanding:	Ľ.	7	7			
3. Full Name (Last, First, Middle Init	ial)			Name of Emp	oloyer					
Mailing Address				Occupation						
City	State Z	IP Code		Amount Guaranteed Outstanding:		,	7			
4. Full Name (Last, First, Middle Init	ial)			Name of Emp	oloyer					
Mailing Address				Occupation						
City	State Z	IP Code		Amount Guaranteed Outstanding:		7	7	-		
SUBTOTALS This Period This Page (op					···•		7	, 3	000.00	
Carry outstanding balance only to LIN	E 3, Schedul	le D, for this	line. If n	o Schedule [O, carry fo	orward to	appropria	te line of	Sumn	narv.

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

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OF

							130
AME OF COMMITTEE (In Full) Gerson for Congress					Transa	ction ID : SC/10.4502	
LOAN SOURCE Full Name (Last,	First, Mi	ddle Initial)			Momo Itom	Election: 2014	
Gerson, David, Adam, ,		,			Memo Item	Primary	
Gerson, David, Adam,						General	
Mailing Address PO Box 1465						Other (specify) ▼	
City		State	ZIP Cod	le		X Personal Funds of the Car	ndidate
Burnsville		MN	55337				
Original Amount of Loan		Cumulative Pay	yment To			ance Outstanding at Close of This	Period
4000	.00	7		0.00		4000.00)
TERMS Date Incurred		D	Date Due		Interest Rat		
M04 ^M / D18 ^D / Y Ž013	Υ	M M / D D	/ Y	1)1/20 Y	,	0.00	x No
List All Endorsers or Guarantors	(if any) t	o Loan Source					
Full Name (Last, First, Middle II	, ,,			Name of Em	ployer		
Mailing Address				Occupation			
				Amount			
City State ZIP Code				Guaranteed Outstanding:			
2. Full Name (Last, First, Middle In	itial)			Name of Employer			
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding:		7 7 7	I
3. Full Name (Last, First, Middle In	itial)			Name of Em	ployer		
Mailing Address				Occupation			
	1			Amount			
City	State	ZIP Code		Guaranteed Outstanding:		7	ı
4. Full Name (Last, First, Middle In	itial)			Name of Em	ployer		
Mailing Address				Occupation			
	1			Amount			
City	State	ZIP Code		Guaranteed Outstanding:		7	
SUBTOTALS This Period This Page (o	ontional)						-
The This relied this rage (C	γριισπαι).					4000.00	,
TOTALS This Period (last page in this	line onl	y)			▶	7 7 7	
Carry outstanding balance only to LIF	NE 3, Sc	nedule D, for this	s line. If r	no Schedule	D, carry for	ward to appropriate line of Sumi	mary.

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

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FOR LINE NUMBER: (check only one)

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OF

						130
AME OF COMMITTEE (In Full) Gerson for Congress					Transa	ction ID : SC/10.4545
LOAN SOURCE Full Name (Last,	First, Mic	ddle Initial)			Memo Item	Election: 2014
Gerson, David, Adam,	,	,			j wemo item	rimary Primary
						General
Mailing Address PO Box 1465						Other (specify)
City		State	ZIP Cod	de		✗ Personal Funds of the Candidate
Burnsville		MN	55337			To contain and on the canadam
Original Amount of Loan		Cumulative Page	yment To	Date	Bala	ance Outstanding at Close of This Perio
4000	0.00	2		0.00)	4000.00
TERMS Date Incurred		Г	Date Due		Interest Rat	
^M 05 ^M / ^D 13 ^D / ^Y Ž013	Y	M M / D D	/ Y	1)1/20 Y		.00
List All Endorsers or Guarantors	(if any) t	to Loan Source				
Full Name (Last, First, Middle I	, ,,	Louis Course		Name of Em	ployer	
Mailing Address				Occupation		
				Amount		
City	State ZIP Code			Guaranteed Outstanding:		
2. Full Name (Last, First, Middle In	itial)			Name of Employer		
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:		9 9
3. Full Name (Last, First, Middle In	itial)			Name of Em	nployer	
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:		7
4. Full Name (Last, First, Middle In	itial)	•		Name of Em	ployer	
Mailing Address				Occupation		
				Amount		
City	State	ZIP Code		Guaranteed Outstanding:		9 9
CURTOTALO This Desiral This Days (t: N					
SUBTOTALS This Period This Page (opuonai).				···· >	4000.00
TOTALS This Period (last page in this	line only	y)			▶	, , , , , , , ,
Carry outstanding balance only to LL	NE 3. Sci	hedule D. for this	s line. If	no Schedule	D. carry for	ward to appropriate line of Summary.
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Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER: (check only one)

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4591
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	viidaio iriitiai,	Memo Item Clection: 2014
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00	,	0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M06 ^M / D10 ^D / Y Z013 Y	M M / D D	/ Y 1/1/20 Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any) to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)	·	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optiona	N	
CODICIALO IIIIS I ellou IIIIS Page (optiona		5000.00
TOTALS This Period (last page in this line o	nly)	······································
Carry outstanding balance only to LINE 3, S	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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OF

		130
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.4622
	1-11- 1141 15	
LOAN SOURCE Full Name (Last, First, Mic Gerson, David, Adam, ,	aaie Initial)	☐ Memo Item Election: 2014 ▼ Primary
Mailing Address PO Box 1465		General Other (specify) ▼
City	State	ZIP Code
Burnsville	MN	55337 Personal Funds of the Candidate
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period
131.12	,	0.00
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)
M06M / D30D / Y Ž01Š Y	M M / D D	/ Y 1/1/20 Y 0.00
List All Endorsers or Guarantors (if any) to	o Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	•	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)		131.12
TOTALS This Period (last page in this line only	<i>y</i>)	······································
Carry outstanding balance only to LINE 3, Sch	nedule D, for this	line. If no Schedule D, carry forward to appropriate line of Summary.

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

FOR LINE NUMBER: (check only one)

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	13h

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Transaction ID: SC/10.5169 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D05D M 07M ž013 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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Transaction ID: SC/10.5170 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 5000.00 0.00 5000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D29^D M 07M ž013 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 5000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5172
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	nadic iritialy	Memo Item Clection: 2014
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
5000.00	,	0.00 5000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M08M / D19D / Y 2013 Y	M M / D D	/ Y 1/1/20 Y 0.00 % (apr) Yes X No
List All Endorsers or Guarantors (if any)	to Loan Source	
Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City State	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optiona)	F000 00
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TOTALS This Period (last page in this line of	ıly)	· · · · · · · · · · · · · · · · · · ·
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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			Detailed Guiriniary i	age	13b
NAME OF COMMITTEE (In Full) Gerson for Congress			Trans	saction ID : SC/10.5173	
9				T	
LOAN SOURCE Full Name (Last, First, Mic	ddle Initial)		☐ Memo Ite		
Gerson, David, Adam, ,				Primary	
Ad-ilia a Addus -				General	
Mailing Address PO Box 1465				Other (specify)	
City	State	ZIP Code)	Personal Funds of the	Candidate
Burnsville	MN	55337			
Original Amount of Loan	Cumulative Page	yment To D	ate B	alance Outstanding at Close of	This Period
5000.00					
5000.00	9	9	0.00	<u> </u>	0.00
TERMS Date Incurred		Date Due	Interest R (If none, er		d:
^M 09 ^M / ^D 12 ^D / ^Y Ž013 ^Y	M M / D D	/ Y 1	/1/2Ŏ ^Y	0.00 % (apr) Yes	s X No
List All Endorsers or Guarantors (if any) t	o Loan Source				
Full Name (Last, First, Middle Initial)		T i	Name of Employer		
Mailing Address			Occupation		
Walling Address					
			Amount		
City State	ZIP Code		Guaranteed Outstanding:	9 9	
2. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address		(Occupation		
			Amount		
City State	ZIP Code		Guaranteed		
	ZIP Code		Outstanding:	9 9	
3. Full Name (Last, First, Middle Initial)		1	Name of Employer		
Mailing Address		(Occupation		
			Amount		
City State	ZIP Code		Guaranteed		
			Outstanding:	, , , , , , , , , , , , , , , , , , , ,	
4. Full Name (Last, First, Middle Initial)			Name of Employer		
Mailing Address		(Occupation		
			Amount		_
City State	ZIP Code		Guaranteed		
		(Outstanding:	7	
SUBTOTALS This Period This Page (optional).				500	0.00
					-100
TOTALS This Period (last page in this line only	y)		······		
Carry outstanding balance only to LINE 3, Sci	nedule D. for this	s line. If no	Schedule D. carry fo	orward to appropriate line of S	ummarv.

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

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OF

		130		
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5174		
	L-II- 1-22 N	T =		
Gerson, David, Adam, ,	iale initial)	Memo Item Election: 2014 Primary Occupyed		
Mailing Address PO Box 1465		General Other (specify) ▼		
City	State	ZIP Code ** Personal Funds of the Candidate		
Burnsville	MN	55337 Personal Funds of the Candidate		
Original Amount of Loan	Cumulative Pay	ment To Date Balance Outstanding at Close of This Period		
3000.00	,	0.00 3000.00		
TERMS Date Incurred	D	ate Due Interest Rate Secured: (If none, enter 0)		
M 09M / D30D / Y Z013 Y	M M / D D	/ Y 1/1/20 Y 0.00		
List All Endorsers or Guarantors (if any) to	o Loan Source			
Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City	ZIP Code	Guaranteed Outstanding:		
2. Full Name (Last, First, Middle Initial)	<u>'</u>	Name of Employer		
Mailing Address		Occupation		
		Amount		
City	ZIP Code	Guaranteed Outstanding:		
3. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City	ZIP Code	Guaranteed Outstanding:		
4. Full Name (Last, First, Middle Initial)		Name of Employer		
Mailing Address		Occupation		
		Amount		
City State	ZIP Code	Guaranteed Outstanding:		
SUBTOTALS This Period This Page (optional)		3000.00		
TOTALS This Period (last page in this line only	y)	······································		
Carry outstanding balance only to LINE 3, Sch	edule D, for this	line. If no Schedule D, carry forward to appropriate line of Summary.		

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

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			Detailed Guillinary I	age	13b	
NAME OF COMMITTEE (In Full) Gerson for Congress			Trans	action ID : SC/10.5202		
9						
LOAN SOURCE Full Name (Last, First, Mic	ddle Initial)		☐ Memo Iter			
Gerson, David, Adam, ,				Primary General		
Mailing Address				Other (specify)		
PO Box 1465	PO Box 1465					
City	State	ZIP Code)	Personal Funds of the	Candidate	
Burnsville	MN	55337				
Original Amount of Loan	Cumulative Pa	yment To D	ate Ba	alance Outstanding at Close of T	his Period	
5000.00						
5000.00	9	9	0.00	5000).00	
TERMS Date Incurred		Date Due	Interest Ra (If none, en		l:	
M10 ^M / D04 ^D / Y Z013 Y	M M / D D	/ Y 1	/1/2Ŏ ^Y	0.00 % (apr) Yes	x No	
List All Endorsers or Guarantors (if any) t	o Loan Source					
Full Name (Last, First, Middle Initial)	20417 004100		Name of Employer			
(,,,,,,,,						
Mailing Address		(Occupation			
		,	Amount			
City State	ZIP Code		Guaranteed Outstanding:			
2. Full Name (Last, First, Middle Initial)		1	Name of Employer			
Mailing Address		(Occupation			
		<u> </u>	Amount			
City State	ZIP Code		Guaranteed			
0.1,			Outstanding:	9		
3. Full Name (Last, First, Middle Initial)			Name of Employer			
Mailing Address		(Occupation			
			Amount			
City State	ZIP Code		Guaranteed			
		(Outstanding:			
4. Full Name (Last, First, Middle Initial)		1	Name of Employer			
Mailing Address			Occupation			
			Amount			
City State	ZIP Code		Guaranteed			
		(Outstanding:	9		
SUBTOTALS This Period This Page (optional)				5000	0.00	
TOTALS This Period (last page in this line only	v)					
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Carry outstanding balance only to LINE 3, Sci	nedule D, for this	s line. If no	Schedule D, carry fo	orward to appropriate line of Su	ımmary.	

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

FOR LINE NUMBER: (check only one)

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AME OF COMMITTEE (In Full) Berson for Congress					Transa	ction ID : SC/10.5203	
LOAN SOURCE Full Name (Last,	First, Mi	ddle Initial)			Memo Item	Election: 2014	
Gerson, David, Adam, ,	Gerson, David, Adam, ,					Primary General	
Mailing Address PO Box 1465						Other (specify)	▼
City		State	ZIP Co	de		X Personal Fund	ls of the Candidate
Burnsville		MN	55337				
Original Amount of Loan		Cumulative Pa	yment To	Date	Bala	ance Outstanding at C	lose of This Period
5000	0.00			0.00	0	, ,	5000.00
TERMS Date Incurred		С	Date Due		Interest Rat (If none, ente		Secured:
M10 ^M / D16 ^D / Y Ž013	Υ	M M / D D	/ Y	1)1/20 Y		0.00	Yes X No
List All Endorsers or Guarantors	(if any)	to Loan Source					
1. Full Name (Last, First, Middle	Initial)			Name of En	nployer		
Mailing Address				Occupation			
				Amount Guaranteed Outstanding:			
City	State	ZIP Code					
2. Full Name (Last, First, Middle Ir	nitial)	'		Name of Employer			
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding	:	7	
3. Full Name (Last, First, Middle Ir	nitial)			Name of Em	nployer		
Mailing Address				Occupation			
				Amount			
City	State	ZIP Code		Guaranteed Outstanding		7	
4. Full Name (Last, First, Middle Ir	nitial)			Name of Employer			
Mailing Address			Occupation				
			Amount				
City	State	ZIP Code		Guaranteed Outstanding		7	-
SUBTOTALS This Period This Page (optional)						5000.00
OTALS This Period (last page in this	s line onl	y)				7 7	
Corne outstanding haloses substituti	NE 2 O	hodulo D. f 41-1	o line 'f	no Cobodid	D. same fr	award to annualists !	ine of Commercial
Carry outstanding balance only to LI	NE J, SC	neaule D, for this	s line. If	no scheanle	ט, carry tor	ward to appropriate I	ine of Summary.

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

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FOR LINE NUMBER: (check only one)

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OF

IAME OF COMMITTEE (In F Gerson for Congress			Trans	action ID : SC/10.5204			
LOAN SOURCE Full Na Gerson, David, Ada	•	☐ Memo Itel	Election: 2014 X Primary General				
Mailing Address PO Box 1465			Other (specify)				
City	City State ZIP C			X Personal Funds of the Candidate			
Burnsville		MN	55337	Fersonal Funds of the Candidate			
Original Amount of Loan		Cumulative Pa	yment To Date Ba	alance Outstanding at Close of This Period			
	5000.00	2	0.00	5000.00			
TERMS Date Incur	rred	С	ate Due Interest Ra				
M10M / D23D /	^Y Ž013 ^Y	M M / D D		0.00 % (apr) Yes No			
List All Endorsers or Gu	` *,	o Loan Source					
1. Full Name (Last, First	, Middle Initial)		Name of Employer				
Mailing Address			Occupation				
City	State	ZIP Code	Amount Guaranteed Outstanding:	Guaranteed			
2. Full Name (Last, First,	Middle Initial)		Name of Employer	Name of Employer			
Mailing Address			Occupation				
City	State	ZIP Code	Amount Guaranteed				
City	State	ZIP Code	Outstanding:	<u> </u>			
3. Full Name (Last, First,	Middle Initial)		Name of Employer				
Mailing Address			Occupation				
City	State	ZIP Code	Amount Guaranteed				
		Zii Gode	Outstanding:	9			
4. Full Name (Last, First,	Middle Initial)		Name of Employer				
Mailing Address			Occupation	Occupation			
City	State ZIP Code		Amount Guaranteed				
Oity	State	Zii Oode	Outstanding:	9 9			
SUBTOTALS This Period Th	nis Page (optional)			5000.00			
FOTALS This Period (last pa	age in this line only	γ) ·······					
Carry outstanding balance	only to LINE 3 Sch	nedule D for this	line If no Schedule D. carry fo	prward to appropriate line of Summary.			

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

FOR LINE NUMBER: (check only one)

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NAME OF COMMITTEE (In Gerson for Congres			Transa	action ID : SC/10.5205			
Gerson, David, Ad	•	☐ Memo Iten	Election: 2014 X Primary General				
Mailing Address PO Box 1465			Other (specify) ▼				
City	City State ZIP C			Personal Funds of the Candidate			
Burnsville		MN	55337	1 Craonal 1 unus of the Candidate			
Original Amount of Loa	ın	Cumulative Pa	yment To Date Ba	lance Outstanding at Close of This Period			
9	5000.00	7	0.00	5000.00			
TERMS Date Inc	urred	С	ate Due Interest Ra				
M11M / D04D /	^Y Ž013 ^Y	M M / D D	/ Y 1ў1/2Ŏ Y	% (apr) Yes X No			
List All Endorsers or G	· · · · · · · · · · · · · · · · · · ·	o Loan Source					
1. Full Name (Last, Fire	st, Middle Initial)		Name of Employer				
Mailing Address			Occupation	·			
City	State	ZIP Code	Amount Guaranteed Outstanding:	Guaranteed			
2. Full Name (Last, Firs	t, Middle Initial)		Name of Employer	Name of Employer			
Mailing Address			Occupation				
011	lo	710 0 1	Amount Guaranteed				
City	State	ZIP Code	Outstanding:	Outstanding:			
3. Full Name (Last, First	t, Middle Initial)		Name of Employer				
Mailing Address			Occupation	Occupation			
City	State	ZIP Code	Amount Guaranteed				
		Zii Gode	Outstanding:	7			
4. Full Name (Last, First	t, Middle Initial)		Name of Employer				
Mailing Address			Occupation	Occupation			
City	State	ZIP Code	Amount Guaranteed				
J.,			Outstanding:	7			
SUBTOTALS This Period 1	Гhis Page (optional)		······	5000.00			
TOTALS This Period (last	page in this line only	·) ·······		7			
Carry outstanding balance	e only to LINE 3. Sch	nedule D. for this	s line. If no Schedule D. carry for	rward to appropriate line of Summary.			

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

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Transaction ID: SC/10.5206 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 4000.00 0.00 4000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 M 1 1 M ^D13^D ž013 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 4000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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OF

		100
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5207
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2014
Gerson, David, Adam, ,	madio irritali,	Memo Item Clection: 2014
Mailing Address PO Box 1465		Other (specify)
City	State	ZIP Code F5007 Personal Funds of the Candidate
Burnsville	MN	55337
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period
3000.00	,	0.00 3000.00
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)
M11M / D19D / Y 2013 Y	M M / D D	/ Y 1/√1/20 Y 0.00
List All Endorsers or Guarantors (if any)	to Loan Source	
1. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
2. Full Name (Last, First, Middle Initial)	1	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
3. Full Name (Last, First, Middle Initial)		Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
4. Full Name (Last, First, Middle Initial)	'	Name of Employer
Mailing Address		Occupation
		Amount
City	ZIP Code	Guaranteed Outstanding:
SUBTOTALS This Period This Page (optional)	0000 00
		, , , , ,
TOTALS This Period (last page in this line or	ıly)	· · · · · · · · · · · · · · · · · · ·
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.

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

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OF

						•			130
AME OF COMMITTEE (In Full) Gerson for Congress					Transa	action II	D : SC/10.52	08	
LOAN SOURCE Full Name (Last, First, Middle Initial) Gerson, David, Adam, , Mailing Address					Memo Iter	x	tion: 2014 Primary General Other (speci	fy) ▼	
PO Box 1465									
City		State MN	ZIP Code 55337			×	Personal F	unds of th	e Candidate
Burnsville					D.		utatan Pana		CTICL Bushell
Original Amount of Loan 4000	.00	Cumulative Pay	ment to D	0.00		alance O	utstanding a	-	f This Period
TERMS Date Incurred		D	ate Due		Interest Ra			Secu	red:
M11 ^M / D29 ^D / Y Ž013	Υ	M M / D D	/ Y 17	1/2Ŏ ^Y		0.00	% (apr)		res 🗶 No
List All Endorsers or Guarantors	(if any) t	o Loan Source							
1. Full Name (Last, First, Middle In	nitial)		1	Name of Emp	ployer				
Mailing Address			(Occupation					
			1	Amount					
City	State	ZIP Code		Guaranteed Outstanding:		7	,		
2. Full Name (Last, First, Middle In	itial)		1	Name of Employer					
Mailing Address			(Occupation					
				Amount			-		
City	State	ZIP Code		Guaranteed Outstanding:		7	7		-
3. Full Name (Last, First, Middle In	itial)		1	Name of Emp	ployer				
Mailing Address			(Occupation					
			A	Amount					
City	State	ZIP Code		Guaranteed Outstanding:		7	,	1 - 4	
4. Full Name (Last, First, Middle In	itial)		1	Name of Employer					
Mailing Address			(Occupation					
				Amount					-
City	State	ZIP Code		Guaranteed Outstanding:		7	7		
SUBTOTALS This Period This Page (c	UBTOTALS This Period This Page (optional)					00.00			
FOTALS This Period (last page in this						++		7	
Carry outstanding balance only to LII	NF 3. Sch	nedule D for this	line If no	Schedule I	D. carry fo	rward t	n annronria	te line of	Summary
want outstanding bulling to the	0, 001	.caa.c D, ioi uiis	11 110	Jonedule L	-, Jany 10	. waiu t	- appropria		Janina y.

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

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OF

NAME OF COMMITTEE (In Gerson for Congres			Transa	action ID : SC/10.5209			
Gerson, David, A	•	☐ Memo Iten	n Election: 2014 x Primary General				
Mailing Address PO Box 1465	Mailing Address PO Box 1465						
City	City State ZIP C			Personal Funds of the Candidate			
Burnsville	Burnsville MN 5533			r ersonal runds of the Candidate			
Original Amount of Loa	an	Cumulative Page	yment To Date Ba	lance Outstanding at Close of This Period			
2	4000.00	9	0.00	4000.00			
TERMS Date Inc	urred	С	late Due Interest Ra				
M12M / D09D /	^Y Ž01Š ^Y	M M / D D		0.00 % (apr) Yes X No			
List All Endorsers or (, , ,	o Loan Source					
1. Full Name (Last, Fir	st, Middle Initial)		Name of Employer				
Mailing Address			Occupation	·			
City	State	ZIP Code	Amount Guaranteed Outstanding:	Guaranteed			
2. Full Name (Last, Firs	t, Middle Initial)		Name of Employer	Name of Employer			
Mailing Address			Occupation				
011	la	710.0.1	Amount Guaranteed	Amount Guaranteed			
City	State	ZIP Code	Outstanding:	9			
3. Full Name (Last, Firs	t, Middle Initial)		Name of Employer				
Mailing Address			Occupation				
City	State	ZIP Code	Amount Guaranteed				
-		Zii Gode	Outstanding:	7			
4. Full Name (Last, Firs	t, Middle Initial)		Name of Employer				
Mailing Address			Occupation	Occupation			
City	State ZIP Code		Amount Guaranteed				
Oity	Otato	211 0000	Outstanding:	, , , , , , , , , , , , , , , , , , , ,			
SUBTOTALS This Period	This Page (optional)			4000.00			
TOTALS This Period (last	page in this line only	·) ·······					
Carry outstanding halance	e only to LINE 3. Sch	nedule D. for this	s line. If no Schedule D. carry for	rward to appropriate line of Summary.			

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

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OF

NAME OF COMMITTEE (In Fi Gerson for Congress			Trans	action ID : SC/10.5210			
Gerson, David, Ada	•	☐ Memo Iter	Election: 2014 X Primary General				
Mailing Address PO Box 1465			Other (specify)				
			ZIP Code	Personal Funds of the Candidate			
Burnsville		MN	55337	T Grootial Fallas of the Salialada			
Original Amount of Loan		Cumulative Pa	yment To Date Ba	alance Outstanding at Close of This Period			
2 2	3000.00	7	0.00	3000.00			
TERMS Date Incur	red	С	Date Due Interest Ra				
M12 ^M / D16 ^D /	^Y Ž013 ^Y	M M / D D		0.00 % (apr) Yes X No			
List All Endorsers or Gu	, , ,	o Loan Source					
1. Full Name (Last, First,	, Middle Initial)		Name of Employer				
Mailing Address	Mailing Address			Occupation			
City	State	ZIP Code	Amount Guaranteed Outstanding:	Guaranteed			
2. Full Name (Last, First,	Middle Initial)		Name of Employer	Name of Employer			
Mailing Address			Occupation				
	la		Amount Guaranteed				
City	State	ZIP Code	Outstanding:	9 9 9			
3. Full Name (Last, First,	Middle Initial)		Name of Employer	Name of Employer			
Mailing Address			Occupation				
City.	State	ZID Code	Amount Guaranteed				
City		ZIP Code	Outstanding:	9 9			
4. Full Name (Last, First,	Middle Initial)		Name of Employer				
Mailing Address			Occupation	Occupation			
City	State	ZIP Code	Amount Guaranteed				
City	State	ZIP Code	Outstanding:	9 9			
SUBTOTALS This Period Th	is Page (optional)			3000.00			
TOTALS This Period (last pa	age in this line only	v)	· · · · · · · · · · · · · · · · · · ·	9 9 9			
Carry outstanding balance	only to LINE 2 Sol	nedule D for this	s line If no Schedule D. come to	rward to appropriate line of Summary.			
Carry Outstanding Dalance (UIIIV LU LINE J. SCI	ieuuie D, for this	s inne. Il liu ochequie D, carry fo	iwaid to appropriate line of Summary.			

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Transaction ID: SC/10.5542 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 3000.00 0.00 3000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D08D M01M ž014 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 3000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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		Detailed Garrinary Fage	13b
AME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5	
LOAN SOURCE Full Name (Last, Find Gerson, David, Adam, , Mailing Address PO Box 1465	rst, Middle Initial)	Memo Item Election: 2014 X Primary General Other (spec	
City Burnsville	State MN	ZIP Code 55337 Personal f	Funds of the Candidate
Original Amount of Loan 5000.0		Payment To Date Balance Outstanding 0.00	at Close of This Period 5000.00
TERMS Date Incurred M01M / P16P / Y 2014	/ M M / D	Date Due Interest Rate (If none, enter 0) D	Secured:
List All Endorsers or Guarantors (if			
1. Full Name (Last, First, Middle Init	ial)	Name of Employer	
Mailing Address		Occupation	
City	tate ZIP Code	Amount Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initi	al)	Name of Employer	
Mailing Address		Occupation	
City	tate ZIP Code	Amount Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initi	al)	Name of Employer	
Mailing Address		Occupation	
City	tate ZIP Code	Amount Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initi	al)	Name of Employer	
Mailing Address		Occupation	
City	tate ZIP Code	Amount Guaranteed Outstanding:	
SUBTOTALS This Period This Page (optional) 5000.00 TOTALS This Period (last page in this line only)			
Carry outstanding balance only to LINE	3, Schedule D. for	his line. If no Schedule D, carry forward to appropri	ate line of Summarv.

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

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13b Transaction ID: SC/10.5544 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 ^D26^D M 02M ž014 1/1/20 x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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

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Transaction ID: SC/10.5587 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2014 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 391.00 0.00 391.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) M 10^M 0.00 ^D28^D ž014 YNA Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 391.00 TOTALS This Period (last page in this line only)..... Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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	ME OF COMMITTEE (In Full) Serson for Congress				Trans	action ID : SC/10.5608	
Ľ						T =: .	
LOAN SOURCE Full Name (Last, First, Middle Initial) Gerson, David, Adam, ,				☐ Memo Iter	m Election: 2016 🗶 Primary		
						General	
	Mailing Address PO Box 1465					Other (specify) ▼	
	City		State	ZIP Co	de	Poysonal Funds of the Condidate	
	Burnsville		MN	55337		Y Personal Funds of the Candidate	
Original Amount of Loan Cumulative Payment			yment To	Date Ba	alance Outstanding at Close of This Period		
	3500	0.00	9		0.00	3500.00	
	TERMS Date Incurred		С	Date Due	Interest Ra (If none, en		
	^M 03 ^M / ^D 04 ^D / Y Ž01Š	Y	M M / D D	/ Y	YNA Y	0.00 % (apr) Yes X No	
	List All Endorsers or Guarantors	(if any) to	o Loan Source				
ļ	1. Full Name (Last, First, Middle I				Name of Employer		
	Mailing Address				Occupation		
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	9	
	2. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation			
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	7	
	3. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation			
					Amount		
	City	State	ZIP Code		Guaranteed Outstanding:	, , , , , , , , , , , , , , , , , , , ,	
	4. Full Name (Last, First, Middle Initial)				Name of Employer		
Mailing Address				Occupation			
				Amount			
	City	State	ZIP Code		Guaranteed Outstanding:	, , , , , , , ,	
SI	SUBTOTALS This Period This Page (optional)						
TOTALS This Period (last page in this line only)							
C	carry outstanding balance only to LII	NE 3. Sch	nedule D. for this	s line. If	no Schedule D. carry fo	orward to appropriate line of Summary.	
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Use separate schedule(s) for each category of the Detailed Summary Page

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AME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.5867	
LOAN SOURCE Full Name (Last, First, Gerson, David, Adam, ,	Middle Initial)	☐ Memo Item	
PO Box 1465			
City	State	ZIP Code F5227 Personal Funds of the Candidate	
Burnsville		55337	
Original Amount of Loan 5000.00	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period 0.00 5000.00	
TERMS Date Incurred		Oate Due Interest Rate Secured:	
M08M / D12D / Y Ž01Š Y	M M / D I		
List All Endorsers or Guarantors (if ar	ny) to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City	e ZIP Code	Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)	I	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	e ZIP Code	Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
City Stat	e ZIP Code	Amount Guaranteed	
4. Full Name (Last, First, Middle Initial)		Outstanding: Name of Employer	
Mailing Address		Occupation	
		Amount	
City	e ZIP Code	Guaranteed Outstanding:	
SUBTOTALS This Period This Page (optional)			
TOTALS This Period (last page in this line	only)	· · · · · · · · · · · · · · · · · · ·	
Carry outstanding balance only to LINE 3,	Schedule D, for the	s line. If no Schedule D, carry forward to appropriate line of Summary.	

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

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Transaction ID: SC/10.5980 NAME OF COMMITTEE (In Full) Gerson for Congress LOAN SOURCE Full Name (Last, First, Middle Initial) Election: 2016 Memo Item Primary Gerson, David, Adam, , General Mailing Address PO Box 1465 Other (specify) \blacktriangledown City State ZIP Code X Personal Funds of the Candidate MN 55337 Burnsville Original Amount of Loan Cumulative Payment To Date Balance Outstanding at Close of This Period 10000.00 0.00 10000.00 **TERMS** Date Incurred Date Due Interest Rate Secured: (If none, enter 0) 0.00 D08D M09M Ž015 YNA Y x No % (apr) List All Endorsers or Guarantors (if any) to Loan Source Name of Employer 1. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed State ZIP Code City Outstanding: Name of Employer 2. Full Name (Last, First, Middle Initial) Occupation Mailing Address Amount Guaranteed City State ZIP Code Outstanding: 3. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: 4. Full Name (Last, First, Middle Initial) Name of Employer Mailing Address Occupation Amount Guaranteed City State ZIP Code Outstanding: SUBTOTALS This Period This Page (optional)..... 10000.00 TOTALS This Period (last page in this line only) Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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		100	
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.6013	
LOAN SOURCE Full Name (Last, First, I	Middle Initial)	Memo Item Election: 2016	
Gerson, David, Adam, ,	Memo Item Clection: 2016		
Mailing Address PO Box 1465		Other (specify)	
City	State	ZIP Code F5007 Personal Funds of the Candidate	
Burnsville	MN	55337	
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period	
33932.59		0.00 33932.59	
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)	
M09M / D30D / Y Ž01Š Y	M M / D D	/ Y YNAY Y 0.00 % (apr) Yes X No	
List All Endorsers or Guarantors (if any) to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)	<u> </u>	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)	·	Name of Employer	
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	
CURTOTAL C This Deviced This Dags (antions			
SUBTOTALS This Period This Page (optional)			
TOTALS This Period (last page in this line of	only)		
Carry outstanding balance only to LINE 3,	Schedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.	

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		100	
NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.6284	
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2016	
Gerson, David, Adam, ,	Memo Item Clection: 2016		
Mailing Address PO Box 1465		Other (specify) ▼	
City	State	ZIP Code Second Personal Funds of the Candidate	
Burnsville	MN	55337	
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period	
50000.00		0.00 50000.00	
TERMS Date Incurred	[Date Due Interest Rate Secured: (If none, enter 0)	
M12M / P23P / Y Ž01Š Y	M M / D D	/ Y YNAY Y 0.00 % (apr) Yes X No	
List All Endorsers or Guarantors (if any)	to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)	1	Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	
SUBTOTALS This Period This Page (optional)			
TOTALS This Period (last page in this line of	nly)	······	
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.	

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

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NAME OF COMMITTEE (In Full) Gerson for Congress		Transaction ID : SC/10.6765	
LOAN SOURCE Full Name (Last, First, N	Middle Initial)	Memo Item Election: 2016	
Gerson, David, Adam, ,	Memo Item Clection: 2016		
Mailing Address PO Box 1465		Other (specify)	
City	State	ZIP Code Scool Personal Funds of the Candidate	
Burnsville	MN	55337	
Original Amount of Loan	Cumulative Pa	yment To Date Balance Outstanding at Close of This Period	
25000.00		0.00 25000.00	
TERMS Date Incurred	Γ	Date Due Interest Rate Secured: (If none, enter 0)	
M03 ^M / D30 ^D / Y 2016 Y	M M / D D	/ Y YNAY Y 0.00 % (apr) Yes X No	
List All Endorsers or Guarantors (if any)	to Loan Source		
1. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City State	ZIP Code	Guaranteed Outstanding:	
2. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	
3. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	
4. Full Name (Last, First, Middle Initial)		Name of Employer	
Mailing Address		Occupation	
		Amount	
City	ZIP Code	Guaranteed Outstanding:	
SUBTOTALS This Period This Page (optional)			
TOTALS This Period (last page in this line o	nly)	275000.00	
Carry outstanding balance only to LINE 3, S	chedule D, for thi	s line. If no Schedule D, carry forward to appropriate line of Summary.	