

**FEC FORM 3**

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

SECRETARY OF THE SENATE

FEB -5 AM 11:00

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

12FE4M5

ADDRESS (number and street) PO Box 4039  
Check if different than previously reported. (ACC) Saint Paul MN 55104

2. FEC IDENTIFICATION NUMBER C C00545921  
3. IS THIS REPORT NEW (N) OR AMENDED (A) 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 M M / D D / Y Y Y Y Y Y in the State of

(c) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period M M / D D / Y Y Y Y Y Y 10 01 2013 through M M / D D / Y Y Y Y Y Y 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 Paul Kilgore

Signature of Treasurer Paul Kilgore Date 01 13 2013

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

Table with 10 columns and 1 row. Column 1: Office Use Only. Column 2-10: Empty boxes. Bottom right: FEC FORM 3 (Revised 02/2003)

14020112244

**SUMMARY PAGE**

of Receipts and Disbursements

Write or Type Committee Name

**McFadden for Senate**

Report Covering the Period:

From:

MM / DD / YYYY  
10 / 01 / 2013

To:

MM / DD / YYYY  
12 / 31 / 2013

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
<b>6. Net Contributions (other than loans)</b>		
(a) Total Contributions (other than loans) (from Line 11(e))....	779455.45	2248296.44
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	220.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	779455.45	2248076.44
<b>7. Net Operating Expenditures</b>		
(a) Total Operating Expenditures (from Line 17).....	346407.55	563970.94
(b) Total Offsets to Operating Expenditures (from Line 14).....	26.85	926.85
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	346380.70	563044.09
<b>8. Cash on Hand at Close of Reporting Period (from Line 27).....</b>	1684803.26	
<b>9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	0.00	
<b>10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....</b>	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

14020112245

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3 (Revised 12/2003)

PAGE 3 / 231

Write or Type Committee Name

**McFadden for Senate**

Report Covering the Period: From:

M M / D D / Y Y Y Y  
10 / 01 / 2013

To:

M M / D D / Y Y Y Y  
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).....

621949.19

2040225.59

(ii) Unitemized.....

72006.26

115120.85

(iii) TOTAL of contributions from individuals ▶

693955.45

2155346.44

(b) Political Party Committees.....

(c) Other Political Committees (such as PACs).....

85500.00

87750.00

(d) The Candidate.....

5200.00

(e) TOTAL CONTRIBUTIONS

(other than loans)  
(add Lines 11(a)(iii), (b), (c), and (d))..

779455.45

2248296.44

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES.....

13. LOANS:

(a) Made or Guaranteed by the Candidate.....

(b) All Other Loans.....

(c) TOTAL LOANS  
(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.).....

26.85

926.85

15. OTHER RECEIPTS (Dividends, Interest, etc.).....

116.31

245.91

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

779598.61

2249469.20

14020112246

**DETAILED SUMMARY PAGE**  
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	346407.55	563970.94
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES .....		
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....		
(b) Of All Other Loans .....		
(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 .....		220.00
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	220.00
21. OTHER DISBURSEMENTS .....	475.00	475.00
22. <b>TOTAL DISBURSEMENTS</b> (add Lines 17, 18, 19(c), 20(d), and 21) ▶	346882.55	564665.94

**III. CASH SUMMARY**

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1252087.20
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	779598.61
25. SUBTOTAL (add Line 23 and Line 24).....	2031685.81
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	346882.55
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1684803.26

14020112247



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

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

FOR LINE NUMBER: PAGE 5 OF 231  
(check only one)  
 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)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES E. ABELL SR.**

Mailing Address 7102 WELLS PKWY

City HYATTSVILLE State MD Zip Code 20782-1041

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 09 / 2013

Transaction ID : SA11.2485

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MRS. AMARA J. ABOOD**

Mailing Address 1520 BOHNS POINT RD

City ORONO State MN Zip Code 55391-

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

Name of Employer Occupation  
N/A N/A

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 10 / 2013

Transaction ID : SA11.3615

Amount of Each Receipt this Period  
 2600.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MRS. AMARA J. ABOOD**

Mailing Address 1520 BOHNS POINT RD

City ORONO State MN Zip Code 55391-

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

Name of Employer Occupation  
N/A N/A

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 10 / 2013

Transaction ID : SA11.3616

Amount of Each Receipt this Period  
 2600.00  
 CONTRIBUTION

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

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

5450.00

14020112248

**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)	PAGE 6 OF 231
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>MR. THOMAS J. ABOOD</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 1520 BOHNS POINT RD		Transaction ID : SA11.3613
City ORONO	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00 CONTRIBUTION
Name of Employer DOUGHERTY FINANCIAL GROUP LLC	Occupation EXECUTIVE	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

Full Name (Last, First, Middle Initial) <b>MR. THOMAS J. ABOOD</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 10 / 2013
Mailing Address 1520 BOHNS POINT RD		Transaction ID : SA11.3614
City ORONO	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00 CONTRIBUTION
Name of Employer DOUGHERTY FINANCIAL GROUP LLC	Occupation EXECUTIVE	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

Full Name (Last, First, Middle Initial) <b>ROB ALBRIGHT JR.</b>		Date of Receipt M M / D D / Y Y Y Y 11 / 26 / 2013
Mailing Address 4916 MAPLE RD		Transaction ID : SA11.3020
City EDINA	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00 CONTRIBUTION
Name of Employer ALTERNATIVE STRATEGY ADVISORS, LLC	Occupation FINANCIAL SERVICES	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5700.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020112249

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 OF 231
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>MR. JOHN ALLEN</b>		Date of Receipt
Mailing Address 100 KINGSTOWN DR.		<input type="text" value="12"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City	State	Zip Code
NAPLES	FL	34102-
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11.3924
INDUSTRIAL EQUITIES, L.L.P.	PRESIDENT & CEO	
Receipt For: 2014	Election Cycle-to-Date	Amount of Each Receipt this Period
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="5200.00"/>	<input type="text" value="2600.00"/>
<input type="checkbox"/> Other (specify)		CONTRIBUTION

Full Name (Last, First, Middle Initial) <b>MR. JOHN ALLEN</b>		Date of Receipt
Mailing Address 100 KINGSTOWN DR.		<input type="text" value="12"/> / <input type="text" value="13"/> / <input type="text" value="2013"/>
City	State	Zip Code
NAPLES	FL	34102-
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11.3925
INDUSTRIAL EQUITIES, L.L.P.	PRESIDENT & CEO	
Receipt For: 2014	Election Cycle-to-Date	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	<input type="text" value="5200.00"/>	<input type="text" value="2600.00"/>
<input type="checkbox"/> Other (specify)		CONTRIBUTION

Full Name (Last, First, Middle Initial) <b>STEVE ALPETER</b>		Date of Receipt
Mailing Address 4405 BROWDALE AVE		<input type="text" value="12"/> / <input type="text" value="16"/> / <input type="text" value="2013"/>
City	State	Zip Code
EDINA	MN	55424-1017
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11.3521
K2 CAPITAL GROUP	EQUIPMENT FINANCE	
Receipt For: 2014	Election Cycle-to-Date	Amount of Each Receipt this Period
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1000.00"/>	<input type="text" value="1000.00"/>
<input type="checkbox"/> Other (specify)		CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="6200.00"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text" value="6200.00"/>

14020112250

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 8 OF 231
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>JEAN E. AMBROSE</b>		Date of Receipt
Mailing Address 13026 CHARLES ST.		<input type="text" value="12"/> / <input type="text" value="30"/> / <input type="text" value="2013"/>
City	State	Zip Code
OMAHA	NE	68154-1091
FEC ID number of contributing federal political committee.		Transaction ID : SA11.4301
<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer NONE		<input type="text" value="100.00"/>
Occupation HOMEMAKER		CONTRIBUTION
Receipt For: 2014	Election Cycle-to-Date	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="225.00"/>	
<input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>JIM AMBROSE</b>		Date of Receipt
Mailing Address 13026 CHARLES STREET		<input type="text" value="12"/> / <input type="text" value="02"/> / <input type="text" value="2013"/>
City	State	Zip Code
OMAHA	NE	68154-
FEC ID number of contributing federal political committee.		Transaction ID : SA11.3355
<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer MERRILL LYNCH		<input type="text" value="250.00"/>
Occupation FINANCIAL ADVISOR		CONTRIBUTION
Receipt For: 2014	Election Cycle-to-Date	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="125.00"/>	
<input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>JEAN E. AMBROSE</b>		Date of Receipt
Mailing Address 13026 CHARLES ST.		<input type="text" value="12"/> / <input type="text" value="10"/> / <input type="text" value="2013"/>
City	State	Zip Code
OMAHA	NE	68154-1091
FEC ID number of contributing federal political committee.		Transaction ID : SA11.3471
<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer NONE		<input type="text" value="125.00"/>
Occupation HOMEMAKER		CONTRIBUTION
Receipt For: 2014	Election Cycle-to-Date	
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="225.00"/>	
<input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="350.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value=""/>

14020112251

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 9 OF 231
	(check only one)	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**JIM AMBROSE**

Mailing Address 13026 CHARLES STREET

City OMAHA State NE Zip Code 68154

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

Name of Employer MERRILL LYNCH Occupation FINANCIAL ADVISOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 125.00

Date of Receipt  
MM / DD / YYYY  
12 / 10 / 2013

Transaction ID : SA11.3355B

Amount of Each Receipt this Period  
-125.00  
CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION TO SPOUSE

**B.** Full Name (Last, First, Middle Initial)  
**GEORGE ELI ANDERSON**

Mailing Address 11412 MISSISSIPPI DR N

City CHAMPLIN State MN Zip Code 55316-3508

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

Name of Employer CROWN IRON WORKS Occupation VP OF ENGINEERING

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2600.00

Date of Receipt  
MM / DD / YYYY  
10 / 02 / 2013

Transaction ID : SA11.2174

Amount of Each Receipt this Period  
2600.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**LEE R. ANDERSON**

Mailing Address 3054 GORDON DR

City NAPLES State FL Zip Code 34102-7861

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

Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5200.00

Date of Receipt  
MM / DD / YYYY  
12 / 23 / 2013

Transaction ID : SA11.4111

Amount of Each Receipt this Period  
5200.00  
CONTRIBUTION

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

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

7800.00

14020112252

**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)	PAGE 10 OF 231
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>LEE R. ANDERSON</b>		Date of Receipt MM / DD / YYYY 12 / 23 / 2013	
Mailing Address 3054 GORDON DR		Transaction ID : SA11.4111B	
City NAPLES	State FL	Zip Code 34102-7861	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period -2600.00 CONTRIBUTION	
Name of Employer INFORMATION REQUESTED PER BEST EFFORT	Occupation INFORMATION REQUESTED PER BEST EFFORT	[MEMO ITEM] REDESIGNATION TO GENERAL	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) <b>LEE R. ANDERSON</b>		Date of Receipt MM / DD / YYYY 12 / 23 / 2013	
Mailing Address 3054 GORDON DR		Transaction ID : SA11.4449	
City NAPLES	State FL	Zip Code 34102-7861	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 2600.00 CONTRIBUTION	
Name of Employer INFORMATION REQUESTED PER BEST EFFORT	Occupation INFORMATION REQUESTED PER BEST EFFORT	[MEMO ITEM] REDESIGNATION FROM PRIMARY	
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) <b>LYNN M. ANDERSON</b>		Date of Receipt MM / DD / YYYY 12 / 30 / 2013	
Mailing Address 12620 RESDEN ROAD		Transaction ID : SA11.4226	
City PLYMOUTH	State MN	Zip Code 55441-5757	
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period 1000.00 CONTRIBUTION	
Name of Employer HOLIDAY COMPANIES	Occupation ATTORNEY	[MEMO ITEM] REDESIGNATION FROM PRIMARY	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	1000.00

14020112253

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 11 OF 231		
	(check only one)	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>JEFFREY ANSEL</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 17 / 2013	
Mailing Address 4510 OAK DRIVE		Transaction ID : SA11.3529	
City EDINA	State MN	Zip Code 55424-1531	Amount of Each Receipt this Period 500.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer WINTHROP & WEINSTINE, P.A.	Occupation ATTORNEY		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>DANIEL ARRIGONI</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 02 / 2013	
Mailing Address 9094 BRECKENRIDGE LN		Transaction ID : SA11.3045	
City EDEN PRAIRIE	State MN	Zip Code 55347-3442	Amount of Each Receipt this Period 500.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>DANIEL ASHER</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 06 / 2013	
Mailing Address 211 E CHICAGO AVE #1020		Transaction ID : SA11.3435	
City CHICAGO	State IL	Zip Code 60611-2688	Amount of Each Receipt this Period 2600.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer EQUITEC GROUP	Occupation BROKER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	3600.00
<b>TOTAL</b> This Period (last page this line number only) .....	

14020112254

**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)	PAGE 12 OF 231
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT H. ASHER**

Mailing Address **180 EAST PEARSON ST**  
**#4005**

City **CHICAGO** State **IL** Zip Code **60611-2119**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 / 06 / 2013**

Transaction ID : **SA11.3434**

Amount of Each Receipt this Period  
**2600.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**THOMAS ASLESEN**

Mailing Address **5517 HILLSIDE CIRCLE**

City **EDINA** State **MN** Zip Code **55439-1216**

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

Name of Employer **ACCORD BENEFIT RESOURCES** Occupation **EMPLOYEE BENEFITS**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**11 / 26 / 2013**

Transaction ID : **SA11.3001**

Amount of Each Receipt this Period  
**100.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**TANI D. AUSTIN**

Mailing Address **5334 HARBOR TOWN DR**

City **DALLAS** State **TX** Zip Code **75287-7319**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 / 20 / 2013**

Transaction ID : **SA11.4076**

Amount of Each Receipt this Period  
**5200.00**  
 CONTRIBUTION

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

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

**7900.00**

14020112255



**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)	PAGE 13 OF 231
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**TANI D. AUSTIN**

Mailing Address 5334 HARBOR TOWN DR

City DALLAS State TX Zip Code 75287-7319

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5200.00

Date of Receipt 12 / 20 / 2013

Transaction ID : SA11.4076B

Amount of Each Receipt this Period  
-2600.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
**TANI D. AUSTIN**

Mailing Address 5334 HARBOR TOWN DR

City DALLAS State TX Zip Code 75287-7319

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5200.00

Date of Receipt 12 / 20 / 2013

Transaction ID : SA11.4445

Amount of Each Receipt this Period  
2600.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
**WILLIAM F. AUSTIN**

Mailing Address 5334 HARBOR TOWN DRIVE

City DALLAS State TX Zip Code 75287-7319

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5200.00

Date of Receipt 12 / 20 / 2013

Transaction ID : SA11.4089

Amount of Each Receipt this Period  
5200.00

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... 5200.00

**TOTAL** This Period (last page this line number only)..... 5200.00

14020112256

**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)	PAGE 14 OF 231
	<input checked="" type="checkbox"/> 11a 12 <input type="checkbox"/> 11b 13a <input type="checkbox"/> 11c 13b <input type="checkbox"/> 11d 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**WILLIAM F. AUSTIN**

Mailing Address **5334 HARBOR TOWN DRIVE**

City <b>DALLAS</b>	State <b>TX</b>	Zip Code <b>75287-7319</b>
-----------------------	--------------------	-------------------------------

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

Name of Employer <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	Occupation <b>INFORMATION REQUESTED PER BEST EFFORTS</b>
---	---

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 20 / 2013**

Transaction ID : **SA11.4089B**

Amount of Each Receipt this Period  
**-2600.00**

CONTRIBUTION

**[MEMO ITEM]**  
**REDESIGNATION TO GENERAL**

**B.** Full Name (Last, First, Middle Initial)  
**WILLIAM F. AUSTIN**

Mailing Address **5334 HARBOR TOWN DRIVE**

City <b>DALLAS</b>	State <b>TX</b>	Zip Code <b>75287-7319</b>
-----------------------	--------------------	-------------------------------

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

Name of Employer <b>INFORMATION REQUESTED PER BEST EFFORTS</b>	Occupation <b>INFORMATION REQUESTED PER BEST EFFORTS</b>
---	---

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 20 / 2013**

Transaction ID : **SA11.4447**

Amount of Each Receipt this Period  
**2600.00**

CONTRIBUTION

**[MEMO ITEM]**  
**REDESIGNATION FROM PRIMARY**

**C.** Full Name (Last, First, Middle Initial)  
**MR. NATHAN DULANEY BACHMAN**

Mailing Address **7824 LAUREL AVE.**

City <b>CINCINNATI</b>	State <b>OH</b>	Zip Code <b>45243-</b>
---------------------------	--------------------	---------------------------

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

Name of Employer <b>BACHMAN GROUP</b>	Occupation <b>INVESTOR</b>
--	-------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2400.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 10 / 2013**

Transaction ID : **SA11.3579**

Amount of Each Receipt this Period  
**2400.00**

CONTRIBUTION

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

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

**2400.00**

14020112257

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 15 OF 231
	(check only one)	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**BRYAN BADZIN**

Mailing Address **6656 PARKWOOD RD**

City **EDINA** State **MN** Zip Code **55436-1089**

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

Name of Employer **SUPERCLEAN BRANDS** Occupation **BUSINESS**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**11 / 08 / 2013**

Transaction ID : **SA11.2782**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**TIM BAER**

Mailing Address **6201 BALDER LANE**

City **EDINA** State **MN** Zip Code **55439-1101**

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

Name of Employer **TARGET CORPORATION** Occupation **EXECUTIVE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
**12 / 31 / 2013**

Transaction ID : **SA11.4255**

Amount of Each Receipt this Period  
**5200.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**TIM BAER**

Mailing Address **6201 BALDER LANE**

City **EDINA** State **MN** Zip Code **55439-1101**

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

Name of Employer **TARGET CORPORATION** Occupation **EXECUTIVE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
**12 / 31 / 2013**

Transaction ID : **SA11.4255B**

Amount of Each Receipt this Period  
**-2600.00**  
 CONTRIBUTION

**[MEMO ITEM]  
 REDESIGNATION TO GENERAL**

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

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

**5700.00**

14020112258

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 OF 231
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
<input type="checkbox"/> 14	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>TIM BAER</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 31 / 2013
Mailing Address 6201 BALDER LANE		Transaction ID : SA11.4594
City EDINA	State MN	Zip Code 55439-1101
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2600.00 CONTRIBUTION	
Name of Employer TARGET CORPORATION	Occupation EXECUTIVE	[MEMO ITEM] REDESIGNATION FROM PRIMARY
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

Full Name (Last, First, Middle Initial) <b>MR. ROBERT W. BAILIE</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 17 / 2013
Mailing Address 8101 VANGUARD DR STE 300		Transaction ID : SA11.4039
City MECHANICSVILLE	State VA	Zip Code 23111-
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00 CONTRIBUTION	
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

Full Name (Last, First, Middle Initial) <b>MARK BAKER</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 30 / 2013
Mailing Address 5697 ORCHARD AVE		Transaction ID : SA11.4201
City WHITE BEAR LK	State MN	Zip Code 55110-2347
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2600.00 CONTRIBUTION	
Name of Employer AIRCRAFT OWNERS AND PILOTS ASSOC	Occupation CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3100.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020112259

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 17 OF 231	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>STEVE BAKER</b>		Date of Receipt MM / DD / YYYY 11 / 26 / 2013
Mailing Address 9928 SPIREHAVEN LN		Transaction ID : SA11.2938
City DALLAS	State TX	Zip Code 75238-3466
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period CONTRIBUTION 1000.00	
Name of Employer BAKER DRYWALL	Occupation CONTRACTOR	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>CARTER J. BALFOUR</b>		Date of Receipt MM / DD / YYYY 09 / 30 / 2013
Mailing Address 295 WOODLAWN AVE		Transaction ID : SA11.2050
City ST PAUL	State MN	Zip Code 55105-1238
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period CONTRIBUTION 5200.00	
Name of Employer NORWEST MEZZANINE PARTNERS	Occupation INVESTMENTS	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	[MEMO ITEM] VERIFIED REATTRIBUTION

Full Name (Last, First, Middle Initial) <b>CARTER J. BALFOUR</b>		Date of Receipt MM / DD / YYYY 12 / 31 / 2013
Mailing Address 295 WOODLAWN AVE		Transaction ID : SA11.2050B
City ST PAUL	State MN	Zip Code 55105-1238
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period CONTRIBUTION -2600.00	
Name of Employer NORWEST MEZZANINE PARTNERS	Occupation INVESTMENTS	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	[MEMO ITEM] REATTRIBUTION REQUESTED REDESIGNATION GENERAL

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

14020112260

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 OF 231
	(check only one)	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

A. Full Name (Last, First, Middle Initial) <b>CARTER J. BALFOUR</b>		Date of Receipt M M / D D / Y Y Y Y <b>12 / 31 / 2013</b>
Mailing Address <b>295 WOODLAWN AVE</b>		<b>Transaction ID : SA11.4258</b>
City <b>ST PAUL</b>	State <b>MN</b>	Zip Code <b>55105-1238</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>2600.00</b> CONTRIBUTION	
Name of Employer <b>NORWEST MEZZANINE PARTNERS</b>	Occupation <b>INVESTMENTS</b>	<b>[MEMO ITEM]</b> <b>VERIFIED REATTRIBUTION REDESIGNATION FRC PRIMARY</b>
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>5200.00</b>	

B. Full Name (Last, First, Middle Initial) <b>CARTER J. BALFOUR</b>		Date of Receipt M M / D D / Y Y Y Y <b>12 / 17 / 2013</b>
Mailing Address <b>295 WOODLAWN AVE</b>		<b>Transaction ID : SA11.3526</b>
City <b>ST PAUL</b>	State <b>MN</b>	Zip Code <b>55105-1238</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>5200.00</b> CONTRIBUTION	
Name of Employer <b>NORWEST MEZZANINE PARTNERS</b>	Occupation <b>INVESTMENTS</b>	<b>[MEMO ITEM]</b> <b>REATTRIBUTION TO SPOUSE</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>5200.00</b>	

C. Full Name (Last, First, Middle Initial) <b>CARTER J. BALFOUR</b>		Date of Receipt M M / D D / Y Y Y Y <b>12 / 31 / 2013</b>
Mailing Address <b>295 WOODLAWN AVE</b>		<b>Transaction ID : SA11.3526B</b>
City <b>ST PAUL</b>	State <b>MN</b>	Zip Code <b>55105-1238</b>
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>-5200.00</b> CONTRIBUTION	
Name of Employer <b>NORWEST MEZZANINE PARTNERS</b>	Occupation <b>INVESTMENTS</b>	<b>[MEMO ITEM]</b> <b>REATTRIBUTION TO SPOUSE</b>
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>5200.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>5200.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

14020112261

**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)		PAGE 19 OF 231	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**HOLLY BALFOUR**

Mailing Address 295 WOODLAWN AVENUE

City ST. PAUL State MN Zip Code 55105-1238

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

Name of Employer N/A Occupation HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2013

Transaction ID : SA11.4259

Amount of Each Receipt this Period  
**5200.00**  
 CONTRIBUTION

**[MEMO ITEM]**  
 REATTRIBUTION FROM SPOUSE

**B.** Full Name (Last, First, Middle Initial)  
**HOLLY BALFOUR**

Mailing Address 295 WOODLAWN AVENUE

City ST. PAUL State MN Zip Code 55105-1238

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

Name of Employer N/A Occupation HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2013

Transaction ID : SA11.4259B

Amount of Each Receipt this Period  
**-2600.00**  
 CONTRIBUTION

**[MEMO ITEM]**  
 REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**HOLLY BALFOUR**

Mailing Address 295 WOODLAWN AVENUE

City ST. PAUL State MN Zip Code 55105-1238

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

Name of Employer N/A Occupation HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2013

Transaction ID : SA11.4261

Amount of Each Receipt this Period  
**2600.00**  
 CONTRIBUTION

**[MEMO ITEM]**  
 REDESIGNATION FROM PRIMARY

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

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

**0.00**

14020112262

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 20 OF 231		
	(check only one)	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
		<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**YOELI BARAG**

Mailing Address 1411 N. DETROIT ST. #401

City LOS ANGELES State CA Zip Code 90046

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

Name of Employer GDF PARENT LLC Occupation SELF

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt: 12 / 28 / 2013  
Transaction ID : SA11.4300

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. RONALD O. BAUKOL**

Mailing Address 9290 E THOMPSON PEAK PKWY. #2

City SCOTTSDALE State AZ Zip Code 85255

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2600.00

Date of Receipt: 12 / 10 / 2013  
Transaction ID : SA11.3577

Amount of Each Receipt this Period  
2600.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**LILLI BEAN**

Mailing Address 319 BAY RIDGE ROAD

City MORGANS POINT State TX Zip Code 77571-3506

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

Name of Employer MARINE FUELING SERVICE, INC. Occupation OFFICER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5200.00

Date of Receipt: 12 / 12 / 2013  
Transaction ID : SA11.3484

Amount of Each Receipt this Period  
5200.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... 8300.00

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

14020112263



**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)	PAGE 21 OF 231
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**LILLI BEAN**

Mailing Address **319 BAY RIDGE ROAD**

City **MORGANS POINT** State **TX** Zip Code **77571-3506**

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

Name of Employer **MARINE FUELING SERVICE, INC.** Occupation **OFFICER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 12 / 2013

**Transaction ID : SA11.3484B**

Amount of Each Receipt this Period  
 -2600.00  
 CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION TO GENERAL**

**B.** Full Name (Last, First, Middle Initial)  
**LILLI BEAN**

Mailing Address **319 BAY RIDGE ROAD**

City **MORGANS POINT** State **TX** Zip Code **77571-3506**

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

Name of Employer **MARINE FUELING SERVICE, INC.** Occupation **OFFICER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 12 / 2013

**Transaction ID : SA11.4574**

Amount of Each Receipt this Period  
 2600.00  
 CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION FROM PRIMARY**

**C.** Full Name (Last, First, Middle Initial)  
**MRS. JULIE BECKER**

Mailing Address **16 HILL FARM CIRCLE**

City **NORTH OAKS** State **MN** Zip Code **55127-2007**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **213.47**

Date of Receipt  
 M M / D D / Y Y Y Y  
 10 / 03 / 2013

**Transaction ID : SA11.4349**

Amount of Each Receipt this Period  
 213.47  
 CONTRIBUTION

**IN-KIND: EVENT CATERING**

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

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

213.47

14020112264

**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)	PAGE 22 OF 231
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**BRIAN C. BEH**

Mailing Address **8662 GREAT WATERS ALCOVE**  
**8662 GREAT WATERS ALCOVE**

City **EDEN PRAIRIE** State **MN** Zip Code **55347-3432**

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

Name of Employer **ROXBURY CAPITAL MGMT** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **939.00**

Date of Receipt  
**11 / 02 / 2013**

Transaction ID : **SA11.4350**

Amount of Each Receipt this Period  
**839.00**

CONTRIBUTION

IN-KIND: EVENT CATERING

**B.** Full Name (Last, First, Middle Initial)  
**SUSAN C. BERAN**

Mailing Address **1524 GOODRICH AVENUE**

City **SAINT PAUL** State **MN** Zip Code **55105-2346**

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

Name of Employer **N/A** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**10 / 17 / 2013**

Transaction ID : **SA11.2686**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**RONALD F. BERAN**

Mailing Address **1524 GOODRICH AVE**

City **SAINT PAUL** State **MN** Zip Code **55105-2346**

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

Name of Employer **PORTO-SUNBERG** Occupation **SALES**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**11 / 19 / 2013**

Transaction ID : **SA11.2893**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

**[MEMO ITEM]**  
 PRESUMPTIVELY REATTRIBUTED REATTRIBUTK  
 FROM SPOUSE

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

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

**1839.00**

14020112265

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 23 OF 231	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>SUSAN C. BERAN</b>		Date of Receipt MM / DD / YYYY 11 / 19 / 2013
Mailing Address 1524 GOODRICH AVENUE		Transaction ID : SA11.2686B
City SAINT PAUL	State MN	
Zip Code 55105-2346	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period -500.00
Name of Employer N/A	Occupation RETIRED	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	[MEMO ITEM] PRESUMPTIVELY REATTRIBUTED REATTRIBUTED TO SPOUSE

Full Name (Last, First, Middle Initial) <b>CARL E. BERG</b>		Date of Receipt MM / DD / YYYY 08 / 10 / 2013
Mailing Address 10050 BANDLEY DRIVE		Transaction ID : SA11.2326
City CUPERTINO	State CA	
Zip Code 95014-2102	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 7800.00
Name of Employer WEST COAST VENTURE CAPITAL	Occupation INVESTMENT	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	[MEMO ITEM] VERIFIED REATTRIBUTION

Full Name (Last, First, Middle Initial) <b>CARL E. BERG</b>		Date of Receipt MM / DD / YYYY 11 / 01 / 2013
Mailing Address 10050 BANDLEY DRIVE		Transaction ID : SA11.2794
City CUPERTINO	State CA	
Zip Code 95014-2102	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period -5200.00
Name of Employer WEST COAST VENTURE CAPITAL	Occupation INVESTMENT	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	[MEMO ITEM] VERIFIED REATTRIBUTION REATTRIBUTION TO SPOUSE

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020112266

**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)		PAGE 24 OF 231	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>MARY ANN BERG</b>		Date of Receipt MM / DD / YYYY 08 / 10 / 2013
Mailing Address 10050 BANDLEY DRIVE		Transaction ID : SA11.2793
City CUPERTINO	State CA	Zip Code 95014-2102
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5200.00 CONTRIBUTION	
Name of Employer NONE	Occupation HOMEMAKER	[MEMO ITEM] VERIFIED REATTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

Full Name (Last, First, Middle Initial) <b>MARY ANN BERG</b>		Date of Receipt MM / DD / YYYY 11 / 01 / 2013
Mailing Address 10050 BANDLEY DRIVE		Transaction ID : SA11.2793B
City CUPERTINO	State CA	Zip Code 95014-2102
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period -2600.00 CONTRIBUTION	
Name of Employer NONE	Occupation HOMEMAKER	[MEMO ITEM] VERIFIED REATTRIBUTION REDESIGNATION TO GENERAL
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

Full Name (Last, First, Middle Initial) <b>MARY ANN BERG</b>		Date of Receipt MM / DD / YYYY 11 / 01 / 2013
Mailing Address 10050 BANDLEY DRIVE		Transaction ID : SA11.2796
City CUPERTINO	State CA	Zip Code 95014-2102
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2600.00 CONTRIBUTION	
Name of Employer NONE	Occupation HOMEMAKER	[MEMO ITEM] VERIFIED REATTRIBUTION REDESIGNATION FROM PRIMARY
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

14020112267

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

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

FOR LINE NUMBER: PAGE 25 OF 231  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**ALICE BESSMAN**

Mailing Address 7404 WOODROW WILSON DR

City State Zip Code  
LOS ANGELES CA 90046-1323

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
12 / 28 / 2013

Transaction ID : SA11.4199

Amount of Each Receipt this Period  
  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**GEORGE BILICIC**

Mailing Address 40 PIPING ROCK RD

City State Zip Code  
LOCUST VALLEY NY 11560-2208

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
LAZARD MANAGING DIRECTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
09 / 27 / 2013

Transaction ID : SA11.2312

Amount of Each Receipt this Period  
  
CONTRIBUTION

[MEMO ITEM]  
VERIFIED REATTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**GEORGE BILICIC**

Mailing Address 40 PIPING ROCK RD

City State Zip Code  
LOCUST VALLEY NY 11560-2208

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
LAZARD MANAGING DIRECTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
10 / 30 / 2013

Transaction ID : SA11.2784

Amount of Each Receipt this Period  
  
CONTRIBUTION

[MEMO ITEM]  
VERIFIED REATTRIBUTION REATTRIBUTION TO SPOUSE

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

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

1402011268

**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)	PAGE 26 OF 231
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**LAURA SCHACHT BILICIC**

Mailing Address 1448 N LAKE SHORE DR

City CHICAGO State IL Zip Code 60610-1798

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 09 / 27 / 2013

Transaction ID : **SA11.2783**

Amount of Each Receipt this Period  
**5200.00**

CONTRIBUTION

**[MEMO ITEM]**  
 VERIFIED REATTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**LAURA SCHACHT BILICIC**

Mailing Address 1448 N LAKE SHORE DR

City CHICAGO State IL Zip Code 60610-1798

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 10 / 30 / 2013

Transaction ID : **SA11.2783B**

Amount of Each Receipt this Period  
**-2600.00**

CONTRIBUTION

**[MEMO ITEM]**  
 VERIFIED REATTRIBUTION REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**LAURA SCHACHT BILICIC**

Mailing Address 1448 N LAKE SHORE DR

City CHICAGO State IL Zip Code 60610-1798

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

Name of Employer NONE Occupation HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 10 / 30 / 2013

Transaction ID : **SA11.2786**

Amount of Each Receipt this Period  
**2600.00**

CONTRIBUTION

**[MEMO ITEM]**  
 VERIFIED REATTRIBUTION REDESIGNATION FRC PRIMARY

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

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

**0.00**

14020112269

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 27 OF 231	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>JEFFERY W. BIRD</b>		Date of Receipt							
Mailing Address <b>706 2ND AVE S</b> <b>THE BAKER BUILDING SUITE 600</b>		<table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td>10</td> <td>2013</td> </tr> </table>		M M M	D D D	Y Y Y Y Y Y Y Y	12	10	2013
M M M	D D D	Y Y Y Y Y Y Y Y							
12	10	2013							
City <b>MINNEAPOLIS</b>	State <b>MN</b>	Zip Code <b>55402-3003</b>	<b>Transaction ID : SA11.3476</b>						
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>1000.00</b>								
Name of Employer <b>THE BREHM GROUP</b>	Occupation <b>PRESIDENT</b>	<b>CONTRIBUTION</b>							
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>1000.00</b>								

Full Name (Last, First, Middle Initial) <b>JEFF BISSON</b>		Date of Receipt							
Mailing Address <b>9 COOPER AVE.</b>		<table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td>08</td> <td>2013</td> </tr> </table>		M M M	D D D	Y Y Y Y Y Y Y Y	10	08	2013
M M M	D D D	Y Y Y Y Y Y Y Y							
10	08	2013							
City <b>EDINA</b>	State <b>MN</b>	Zip Code <b>55436-</b>	<b>Transaction ID : SA11.2671</b>						
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>500.00</b>								
Name of Employer <b>CRAIG-HALLUM</b>	Occupation <b>STOCK BROKER</b>	<b>CONTRIBUTION</b>							
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>500.00</b>								

Full Name (Last, First, Middle Initial) <b>ALEXANDRA O. BJORKLUND</b>		Date of Receipt							
Mailing Address <b>94 DELLWOOD AVE.</b>		<table border="1"> <tr> <td>M M M</td> <td>D D D</td> <td>Y Y Y Y Y Y Y Y</td> </tr> <tr> <td>12</td> <td>11</td> <td>2013</td> </tr> </table>		M M M	D D D	Y Y Y Y Y Y Y Y	12	11	2013
M M M	D D D	Y Y Y Y Y Y Y Y							
12	11	2013							
City <b>WHITE BEAR LAKE</b>	State <b>MN</b>	Zip Code <b>55110-</b>	<b>Transaction ID : SA11.3851</b>						
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period <b>250.00</b>								
Name of Employer <b>N/A</b>	Occupation <b>N/A</b>	<b>CONTRIBUTION</b>							
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date <b>250.00</b>								

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>1750.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

14020112270

**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)		PAGE 28 OF 231	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

A. Full Name (Last, First, Middle Initial) <b>MR. BRENT G. BLACKKEY</b>		Date of Receipt MM / DD / YYYY 12 / 11 / 2013
Mailing Address 28020 WOODSIDE RD.		Transaction ID : SA11.3845
City SHOREWOOD	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period CONTRIBUTION 100.00
Name of Employer HOLIDAY COMPANIES	Occupation SENIOR MANAGEMENT	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1100.00	

B. Full Name (Last, First, Middle Initial) <b>MR. BRENT G. BLACKKEY</b>		Date of Receipt MM / DD / YYYY 12 / 30 / 2013
Mailing Address 28020 WOODSIDE RD.		Transaction ID : SA11.4221
City SHOREWOOD	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period CONTRIBUTION 1000.00
Name of Employer HOLIDAY COMPANIES	Occupation SENIOR MANAGEMENT	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1100.00	

C. Full Name (Last, First, Middle Initial) <b>MR. WALTER C. BOICE</b>		Date of Receipt MM / DD / YYYY 12 / 17 / 2013
Mailing Address 2945 CATALPA ST		Transaction ID : SA11.4056
City NEWPORT BEACH	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period CONTRIBUTION 250.00
Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1350.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020112271



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

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

FOR LINE NUMBER: PAGE 29 OF 231  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**GREGORY J. BOULAY**

Mailing Address 15905 LAMP CIRCLE

City OMAHA State NE Zip Code 68118-2051

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

Name of Employer PELLA WINDOW & DOORS OF OMAHA AND I Occupation OWNER

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt  
 12 / 20 / 2013

Transaction ID : SA11.3536

Amount of Each Receipt this Period  
 1500.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**BRIAN C. BOWERS**

Mailing Address 5596 MCMAHON LN

City PRIOR LAKE State MN Zip Code 55372-9153

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

Name of Employer FINANCIAL RECOVERY SERVICES Occupation EXECUTIVE

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt  
 10 / 02 / 2013

Transaction ID : SA11.2153

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JOHN BOYER**

Mailing Address 4605 ARDEN AVENUE

City EDINA State MN Zip Code 55424-1118

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

Name of Employer BOYER & ASSOCIATES Occupation BUSINESS OWNER/PRESIDENT

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
 10 / 16 / 2013

Transaction ID : SA11.2596

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

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

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

3000.00

14020112272

**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)	PAGE 30 OF 231
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>VICTOR NICHOLAS BRENK</b>			Date of Receipt MM / DD / YYYY 10 / 12 / 2013
Mailing Address 11060 EAGLE RIDGE CT			Transaction ID : SA11.2598
City CHISAGO CITY	State MN	Zip Code 55013-7343	Amount of Each Receipt this Period CONTRIBUTION 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer NONE	Occupation RETIRED		CONTRIBUTION 300.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) <b>VICTOR NICHOLAS BRENK</b>			Date of Receipt MM / DD / YYYY 11 / 26 / 2013
Mailing Address 11060 EAGLE RIDGE CT			Transaction ID : SA11.3005
City CHISAGO CITY	State MN	Zip Code 55013-7343	Amount of Each Receipt this Period CONTRIBUTION 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer NONE	Occupation RETIRED		CONTRIBUTION 300.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00		

Full Name (Last, First, Middle Initial) <b>MR. FRANK J. BRENNAN</b>			Date of Receipt MM / DD / YYYY 12 / 18 / 2013
Mailing Address 4901 GULFSHORE BLVD. N			Transaction ID : SA11.3964
City NAPLES	State FL	Zip Code 34103-	Amount of Each Receipt this Period CONTRIBUTION 2000.00
FEC ID number of contributing federal political committee. C			
Name of Employer NONE	Occupation RETIRED		CONTRIBUTION 2000.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2200.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020112273

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 31 OF 231	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**REBECCA S. BRIGGS**

Mailing Address **4509 BROWDALE AVENUE**

City **EDINA** State **MN** Zip Code **55424-1142**

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
**09 / 25 / 2013**

Transaction ID : **SA11.4262**

Amount of Each Receipt this Period  
**5200.00**

CONTRIBUTION

**[MEMO ITEM]**  
VERIFIED REATTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**REBECCA S. BRIGGS**

Mailing Address **4509 BROWDALE AVENUE**

City **EDINA** State **MN** Zip Code **55424-1142**

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
**12 / 31 / 2013**

Transaction ID : **SA11.4262B**

Amount of Each Receipt this Period  
**-2600.00**

CONTRIBUTION

**[MEMO ITEM]**  
PRESUMPTIVELY REATTRIBUTED REDESIGNATI  
TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**REBECCA S. BRIGGS**

Mailing Address **4509 BROWDALE AVENUE**

City **EDINA** State **MN** Zip Code **55424-1142**

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
**12 / 31 / 2013**

Transaction ID : **SA11.4265**

Amount of Each Receipt this Period  
**2600.00**

CONTRIBUTION

**[MEMO ITEM]**  
VERIFIED REATTRIBUTION REDESIGNATION FRC  
PRIMARY

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

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

**0.00**

14020112274

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 32 OF 231	
	(check only one)			
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 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)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**STEVE BRIGGS**

Mailing Address **4509 BROWDALE AVE**

City **EDINA** State **MN** Zip Code **55424-1142**

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

Name of Employer **TRIANGLE INDUSTRIES** Occupation **EXECUTIVE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt **09 / 25 / 2013**

Transaction ID : **SA11.2306**

Amount of Each Receipt this Period **7800.00**

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION REQUESTED

**B.** Full Name (Last, First, Middle Initial)  
**STEVE BRIGGS**

Mailing Address **4509 BROWDALE AVE**

City **EDINA** State **MN** Zip Code **55424-1142**

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

Name of Employer **TRIANGLE INDUSTRIES** Occupation **EXECUTIVE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt **12 / 31 / 2013**

Transaction ID : **SA11.4263**

Amount of Each Receipt this Period **-5200.00**

CONTRIBUTION

**[MEMO ITEM]**  
VERIFIED REATTRIBUTION REATTRIBUTION TO SPOUSE

**C.** Full Name (Last, First, Middle Initial)  
**DAVID A. BROOKS**

Mailing Address **2627 S SHORE BLVD**

City **SAINT PAUL** State **MN** Zip Code **55110-3951**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **12 / 03 / 2013**

Transaction ID : **SA11.3219**

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

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

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

**250.00**

14020112275

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 33 OF 231	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>A. CHRISTOPHER ALAN BROWN</b>			Date of Receipt MM / DD / YYYY 11 / 04 / 2013
Mailing Address 17648 BALLANTRAE CIRCLE			Transaction ID : SA11.2835
City EDEN PRAIRIE	State MN	Zip Code 55347-3435	Amount of Each Receipt this Period CONTRIBUTION 500.00
FEC ID number of contributing federal political committee. C	Occupation OWNER	Election Cycle-to-Date 250.00	
Name of Employer CB LLC	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>B. CHRISTOPHER ALAN BROWN</b>			Date of Receipt MM / DD / YYYY 11 / 19 / 2013
Mailing Address 17648 BALLANTRAE CIRCLE			Transaction ID : SA11.2835B
City EDEN PRAIRIE	State MN	Zip Code 55347-3435	Amount of Each Receipt this Period CONTRIBUTION -250.00
FEC ID number of contributing federal political committee. C	Occupation OWNER	Election Cycle-to-Date 250.00	[MEMO ITEM] PRESUMPTIVELY REATTRIBUTED REATTRIBUTIC TO SPOUSE
Name of Employer CB LLC	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

Full Name (Last, First, Middle Initial) <b>C. SUSAN E. BROWN</b>			Date of Receipt MM / DD / YYYY 11 / 19 / 2013
Mailing Address 17648 BALLENTRAE CIRCLE			Transaction ID : SA11.2895
City EDEN PRAIRIE	State MN	Zip Code 55347-3435	Amount of Each Receipt this Period CONTRIBUTION 250.00
FEC ID number of contributing federal political committee. C	Occupation NA	Election Cycle-to-Date 250.00	[MEMO ITEM] PRESUMPTIVELY REATTRIBUTED REATTRIBUTIC FROM SPOUSE
Name of Employer NA	Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	500.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020112276

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 34 OF 231	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>ROBERT BROWN</b>		Date of Receipt MM / DD / YYYY 12 / 27 / 2013
Mailing Address 915 S BROADWAY		Transaction ID : SA11.4191
City PARK RIDGE	State IL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer LINCOLN INTERNATIONAL	Occupation INVESTMENT BANKER	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>SCOTT BULLOCK</b>		Date of Receipt MM / DD / YYYY 12 / 30 / 2013
Mailing Address 13335 32ND AVENORTH		Transaction ID : SA11.4206
City PLYMOUTH	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
Name of Employer NONE	Occupation RETIRED	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>PAUL B. BURKE</b>		Date of Receipt MM / DD / YYYY 12 / 09 / 2013
Mailing Address 8271 SE SANCTUARY DRIVE		Transaction ID : SA11.3448
City HOBE SOUND	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2500.00
Name of Employer HADLEY HOUSE COMPANY	Occupation EXECUTIVE	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

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

14020112277

**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)		PAGE 35 OF 231	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**BARBARA A. BUTLER**

Mailing Address **736 GOVERNORS WAY**

City **WAYNESBORO** State **VA** Zip Code **22980-6112**

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

Name of Employer **N/A** Occupation **N/A**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **240.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 17 / 2013**

Transaction ID : **SA11.2697**

Amount of Each Receipt this Period  
**240.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**GREGORY BRIAN BUTLER**

Mailing Address **45 FAWN RUN**

City **GLASTONBURY** State **CT** Zip Code **06033-4168**

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

Name of Employer **NORTHEAST UTILITIES** Occupation **SR. VP & GENERAL COUNSEL**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 08 / 2013**

Transaction ID : **SA11.2503**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BRIAN P. CAREY**

Mailing Address **4793 FOUR SEASONS DR**

City **EAGAN** State **MN** Zip Code **55122-2916**

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

Name of Employer **UNITED PROPERTIES** Occupation **R.E. DEVELOPER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 20 / 2013**

Transaction ID : **SA11.4075**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

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

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

**1740.00**

14020112278

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 36 OF 231	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**BRETT CARLSON**

Mailing Address 25 LOCUS ROAD

City WINNETKA State IL Zip Code 60093-3725

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
12 / 05 / 2013

Transaction ID : SA11.3285

Amount of Each Receipt this Period  
  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**KENT MAX CARLSON**

Mailing Address 20505 LAKEVIEW AVE

City DEEPHAVEN State MN Zip Code 55331-9365

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
ANDERSON COMPANIES CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
12 / 30 / 2013

Transaction ID : SA11.4233

Amount of Each Receipt this Period  
  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**CARL CASALE**

Mailing Address 1446 DELAWARE AVE.

City WEST SAINT PAUL State MN Zip Code 55118-3000

FEC ID number of contributing federal political committee.

Name of Employer Occupation  
CHS, INC. EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
MM / DD / YYYY  
08 / 22 / 2013

Transaction ID : SA11.1610

Amount of Each Receipt this Period  
  
CONTRIBUTION

[MEMO ITEM]  
VERIFIED REATTRIBUTION

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

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

14020112279



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 37 OF 231	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**CARL CASALE**

Mailing Address 1446 DELAWARE AVE.

City WEST SAINT PAUL State MN Zip Code 55118-3000

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

Name of Employer CHS, INC. Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5200.00

Date of Receipt  
 MM / DD / YYYY  
 10 / 31 / 2013

Transaction ID : SA11.2792

Amount of Each Receipt this Period  
 -5200.00

CONTRIBUTION

[MEMO ITEM]  
 VERIFIED REATTRIBUTION REATTRIBUTION TO SPOUSE

**B.** Full Name (Last, First, Middle Initial)  
**KIM CASALE**

Mailing Address 1446 DELAWARE AVE.

City WEST SAINT PAUL State MN Zip Code 55118-3000

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

Name of Employer SELF Occupation FARM MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5200.00

Date of Receipt  
 MM / DD / YYYY  
 08 / 22 / 2013

Transaction ID : SA11.2791

Amount of Each Receipt this Period  
 5200.00

CONTRIBUTION

[MEMO ITEM]  
 VERIFIED REATTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**KIM CASALE**

Mailing Address 1446 DELAWARE AVE.

City WEST SAINT PAUL State MN Zip Code 55118-3000

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

Name of Employer SELF Occupation FARM MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5200.00

Date of Receipt  
 MM / DD / YYYY  
 11 / 11 / 2013

Transaction ID : SA11.2791B

Amount of Each Receipt this Period  
 -2600.00

CONTRIBUTION

[MEMO ITEM]  
 VERIFIED REATTRIBUTION REDESIGNATION TO GENERAL

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

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

0.00

14020112280

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 38 OF 231	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**KIM CASALE**

Mailing Address **1446 DELAWARE AVE.**

City **WEST SAINT PAUL** State **MN** Zip Code **55118-3000**

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

Name of Employer **SELF** Occupation **FARM MANAGER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**11 / 11 / 2013**

Transaction ID : **SA11.2808**

Amount of Each Receipt this Period  
**2600.00**

CONTRIBUTION

**[MEMO ITEM]**  
 VERIFIED REATTRIBUTION REDESIGNATION FRC  
 PRIMARY

**B.** Full Name (Last, First, Middle Initial)  
**MR. STEVEN J. CHENEY**

Mailing Address **14025 23RD AVE N**

City **PLYMOUTH** State **MN** Zip Code **55447-**

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

Name of Employer **CHENEY CARPET** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 / 17 / 2013**

Transaction ID : **SA11.3988**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DORIS M. CHURCH**

Mailing Address **1973 DUNLOE CIR**

City **DUNEDIN** State **FL** Zip Code **34698-3237**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
**12 / 31 / 2013**

Transaction ID : **SA11.4388**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

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

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

**1500.00**

14020112281

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 39 OF 231		
	(check only one)	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
		<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**JAYNE M. CLAIRMONT**

Mailing Address **4801 PONDVIEW TERRACE**

City <b>EDINA</b>	State <b>MN</b>	Zip Code <b>55424-</b>
----------------------	--------------------	---------------------------

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

Name of Employer <b>ENGLISH ROSE SUITES</b>	Occupation <b>CEO, PRESIDENT</b>
--	-------------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
**12 / 06 / 2013**

Transaction ID : **SA11.3358**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DANIEL M. CLARK**

Mailing Address **1325 ELMWOOD AVE  
1325 ELMWOOD AVE.**

City <b>EVANSTON</b>	State <b>IL</b>	Zip Code <b>60201-4305</b>
-------------------------	--------------------	-------------------------------

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

Name of Employer <b>THE ABIS GROUP</b>	Occupation <b>SALES / MARKETING</b>
---	--

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
**12 / 06 / 2013**

Transaction ID : **SA11.3433**

Amount of Each Receipt this Period  
**150.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**KIP COLWELL**

Mailing Address **5517 KNOLL DR**

City <b>EDINA</b>	State <b>MN</b>	Zip Code <b>55436-1022</b>
----------------------	--------------------	-------------------------------

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

Name of Employer <b>SELF EMPLOYED</b>	Occupation <b>CONSULTING</b>
--	---------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
**11 / 14 / 2013**

Transaction ID : **SA11.2862**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

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

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

**900.00**

14020112282

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 40 OF 231	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 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)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**MR. CLEMENT J. COMMERS**

Mailing Address 1942 GLENHILL RD.

City SAINT PAUL State MN Zip Code 55118-

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

Name of Employer ST PAUL LINOLIUM AND CARPET Occupation CEO (RETIRED)

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt: 12 / 17 / 2013  
Transaction ID : SA11.3960

Amount of Each Receipt this Period  
2000.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MARK CONNOLLY**

Mailing Address 307 OENOKE RIDGE ROAD

City NEW CANAAN State CT Zip Code 06840-

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

Name of Employer TRESATA INC Occupation BUSINESS DEVELOPMENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1500.00

Date of Receipt: 12 / 30 / 2013  
Transaction ID : SA11.4251

Amount of Each Receipt this Period  
1500.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**CRAIG COOK**

Mailing Address 134 KENSINGTON OVAL

City ROCKY RIVER State OH Zip Code 44116-1507

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

Name of Employer PRECISION PRODUCTION, INC Occupation PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt: 12 / 06 / 2013  
Transaction ID : SA11.3357

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... 4000.00

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

14020112283

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 41 OF 231
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 11d
		<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>DIANE COOK</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 03 / 2013
Mailing Address 18470 BEARPATH TRAIL		Transaction ID : SA11.3114
City EDEN PRAIRIE	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
Name of Employer INVESTMENT RARITIES INC	Occupation EXECUTIVE	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 600.00	

Full Name (Last, First, Middle Initial) <b>JOSEPH CORSO</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 12 / 2013
Mailing Address 116 HOWARD ST		Transaction ID : SA11.2619
City RIVERTON	State NJ	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer SELF	Occupation ENGINEER	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 300.00	

Full Name (Last, First, Middle Initial) <b>TENCH COXE</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 20 / 2013
Mailing Address 1401 EMERSON		Transaction ID : SA11.2919
City PALO ALTO	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10400.00
Name of Employer SUTTER HILL INVESTMENTS	Occupation VENTURE CAPITAL MANAGING DIRECTOR	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	10950.00
<b>TOTAL</b> This Period (last page this line number only) .....	

14020112284

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 42 OF 231	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**TENCH COXE**

Mailing Address 1401 EMERSON

City PALO ALTO State CA Zip Code 94301-3543

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

Name of Employer SUTTER HILL INVESTMENTS Occupation VENTURE CAPITAL MANAGING DIRECTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10400.00

Date of Receipt 12 / 31 / 2013

Transaction ID : SA11.2919B

Amount of Each Receipt this Period  
-7800.00  
CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
**TENCH COXE**

Mailing Address 1401 EMERSON

City PALO ALTO State CA Zip Code 94301-3543

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

Name of Employer SUTTER HILL INVESTMENTS Occupation VENTURE CAPITAL MANAGING DIRECTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10400.00

Date of Receipt 12 / 31 / 2013

Transaction ID : SA11.4308

Amount of Each Receipt this Period  
7800.00  
CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION REQUESTED REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
**ANN CRONIN**

Mailing Address 3209 GALLERIA #1508

City EDINA State MN Zip Code 55435-2554

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

Name of Employer RETIRED Occupation NONE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt 12 / 03 / 2013

Transaction ID : SA11.3245

Amount of Each Receipt this Period  
2000.00  
CONTRIBUTION

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

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

2000.00

14020112285

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 43 OF 231	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 11e
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>JOANN CRONIN</b>			Date of Receipt MM / DD / YYYY <b>11 / 19 / 2013</b>	
Mailing Address <b>4607 BROWDALE AVE</b>			<b>Transaction ID : SA11.4354</b>	
City <b>EDINA</b>	State <b>MN</b>	Zip Code <b>55424-1144</b>	Amount of Each Receipt this Period <b>571.59</b>	
FEC ID number of contributing federal political committee. <b>C</b>			CONTRIBUTION	
Name of Employer <b>INFORMATION REQUESTED PER BEST EFF</b>		Occupation <b>INFORMATION REQUESTED PER BEST EFF</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>571.59</b>		
<b>IN-KIND: EVENT CATERING AND EVENT SUPPLIE</b>				

Full Name (Last, First, Middle Initial) <b>JOE CRONIN</b>			Date of Receipt MM / DD / YYYY <b>11 / 19 / 2013</b>	
Mailing Address <b>4607 BROWDALE AVE</b>			<b>Transaction ID : SA11.4353</b>	
City <b>EDINA</b>	State <b>MN</b>	Zip Code <b>55424-1144</b>	Amount of Each Receipt this Period <b>571.59</b>	
FEC ID number of contributing federal political committee. <b>C</b>			CONTRIBUTION	
Name of Employer <b>INCENTIVE SERVICES</b>		Occupation <b>GEO</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>571.59</b>		
<b>IN-KIND: EVENT CATERING AND EVENT SUPPLIE</b>				

Full Name (Last, First, Middle Initial) <b>JON CROW</b>			Date of Receipt MM / DD / YYYY <b>11 / 02 / 2013</b>	
Mailing Address <b>601 CARLSON PARKWAY, #800</b>			<b>Transaction ID : SA11.4351</b>	
City <b>MINNETONKA</b>	State <b>MN</b>	Zip Code <b>55305-5229</b>	Amount of Each Receipt this Period <b>840.01</b>	
FEC ID number of contributing federal political committee. <b>C</b>			CONTRIBUTION	
Name of Employer <b>MERISTEM LLP</b>		Occupation <b>PARTNER/CLIENT ADVISER</b>		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date <b>1340.01</b>		
<b>IN-KIND: EVENT CATERING</b>				

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1983.19</b>
<b>TOTAL</b> This Period (last page this line number only).....	

14020112286

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 44 OF 231	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES A. D'AQUILA**

Mailing Address **6 CROCUS HILL**

City <b>ST PAUL</b>	State <b>MN</b>	Zip Code <b>55102-2809</b>
------------------------	--------------------	-------------------------------

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

Name of Employer <b>IMPERIAL CAPITAL</b>	Occupation <b>BANKER</b>
---	-----------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1750.00**

Date of Receipt  
**09 / 30 / 2013**

Transaction ID : **SA11.2053**

Amount of Each Receipt this Period  
**3500.00**

CONTRIBUTION

**[MEMO ITEM]**  
VERIFIED REATTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**BONNIE D'AQUILA**

Mailing Address **6 CROCUS HILL**

City <b>ST PAUL</b>	State <b>MN</b>	Zip Code <b>55102-2809</b>
------------------------	--------------------	-------------------------------

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

Name of Employer <b>SELF-EMPLOYER</b>	Occupation <b>SMALL BUSINESS OWNER</b>
--	---

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1750.00**

Date of Receipt  
**11 / 05 / 2013**

Transaction ID : **SA11.2801**

Amount of Each Receipt this Period  
**1750.00**

CONTRIBUTION

**[MEMO ITEM]**  
VERIFIED REATTRIBUTION REATTRIBUTION FRO SPOUSE

**C.** Full Name (Last, First, Middle Initial)  
**JAMES A. D'AQUILA**

Mailing Address **6 CROCUS HILL**

City <b>ST PAUL</b>	State <b>MN</b>	Zip Code <b>55102-2809</b>
------------------------	--------------------	-------------------------------

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

Name of Employer <b>IMPERIAL CAPITAL</b>	Occupation <b>BANKER</b>
---	-----------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1750.00**

Date of Receipt  
**11 / 05 / 2013**

Transaction ID : **SA11.2802**

Amount of Each Receipt this Period  
**-1750.00**

CONTRIBUTION

**[MEMO ITEM]**  
VERIFIED REATTRIBUTION REATTRIBUTION TO SPOUSE

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

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

**0.00**

14020112287



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 45 OF 231	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>WILLIAM DANA</b>			Date of Receipt MM / DD / YYYY 12 / 11 / 2013	
Mailing Address 159 GINGER COVE RD.			<b>Transaction ID : SA11.3478</b>	
City VALLEY	State NE	Zip Code 68064-3003	Amount of Each Receipt this Period CONTRIBUTION 1000.00	
FEC ID number of contributing federal political committee. C				
Name of Employer DANA GROUP LLC		Occupation REAL ESTATE AND INVESTMENTS		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00		

Full Name (Last, First, Middle Initial) <b>MARY SCHMID DAUGHERTY</b>			Date of Receipt MM / DD / YYYY 12 / 26 / 2013	
Mailing Address 123 MONTROSE PL			<b>Transaction ID : SA11.4165</b>	
City SAINT PAUL	State MN	Zip Code 55104-5622	Amount of Each Receipt this Period CONTRIBUTION 250.00	
FEC ID number of contributing federal political committee. C				
Name of Employer INFORMATION REQUESTED PER BEST EFF		Occupation INFORMATION REQUESTED PER BEST EFF		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>KENT P. DAUTEN</b>			Date of Receipt MM / DD / YYYY 11 / 26 / 2013	
Mailing Address 16 COUNTY LANE			<b>Transaction ID : SA11.2966</b>	
City NORTHFIELD	State IL	Zip Code 60093-1003	Amount of Each Receipt this Period CONTRIBUTION 1000.00	
FEC ID number of contributing federal political committee. C				
Name of Employer KEYSTONE CAPITAL, INC.		Occupation INVESTMENT MANAGER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2250.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020112288

**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)		PAGE 46 OF 231	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>DUFF DAVIDSON</b>			Date of Receipt MM / DD / YYYY 10 / 01 / 2013	
Mailing Address 9478 RILEY LAKE ROAD			Transaction ID : SA11.2263	
City EDEN PRAIRIE	State MN	Zip Code 55347-	Amount of Each Receipt this Period CONTRIBUTION 250.00	
FEC ID number of contributing federal political committee. C		Name of Employer CH ROBINSON		
Occupation DIRECTOR, SALES		Election Cycle-to-Date 250.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				

Full Name (Last, First, Middle Initial) <b>JENNY DAVIS</b>			Date of Receipt MM / DD / YYYY 09 / 26 / 2013	
Mailing Address 335 LAKEVIEW AVE			Transaction ID : SA11.2787	
City TONKA BAY	State MN	Zip Code 55331-9506	Amount of Each Receipt this Period CONTRIBUTION 5200.00	
FEC ID number of contributing federal political committee. C		Name of Employer NPARALLEL LLC		
Occupation ACCOUNT PLANNER		Election Cycle-to-Date 5200.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		[MEMO ITEM] VERIFIED REATTRIBUTION		

Full Name (Last, First, Middle Initial) <b>JENNY DAVIS</b>			Date of Receipt MM / DD / YYYY 10 / 30 / 2013	
Mailing Address 335 LAKEVIEW AVE			Transaction ID : SA11.2787B	
City TONKA BAY	State MN	Zip Code 55331-9506	Amount of Each Receipt this Period CONTRIBUTION -2600.00	
FEC ID number of contributing federal political committee. C		Name of Employer NPARALLEL LLC		
Occupation ACCOUNT PLANNER		Election Cycle-to-Date 5200.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		[MEMO ITEM] VERIFIED REATTRIBUTION REDESIGNATION TO GENERAL		

SUBTOTAL of Receipts This Page (optional).....			250.00	
TOTAL This Period (last page this line number only).....				

14020112289

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

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

FOR LINE NUMBER: PAGE 47 OF 231  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**JENNY DAVIS**

Mailing Address **335 LAKEVIEW AVE**

City <b>TONKA BAY</b>	State <b>MN</b>	Zip Code <b>55331-9506</b>
--------------------------	--------------------	-------------------------------

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

Name of Employer <b>NPARALLEL LLC</b>	Occupation <b>ACCOUNT PLANNER</b>
--	--------------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5200.00**

Date of Receipt  

MM	DD	YYYY
10	30	2013

Transaction ID : **SA11.2790**

Amount of Each Receipt this Period  

2600.00
---------

CONTRIBUTION

**[MEMO ITEM]**  
VERIFIED REATTRIBUTION REDESIGNATION FRC PRIMARY

**B.** Full Name (Last, First, Middle Initial)  
**JONATHON DAVIS**

Mailing Address **819 CANYON SPRINGS ROAD**

City <b>TWIN FALLS</b>	State <b>ID</b>	Zip Code <b>83301-3010</b>
---------------------------	--------------------	-------------------------------

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

Name of Employer <b>DAVISCO FOODS INTERNATIONAL</b>	Occupation <b>MANUFACTURER</b>
--	-----------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5200.00**

Date of Receipt  

MM	DD	YYYY
09	26	2013

Transaction ID : **SA11.2308**

Amount of Each Receipt this Period  

7800.00
---------

CONTRIBUTION

**[MEMO ITEM]**  
VERIFIED REATTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JONATHON DAVIS**

Mailing Address **819 CANYON SPRINGS ROAD**

City <b>TWIN FALLS</b>	State <b>ID</b>	Zip Code <b>83301-3010</b>
---------------------------	--------------------	-------------------------------

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

Name of Employer <b>DAVISCO FOODS INTERNATIONAL</b>	Occupation <b>MANUFACTURER</b>
--	-----------------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5200.00**

Date of Receipt  

MM	DD	YYYY
10	30	2013

Transaction ID : **SA11.2788**

Amount of Each Receipt this Period  

-5200.00
----------

CONTRIBUTION

**[MEMO ITEM]**  
VERIFIED REATTRIBUTION REATTRIBUTION TO SPOUSE

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

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

0.00
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14020112290

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

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

FOR LINE NUMBER: PAGE 48 OF 231  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**LAURIE ANN DAVIS**

Mailing Address P.O. BOX 14  
37041 U.S. HIGHWAY 169

City ST. PETER State MN Zip Code 56082-0014

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

Name of Employer NONE Occupation **HOMEMAKER**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 MM / DD / YYYY  
 08 / 07 / 2013

Transaction ID : **SA11.3021**

Amount of Each Receipt this Period  
**5200.00**  
 CONTRIBUTION

**[MEMO ITEM]**  
 VERIFIED REATTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**LAURIE ANN DAVIS**

Mailing Address P.O. BOX 14  
37041 U.S. HIGHWAY 169

City ST. PETER State MN Zip Code 56082-0014

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

Name of Employer NONE Occupation **HOMEMAKER**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 MM / DD / YYYY  
 12 / 02 / 2013

Transaction ID : **SA11.3021B**

Amount of Each Receipt this Period  
**-2600.00**  
 CONTRIBUTION

**[MEMO ITEM]**  
 PRESUMPTIVELY REATTRIBUTED REDESIGNATI  
 TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**LAURIE ANN DAVIS**

Mailing Address P.O. BOX 14  
37041 U.S. HIGHWAY 169

City ST. PETER State MN Zip Code 56082-0014

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

Name of Employer NONE Occupation **HOMEMAKER**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 MM / DD / YYYY  
 12 / 02 / 2013

Transaction ID : **SA11.3024**

Amount of Each Receipt this Period  
**2600.00**  
 CONTRIBUTION

**[MEMO ITEM]**  
 VERIFIED REATTRIBUTION REDESIGNATION FRC  
 PRIMARY

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

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

**0.00**

14020112291

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

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

FOR LINE NUMBER: PAGE 49 OF 231

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>MARK DAVIS</b>		Date of Receipt MM / DD / YYYY 12 / 26 / 2013
Mailing Address PO BOX 558 37045 HWY #169 N		Transaction ID : SA11.4183
City ST PETER	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10400.00 CONTRIBUTION
Name of Employer DAVISCO FOODS	Occupation CHEESE MAKER	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10400.00	

Full Name (Last, First, Middle Initial) <b>MARK DAVIS</b>		Date of Receipt MM / DD / YYYY 12 / 26 / 2013
Mailing Address PO BOX 558 37045 HWY #169 N		Transaction ID : SA11.4183B
City ST PETER	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2600.00 CONTRIBUTION
Name of Employer DAVISCO FOODS	Occupation CHEESE MAKER	[MEMO ITEM] REATTRIBUTION REQUESTED REDESIGNATION GENERAL
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10400.00	

Full Name (Last, First, Middle Initial) <b>MARK DAVIS</b>		Date of Receipt MM / DD / YYYY 12 / 26 / 2013
Mailing Address PO BOX 558 37045 HWY #169 N		Transaction ID : SA11.4435
City ST PETER	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00 CONTRIBUTION
Name of Employer DAVISCO FOODS	Occupation CHEESE MAKER	[MEMO ITEM] REDESIGNATION FROM PRIMARY
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	10400.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020112292

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 50 OF 231	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**MITCH DAVIS**

Mailing Address P.O. BOX 14

City	State	Zip Code
ST PETER	MN	56082-0014

FEC ID number of contributing federal political committee.  C

Name of Employer	Occupation
CAMBRIA	BUSINESS OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
08 / 07 / 2013

Transaction ID : SA11.2328

Amount of Each Receipt this Period  
7800.00  
CONTRIBUTION

[MEMO ITEM]  
REATTRIBUTION REQUESTED

**B.** Full Name (Last, First, Middle Initial)  
**MITCH DAVIS**

Mailing Address P.O. BOX 14

City	State	Zip Code
ST PETER	MN	56082-0014

FEC ID number of contributing federal political committee.  C

Name of Employer	Occupation
CAMBRIA	BUSINESS OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
12 / 02 / 2013

Transaction ID : SA11.3022

Amount of Each Receipt this Period  
-5200.00  
CONTRIBUTION

[MEMO ITEM]  
VERIFIED REATTRIBUTION REATTRIBUTION TO SPOUSE

**C.** Full Name (Last, First, Middle Initial)  
**JEROME F. DEAN**

Mailing Address PO BOX 529

City	State	Zip Code
GLADWYNE	PA	19035-0529

FEC ID number of contributing federal political committee.  C

Name of Employer	Occupation
SELF EMPLOYED	PRIVATE INVESTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
12 / 31 / 2013

Transaction ID : SA11.4389

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

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

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

250.00

1402011229Z

**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)		PAGE 51 OF 231	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>WILFRED DICKENSON</b>			Date of Receipt MM / DD / YYYY 11 / 26 / 2013	
A. Mailing Address 817 SPRING BROOK DR			Transaction ID : SA11.3011	
City WINONA	State MN	Zip Code 55987-9597	Amount of Each Receipt this Period 250.00 CONTRIBUTION	
FEC ID number of contributing federal political committee. C				
Name of Employer SCHWAB, LLC		Occupation ESTIMATOR		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00		

Full Name (Last, First, Middle Initial) <b>NANCY M. DICKINSON</b>			Date of Receipt MM / DD / YYYY 12 / 03 / 2013	
B. Mailing Address 500 GREENBRIER DR APT 308			Transaction ID : SA11.3201	
City CHARLOTTESVILLE	State VA	Zip Code 22901-3503	Amount of Each Receipt this Period 500.00 CONTRIBUTION	
FEC ID number of contributing federal political committee. C				
Name of Employer INFORMATION REQUESTED PER BEST EFF		Occupation INFORMATION REQUESTED PER BEST EFF		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00		

Full Name (Last, First, Middle Initial) <b>ELIZABETH A. DICKOFF</b>			Date of Receipt MM / DD / YYYY 09 / 29 / 2013	
C. Mailing Address 4832 HIGHLAND RD			Transaction ID : SA11.3339	
City MINNETONKA	State MN	Zip Code 55345-3628	Amount of Each Receipt this Period 5200.00 CONTRIBUTION	
FEC ID number of contributing federal political committee. C				
Name of Employer NONE		Occupation HOMEMAKER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	750.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020112294

**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)	PAGE 52 OF 231
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 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)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**ELIZABETH A. DICKOFF**

Mailing Address 4832 HIGHLAND RD

City MINNETONKA	State MN	Zip Code 55345-3628
--------------------	-------------	------------------------

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

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
MM / DD / YYYY  
12 / 06 / 2013

Transaction ID : SA11.3339B

Amount of Each Receipt this Period  
-2600.00  
CONTRIBUTION

**[MEMO ITEM]**  
PRESUMPTIVELY REATTRIBUTED REDESIGNATION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
**ELIZABETH A. DICKOFF**

Mailing Address 4832 HIGHLAND RD

City MINNETONKA	State MN	Zip Code 55345-3628
--------------------	-------------	------------------------

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

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
MM / DD / YYYY  
12 / 06 / 2013

Transaction ID : SA11.3342

Amount of Each Receipt this Period  
2600.00  
CONTRIBUTION

**[MEMO ITEM]**  
PRESUMPTIVELY REDESIGNATED REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
**MIKE DICKOFF**

Mailing Address 4832 HIGHLAND ROAD

City MINNETONKA	State MN	Zip Code 55345-3628
--------------------	-------------	------------------------

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

Name of Employer SELF-EMPLOYED	Occupation ENTREPRENEUR
-----------------------------------	----------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
MM / DD / YYYY  
09 / 29 / 2013

Transaction ID : SA11.2318

Amount of Each Receipt this Period  
7800.00  
CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION REQUESTED

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

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

0.00

14020112295



**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)	PAGE 53 OF 231
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial)  
**MIKE DICKOFF**

A. Mailing Address **4832 HIGHLAND ROAD**

City <b>MINNETONKA</b>	State <b>MN</b>	Zip Code <b>55345-3628</b>
---------------------------	--------------------	-------------------------------

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

Name of Employer <b>SELF-EMPLOYED</b>	Occupation <b>ENTREPRENEUR</b>
--	-----------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**5200.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 06 / 2013**

Transaction ID : **SA11.3340**

Amount of Each Receipt this Period  
**-5200.00**  
 CONTRIBUTION

**[MEMO ITEM]**  
 PRESUMPTIVELY REATTRIBUTED REATTRIBUTIC TO SPOUSE

Full Name (Last, First, Middle Initial)  
**DANIEL DIEBEL**

B. Mailing Address **1439 KNOLLWOOD LN**

City <b>MENDOTA HEIGHTS</b>	State <b>MN</b>	Zip Code <b>55118-2728</b>
--------------------------------	--------------------	-------------------------------

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

Name of Employer <b>NONE</b>	Occupation <b>RETIRED</b>
---------------------------------	------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 26 / 2013**

Transaction ID : **SA11.4123**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**PHILIP DIEN**

C. Mailing Address **10444 PURDEY RD**

City <b>EDEN PRAIRIE</b>	State <b>MN</b>	Zip Code <b>55347-5221</b>
-----------------------------	--------------------	-------------------------------

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

Name of Employer <b>MINNESOTA ONCOLOGY</b>	Occupation <b>PHYSICIAN</b>
---	--------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 29 / 2013**

Transaction ID : **SA11.2946**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

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

**500.00**

14020112296

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 54 OF 231	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**CORDELL DIETZ**

Mailing Address **6 CREEKSIDE LANE**  
**6 CREEKSIDE LANE**

City **NORTH OAKS** State **MN** Zip Code **55126-3703**

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

Name of Employer **VALSPAR** Occupation **VP**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1350.00**

Date of Receipt  
**12 / 21 / 2013**

Transaction ID : **SA11.3540**

Amount of Each Receipt this Period  
**1000.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MICHAEL DOMAILLE**

Mailing Address **P.O. BOX 161097**

City **BIG SKY** State **MT** Zip Code **59716-1097**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **10400.00**

Date of Receipt  
**12 / 27 / 2013**

Transaction ID : **SA11.4190**

Amount of Each Receipt this Period  
**10400.00**  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JEFF D. EATON**

Mailing Address **4620 UNDERWOOD LANE N**

City **PLYMOUTH** State **MN** Zip Code **55442-**

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

Name of Employer **CUSHMAN&WAKEFIELD/NORTHMARQ** Occupation **COMMERCIAL REAL ESTATE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**12 / 16 / 2013**

Transaction ID : **SA11.4297**

Amount of Each Receipt this Period  
**250.00**  
CONTRIBUTION

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

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

**11650.00**

14020112297

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 55 OF 231	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>A. PATRICK EILERS</b>		Date of Receipt MM / DD / YYYY 11 / 29 / 2013	
Mailing Address 177 DEWINDT RD		Transaction ID : SA11.2948	
City WINNETKA	State MN	Zip Code 55105-	Amount of Each Receipt this Period CONTRIBUTION 5200.00
FEC ID number of contributing federal political committee. C	Name of Employer MADISON DEARBORN PARTNERS	Occupation PRIVATE EQUITY	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) <b>B. PATRICK EILERS</b>		Date of Receipt MM / DD / YYYY 11 / 29 / 2013	
Mailing Address 177 DEWINDT RD		Transaction ID : SA11.2948B	
City WINNETKA	State MN	Zip Code 55105-	Amount of Each Receipt this Period CONTRIBUTION -2600.00
FEC ID number of contributing federal political committee. C	Name of Employer MADISON DEARBORN PARTNERS	Occupation PRIVATE EQUITY	[MEMO ITEM] REDESIGNATION TO GENERAL
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) <b>C. PATRICK EILERS</b>		Date of Receipt MM / DD / YYYY 11 / 29 / 2013	
Mailing Address 177 DEWINDT RD		Transaction ID : SA11.4576	
City WINNETKA	State MN	Zip Code 55105-	Amount of Each Receipt this Period CONTRIBUTION 2600.00
FEC ID number of contributing federal political committee. C	Name of Employer MADISON DEARBORN PARTNERS	Occupation PRIVATE EQUITY	[MEMO ITEM] REDESIGNATION FROM PRIMARY
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5200.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020112298

# 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)	PAGE 56 OF 231
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 11c	<input type="checkbox"/> 13b
	<input type="checkbox"/> 11d	<input type="checkbox"/> 14
		<input type="checkbox"/> 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)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**MARTIN H. ELLBOGEN M.D.**

Mailing Address **1420 BROOKVIEW DR.**

City **CASPER** State **WY** Zip Code **82604-4853**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 26 / 2013**

Transaction ID : **SA11.4161**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**GORDON ENGEL**

Mailing Address **645 HARMONY CIRCLE**

City **WAYZATA** State **MN** Zip Code **55391-1105**

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

Name of Employer **THE FOURSOME INC** Occupation **OWNER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 18 / 2013**

Transaction ID : **SA11.3533**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**STEVEN ENGLER**

Mailing Address **14600 ROCKSBOROUGH ROAD**

City **MINNETONKA** State **MN** Zip Code **55345-3716**

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

Name of Employer **RAMSEY ENGLER LTD** Occupation **BUSINESS PRINCIPAL**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 07 / 2013**

Transaction ID : **SA11.3446**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

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

**750.00**

**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)		PAGE 57 OF 231	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>BRIAN ALAN ERICKSON</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 30 / 2013	
Mailing Address 5209 SHAEFER ROAD			Transaction ID : SA11.4238	
City EDINA	State MN	Zip Code 55436-1145	Amount of Each Receipt this Period CONTRIBUTION 2000.00	
FEC ID number of contributing federal political committee. C				
Name of Employer HOLIDAY COMPANIES		Occupation EXECUTIVE/ OWNER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2000.00		

Full Name (Last, First, Middle Initial) <b>DAVID S. ERICKSON</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 30 / 2013	
Mailing Address 301 KENWOOD PKWY #301			Transaction ID : SA11.4234	
City MINNEAPOLIS	State MN	Zip Code 55403-1162	Amount of Each Receipt this Period CONTRIBUTION 2600.00	
FEC ID number of contributing federal political committee. C				
Name of Employer SELF		Occupation ATTORNEY		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 2600.00		

Full Name (Last, First, Middle Initial) <b>MICHAEL D. ERICKSON</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 30 / 2013	
Mailing Address 5808 CRESCENT TERRACE			Transaction ID : SA11.4225	
City EDINA	State MN	Zip Code 55436-1319	Amount of Each Receipt this Period CONTRIBUTION 1000.00	
FEC ID number of contributing federal political committee. C				
Name of Employer HOLIDAY COMPANIES		Occupation EXECUTIVE/OWNER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00		

SUBTOTAL of Receipts This Page (optional).....			5600.00	
TOTAL This Period (last page this line number only).....				

14020112300

**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)		PAGE 58 OF 231	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**McFadden for Senate**

A. Full Name (Last, First, Middle Initial) <b>NEAL D. ERICKSON</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 30 / 2013	
Mailing Address 4567 AMERICAN BLVD W			Transaction ID : SA11.4237	
City MINNEAPOLIS	State MN	Zip Code 55437-1123	Amount of Each Receipt this Period CONTRIBUTION 2000.00	
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 2000.00		
Name of Employer HOLIDAY COMPANIES		Occupation EXECUTIVE/ OWNER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				

B. Full Name (Last, First, Middle Initial) <b>ROBERT E. ERICKSON SR</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 20 / 2013	
Mailing Address 12600 MARION LN W APT 702E			Transaction ID : SA11.4095	
City MINNETONKA	State MN	Zip Code 55305-1352	Amount of Each Receipt this Period CONTRIBUTION 500.00	
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 500.00		
Name of Employer INFORMATION REQUESTED PER BEST EFFC		Occupation INFORMATION REQUESTED PER BEST EFF		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				

C. Full Name (Last, First, Middle Initial) <b>RON ERICKSON</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 16 / 2013	
Mailing Address 5123 LAKE RIDGE ROAD			Transaction ID : SA11.3509	
City EDINA	State MN	Zip Code 55436-1234	Amount of Each Receipt this Period CONTRIBUTION 1000.00	
FEC ID number of contributing federal political committee. C		Election Cycle-to-Date 5200.00		
Name of Employer HOLIDAY COMPANIES		Occupation CEO		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3500.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020112301

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

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

FOR LINE NUMBER: PAGE 59 OF 231

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 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)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial)  
**RON ERICKSON**

Mailing Address **5123 LAKE RIDGE ROAD**

City State Zip Code  
**EDINA MN 55436-1234**

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HOLIDAY COMPANIES**

Occupation  
**CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5200.00**

Date of Receipt

**12 / 26 / 2013**

Transaction ID : **SA11.4186**

Amount of Each Receipt this Period

**4200.00**

CONTRIBUTION

REATTRIBUTION REQUESTED

Full Name (Last, First, Middle Initial)  
**ANDREW FARIS**

Mailing Address **4929 E. SUNNYSLOPE RD**

City State Zip Code  
**EDINA MN 55424-1166**

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**HARDWARE.COM**

Occupation  
**PRESIDENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**2500.00**

Date of Receipt

**11 / 29 / 2013**

Transaction ID : **SA11.2951**

Amount of Each Receipt this Period

**2500.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**PATRICK M. FARLEY**

Mailing Address **7149 BALLARD TRAIL**

City State Zip Code  
**INVER GROVE HEIGHTS MN 55077-4447**

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**NONE**

Occupation  
**RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**750.00**

Date of Receipt

**12 / 16 / 2013**

Transaction ID : **SA11.3508**

Amount of Each Receipt this Period

**250.00**

CONTRIBUTION

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

**6950.00**

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

**6950.00**

14020112302

**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)		PAGE 60 OF 231	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 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)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT W. FAYFIELD**

Mailing Address P.O. BOX 34

City: MINNEAPOLIS      State: MN      Zip Code: 55440-

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

Name of Employer: BANNER ENGINEERING      Occupation: CEO

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: **10400.00**

Date of Receipt: **12 / 13 / 2013**

Transaction ID : **SA11.3920**

Amount of Each Receipt this Period  
**2600.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT W. FAYFIELD**

Mailing Address P.O. BOX 34

City: MINNEAPOLIS      State: MN      Zip Code: 55440-

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

Name of Employer: BANNER ENGINEERING      Occupation: CEO

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: **10400.00**

Date of Receipt: **12 / 13 / 2013**

Transaction ID : **SA11.3921**

Amount of Each Receipt this Period  
**7800.00**  
CONTRIBUTION

REATTRIBUTION REQUESTED

**C.** Full Name (Last, First, Middle Initial)  
**BETH FINCH**

Mailing Address 13580 40TH STREET

City: AFTON      State: MN      Zip Code: 55001-9638

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

Name of Employer: EDUCATION CONSULTANT      Occupation: CONSULTANT

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date: **250.00**

Date of Receipt: **11 / 12 / 2013**

Transaction ID : **SA11.2809**

Amount of Each Receipt this Period  
**250.00**  
CONTRIBUTION

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

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

**10650.00**

14020112303



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

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

FOR LINE NUMBER: PAGE 61 OF 231

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial)  
**MR. DONALD V. FITES**

Mailing Address 9943 BRASSIE BND

City State Zip Code  
NAPLES FL 34108-1923

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **500.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		10		2013

Transaction ID : SA11.3586

Amount of Each Receipt this Period

<b>500.00</b>
---------------

CONTRIBUTION

**B. BARBARA MISKELL FITZGERALD**

Full Name (Last, First, Middle Initial)  
**BARBARA MISKELL FITZGERALD**

Mailing Address 1304 N. 139TH ST.

City State Zip Code  
OMAHA NE 68154-5104

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

Name of Employer Occupation  
NONE HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **1000.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		17		2013

Transaction ID : SA11.3525

Amount of Each Receipt this Period

<b>500.00</b>
---------------

CONTRIBUTION

**C. JOHN FITZGERALD**

Full Name (Last, First, Middle Initial)  
**JOHN FITZGERALD**

Mailing Address 48 HOLLY DR

City State Zip Code  
EAST NORTHPORT NY 11731-5200

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

Name of Employer Occupation  
BERDON LLP CPA

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **2500.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12		04		2013

Transaction ID : SA11.3108

Amount of Each Receipt this Period

<b>2500.00</b>
----------------

CONTRIBUTION

<b>3500.00</b>
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<b>3500.00</b>
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**SUBTOTAL** of Receipts This Page (optional).....

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

14020112304

**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)		PAGE 62 OF 231	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**MR. EDWARD F. FLAHERTY**

Mailing Address **8345 CRYSTAL DEW RD #200**

City **EDEN PRAIRIE** State **MN** Zip Code **55344-**

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

Name of Employer **LARIAT COMPANIES** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	7	/	2	0	1	3

Transaction ID : **SA11.4041**

Amount of Each Receipt this Period  

2	6	0	0	.	0	0
---	---	---	---	---	---	---

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. EDWARD F. FLAHERTY**

Mailing Address **8345 CRYSTAL DEW RD #200**

City **EDEN PRAIRIE** State **MN** Zip Code **55344-**

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

Name of Employer **LARIAT COMPANIES** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	7	/	2	0	1	3

Transaction ID : **SA11.4042**

Amount of Each Receipt this Period  

2	4	0	0	.	0	0
---	---	---	---	---	---	---

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**PETER N. FLOCOS**

Mailing Address **5613 HOWE STREET**

City **PITTSBURGH** State **PA** Zip Code **15232-2415**

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

Name of Employer **K&L GATES LLP** Occupation **LAWYER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	1	/	2	0	1	3

Transaction ID : **SA11.4286**

Amount of Each Receipt this Period  

2	0	0	.	0	0
---	---	---	---	---	---

**CONTRIBUTION**

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

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

5	2	0	0	.	0	0
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5	2	0	0	.	0	0
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14020112305

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

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

FOR LINE NUMBER: PAGE 63 OF 231

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial)  
**MARK W. FLOERSCH**

Mailing Address 15725 CALIFORNIA ST

City State Zip Code  
OMAHA NE 68118-2229

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

Name of Employer Occupation  
PEOPLE SERVICES CENTER CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
**5200.00**

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
12	05	2013

Transaction ID : SA11.3307

Amount of Each Receipt this Period

<b>10400.00</b>
-----------------

CONTRIBUTION

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

**MARK W. FLOERSCH**

Mailing Address 15725 CALIFORNIA ST

City State Zip Code  
OMAHA NE 68118-2229

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

Name of Employer Occupation  
PEOPLE SERVICES CENTER CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
**5200.00**

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
12	05	2013

Transaction ID : SA11.3307B

Amount of Each Receipt this Period

<b>-5200.00</b>
-----------------

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION TO SPOUSE

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

**MARK W. FLOERSCH**

Mailing Address 15725 CALIFORNIA ST

City State Zip Code  
OMAHA NE 68118-2229

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

Name of Employer Occupation  
PEOPLE SERVICES CENTER CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
**5200.00**

Date of Receipt

M M M	D D D	Y Y Y Y Y Y
12	05	2013

Transaction ID : SA11.4455B

Amount of Each Receipt this Period

<b>-2600.00</b>
-----------------

CONTRIBUTION

**[MEMO ITEM]**  
PRESUMPTIVELY REATTRIBUTED REDESIGNATI  
TO GENERAL

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

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

<b>10400.00</b>
-----------------

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14020112306

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

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

FOR LINE NUMBER: PAGE 64 OF 231

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
---	------------------------------	------------------------------	------------------------------	-----------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial)  
**MARK W. FLOERSCH**

Mailing Address 15725 CALIFORNIA ST

City	State	Zip Code
OMAHA	NE	68118-2229

FEC ID number of contributing federal political committee.

C

Name of Employer  
PEOPLE SERVICES CENTER

Occupation  
CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 05 / 2013

Transaction ID : SA11.4457

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

**[MEMO ITEM]**  
PRESUMPTIVELY REATTRIBUTED REDESIGNATI  
FROM PRIMARY

Full Name (Last, First, Middle Initial)  
**STACEY FLOERSCH**

Mailing Address 15725 CALIFORNIA ST

City	State	Zip Code
OMAHA	NE	68118-2229

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED PER BEST EFF

Occupation  
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 05 / 2013

Transaction ID : SA11.4454

Amount of Each Receipt this Period

5200.00

CONTRIBUTION

**[MEMO ITEM]**  
PRESUMPTIVELY REATTRIBUTED REATTRIBUTIC  
FROM SPOUSE

Full Name (Last, First, Middle Initial)  
**STACEY FLOERSCH**

Mailing Address 15725 CALIFORNIA ST

City	State	Zip Code
OMAHA	NE	68118-2229

FEC ID number of contributing federal political committee.

C

Name of Employer  
INFORMATION REQUESTED PER BEST EFF

Occupation  
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
12 / 05 / 2013

Transaction ID : SA11.4454B

Amount of Each Receipt this Period

-2600.00

CONTRIBUTION

**[MEMO ITEM]**  
PRESUMPTIVELY REATTRIBUTED REDESIGNATI  
TO GENERAL

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

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

0.00

14020112307

**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)	PAGE 65 OF 231
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 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)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**STACEY FLOERSCH**

Mailing Address 15725 CALIFORNIA ST

City OMAHA State NE Zip Code 68118-2229

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFORTS INFORMATION REQUESTED PER BEST EFFORTS

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 05 / 2013

Transaction ID : SA11.4459

Amount of Each Receipt this Period  
2600.00  
CONTRIBUTION

**[MEMO ITEM]**  
PRESUMPTIVELY REATTRIBUTED REDESIGNATION FROM PRIMARY

**B.** Full Name (Last, First, Middle Initial)  
**MR. WILLIAM FORD**

Mailing Address 14930 RICHARDS DR. W

City MINNETONKA State MN Zip Code 55345-

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

Name of Employer Occupation  
H. J. SIMS FINANCIAL ADVISOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 11 / 2013

Transaction ID : SA11.3840

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ELEANOR J. FOX**

Mailing Address 13572 PINE VILLA LN

City FORT MYERS State FL Zip Code 33912-1614

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
12 / 31 / 2013

Transaction ID : SA11.4270

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

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

750.00

14020112308

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

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

FOR LINE NUMBER: PAGE 66 OF 231

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial)  
**JEFF FOX**

**A.** Mailing Address 7701 FORSYTH BLVD, STE. 600

City State Zip Code  
SAINT LOUIS MO 63105-1875

FEC ID number of contributing federal political committee.

C

Name of Employer  
HARBOUR GROUP

Occupation  
CEO

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

2600.00

Date of Receipt

MM / DD / YYYY  
10 / 11 / 2013

Transaction ID : SA11.2554

Amount of Each Receipt this Period

2600.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**GREG FRANDBEN**

**B.** Mailing Address 16 N. MALLARD RD.

City State Zip Code  
ST. PAUL MN 55127-2503

FEC ID number of contributing federal political committee.

C

Name of Employer  
FRANDBEN CORPORATION

Occupation  
BUSINESS OWNER

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

1000.00

Date of Receipt

MM / DD / YYYY  
10 / 03 / 2013

Transaction ID : SA11.2235

Amount of Each Receipt this Period

1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**MR. HARRY A. FRANKMAN**

**C.** Mailing Address 777 FAIRFIELD CR

City State Zip Code  
MINNETONKA MN 55305-

FEC ID number of contributing federal political committee.

C

Name of Employer  
FRANKLIN LAW OFFICES

Occupation  
ATTORNEY

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

500.00

Date of Receipt

MM / DD / YYYY  
12 / 17 / 2013

Transaction ID : SA11.3987

Amount of Each Receipt this Period

500.00

CONTRIBUTION

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

4100.00

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

14020112309

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

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

FOR LINE NUMBER: PAGE 67 OF 231

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial)  
**LELAND FRANKMAN**

Mailing Address **555 OAK RIDGE PLACE #110**

City State Zip Code  
**HOPKINS MN 55305-4834**

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**SELF**

Occupation  
**ATTORNEY**

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

**750.00**

Date of Receipt

**11 / 13 / 2013**

Transaction ID : **SA11.2837**

Amount of Each Receipt this Period

**500.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**DAVID FRAUENSHUH**

Mailing Address **7101 W 78TH ST**

City State Zip Code  
**MINNEAPOLIS MN 55439-2524**

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**FRAUENSHUH, INC**

Occupation  
**CEO**

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

**5200.00**

Date of Receipt

**12 / 12 / 2013**

Transaction ID : **SA11.4109**

Amount of Each Receipt this Period

**5200.00**

CONTRIBUTION

Full Name (Last, First, Middle Initial)

**DAVID FRAUENSHUH**

Mailing Address **7101 W 78TH ST**

City State Zip Code  
**MINNEAPOLIS MN 55439-2524**

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**FRAUENSHUH, INC**

Occupation  
**CEO**

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

**5200.00**

Date of Receipt

**12 / 12 / 2013**

Transaction ID : **SA11.4109B**

Amount of Each Receipt this Period

**-2600.00**

CONTRIBUTION

**[MEMO ITEM]  
REATTRIBUTION TO SPOUSE**

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

**5700.00**

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

**5700.00**

14020112310

**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)		PAGE 68 OF 231	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**SANDRA FRAUENSHUH**

Mailing Address 7101 W 78TH ST

City: MINNEAPOLIS      State: MN      Zip Code: 55439-2524

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

Name of Employer: HOMEMAKER      Occupation: HOMEMAKER

Receipt For: 2014  
 Primary       General  
 Other (specify)

Election Cycle-to-Date: 5200.00

Date of Receipt: 12 / 12 / 2013

Transaction ID : SA11.4428

Amount of Each Receipt this Period: 2600.00

CONTRIBUTION

**[MEMO ITEM]**  
PRESUMPTIVELY REATTRIBUTED REATTRIBUTIC FROM SPOUSE

**B.** Full Name (Last, First, Middle Initial)  
**MR. EUGENE U. FREY**

Mailing Address 4101 GULF SHORE BLVD N PH 2

City: NAPLES      State: FL      Zip Code: 34103-

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

Name of Employer: NONE      Occupation: RETIRED

Receipt For: 2014  
 Primary       General  
 Other (specify)

Election Cycle-to-Date: 5200.00

Date of Receipt: 12 / 17 / 2013

Transaction ID : SA11.4031

Amount of Each Receipt this Period: 2600.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. EUGENE U. FREY**

Mailing Address 4101 GULF SHORE BLVD N PH 2

City: NAPLES      State: FL      Zip Code: 34103-

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

Name of Employer: NONE      Occupation: RETIRED

Receipt For: 2014  
 Primary       General  
 Other (specify)

Election Cycle-to-Date: 5200.00

Date of Receipt: 12 / 17 / 2013

Transaction ID : SA11.4032

Amount of Each Receipt this Period: 2600.00

CONTRIBUTION

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

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

5200.00



**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)	PAGE 69 OF 231
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 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)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>MRS. MARY F. FREY</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 17 / 2013	
Mailing Address 4101 GULF SHORE BLVD N PH 2		Transaction ID : SA11.4033	
City NAPLES	State FL	Zip Code 34103-	Amount of Each Receipt this Period 2600.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) <b>MRS. MARY F. FREY</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 17 / 2013	
Mailing Address 4101 GULF SHORE BLVD N PH 2		Transaction ID : SA11.4034	
City NAPLES	State FL	Zip Code 34103-	Amount of Each Receipt this Period 2600.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer NONE	Occupation RETIRED		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) <b>SARA FREY</b>		Date of Receipt M M / D D / Y Y Y Y 12 / 29 / 2013	
Mailing Address 247 EAST 28TH STREET APARTMENT 16A		Transaction ID : SA11.4200	
City NEW YORK	State NY	Zip Code 10016-7219	Amount of Each Receipt this Period 5200.00 CONTRIBUTION
FEC ID number of contributing federal political committee. C			
Name of Employer LAZARD	Occupation ANALYST		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

SUBTOTAL of Receipts This Page (optional).....	10400.00
TOTAL This Period (last page this line number only).....	

14020112312

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

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

FOR LINE NUMBER: PAGE 70 OF 231  
(check only one)  
 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)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial)  
**SARA FREY**

Mailing Address **247 EAST 28TH STREET APARTMENT 16A**

City State Zip Code  
**NEW YORK NY 10016-7219**

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**LAZARD**

Occupation  
**ANALYST**

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

**5200.00**

Date of Receipt

**12 / 29 / 2013**

Transaction ID : **SA11.4200B**

Amount of Each Receipt this Period

**-2600.00**

CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION TO GENERAL**

Full Name (Last, First, Middle Initial)  
**SARA FREY**

Mailing Address **247 EAST 28TH STREET APARTMENT 16A**

City State Zip Code  
**NEW YORK NY 10016-7219**

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**LAZARD**

Occupation  
**ANALYST**

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

**5200.00**

Date of Receipt

**12 / 29 / 2013**

Transaction ID : **SA11.4578**

Amount of Each Receipt this Period

**2600.00**

CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION FROM PRIMARY**

Full Name (Last, First, Middle Initial)  
**MS. JEAN B. FRIEND**

Mailing Address **4461 SW PARKGATE BLVD.**

City State Zip Code  
**PALM CITY FL 34990-**

FEC ID number of contributing federal political committee.

**C**

Name of Employer  
**INFORMATION REQUESTED PER BEST EFF**

Occupation  
**INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014

Primary  General  
 Other (specify)

Election Cycle-to-Date

**500.00**

Date of Receipt

**12 / 10 / 2013**

Transaction ID : **SA11.3663**

Amount of Each Receipt this Period

**500.00**

CONTRIBUTION

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

**500.00**

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

**500.00**

14020112312

**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)		PAGE 71 OF 231	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**DAVID FRITZSCHE**

Mailing Address **33 LOCUST RD.**

City **WINNETKA** State **IL** Zip Code **60093-3725**

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

Name of Employer **MIDAMERICA PARTNERS, LLC** Occupation **HEALTHCARE / MEDICAL DEVICE BUSINES**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  

M M	/	D D	/	Y Y - Y Y
11	/	15	/	2013

Transaction ID : **SA11.2866**

Amount of Each Receipt this Period  

250.00
--------

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**DOUG FULTON**

Mailing Address **4706 GOLF TERRACE  
4706 GOLF TER**

City **EDINA** State **MN** Zip Code **55424-1513**

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

Name of Employer **CUSHMAN & WAKEFIELD NORTHMARQ** Occupation **REAL ESTATE ADVISOR**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  

M M	/	D D	/	Y Y - Y Y
11	/	29	/	2013

Transaction ID : **SA11.2949**

Amount of Each Receipt this Period  

150.00
--------

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**DOUG FULTON**

Mailing Address **4706 GOLF TERRACE  
4706 GOLF TER**

City **EDINA** State **MN** Zip Code **55424-1513**

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

Name of Employer **CUSHMAN & WAKEFIELD NORTHMARQ** Occupation **REAL ESTATE ADVISOR**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  

M M	/	D D	/	Y Y - Y Y
12	/	31	/	2013

Transaction ID : **SA11.4305**

Amount of Each Receipt this Period  

500.00
--------

**CONTRIBUTION**

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

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

**900.00**

14020112314

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

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

FOR LINE NUMBER: PAGE 72 OF 231

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 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)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**MR. GERALD R. GALLAGHER**

Mailing Address **4912 MERILANE**

City **EDINA** State **MN** Zip Code **55436-**

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

Name of Employer **OZK INVESTMENT PARTNERS** Occupation **VENTURE CAPITAL**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt

**12 / 11 / 2013**

Transaction ID : **SA11.3856**

Amount of Each Receipt this Period

**250.00**

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT W. GARTHWAIT SR.**

Mailing Address **P.O. BOX 1367**

City **WATERBURY** State **CT** Zip Code **06721-**

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

Name of Employer **CLYO DEL MANUFACTURING CO.** Occupation **CHAIRMAN**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt

**12 / 10 / 2013**

Transaction ID : **SA11.3685**

Amount of Each Receipt this Period

**300.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**RONALD GIDWITZ**

Mailing Address **200 S WALKER DR  
SUITE 4000**

City **CHICAGO** State **IL** Zip Code **60606-5821**

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

Name of Employer **GCG PARNTERS** Occupation **PARTNER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt

**12 / 20 / 2013**

Transaction ID : **SA11.4088**

Amount of Each Receipt this Period

**2600.00**

CONTRIBUTION

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

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

**3150.00**

14020112315

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

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

FOR LINE NUMBER: PAGE 73 OF 231

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 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)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial)  
**JOHN P. GOEBEL**

Mailing Address 213 W 9TH ST

City State Zip Code  
HINSDALE IL 60521-4535

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

Name of Employer Occupation  
BRYAN CAVE LLP ATTORNEY

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
**300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y Y
12		06		2013

Transaction ID : SA11.3443

Amount of Each Receipt this Period

<b>300.00</b>
---------------

CONTRIBUTION

A.

Full Name (Last, First, Middle Initial)  
**PAUL GRANGAARD**

Mailing Address 6927 MARK TERRACE CIRCLE

City State Zip Code  
EDINA MN 55439-1622

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

Name of Employer Occupation  
N/A N/A

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
**5200.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y Y
12		31		2013

Transaction ID : SA11.4280

Amount of Each Receipt this Period

<b>5200.00</b>
----------------

CONTRIBUTION

B.

Full Name (Last, First, Middle Initial)  
**PAUL GRANGAARD**

Mailing Address 6927 MARK TERRACE CIRCLE

City State Zip Code  
EDINA MN 55439-1622

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

Name of Employer Occupation  
N/A N/A

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date  
**5200.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y Y Y
12		31		2013

Transaction ID : SA11.4280B

Amount of Each Receipt this Period

<b>-2600.00</b>
-----------------

CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION TO GENERAL**

C.

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

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

<b>5500.00</b>
----------------

<b>5500.00</b>
----------------

14020112316

**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)		PAGE 74 OF 231	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**PAUL GRANGAARD**

Mailing Address **6927 MARK TERRACE CIRCLE**

City **EDINA** State **MN** Zip Code **55439-1622**

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

Name of Employer **N/A** Occupation **N/A**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  

M M	/	D D	/	Y Y	-	Y Y	-	Y Y	-	Y Y
12		31		2013						

Transaction ID : **SA11.4282**

Amount of Each Receipt this Period  

2600.00
---------

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM PRIMARY

**B.** Full Name (Last, First, Middle Initial)  
**GREGORY GRAVES**

Mailing Address **4613 DREXEL AVE S**

City **EDINA** State **MN** Zip Code **55424-1133**

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

Name of Employer **ENTEGRIS** Occupation **CFO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  

M M	/	D D	/	Y Y	-	Y Y	-	Y Y	-	Y Y
11		26		2013						

Transaction ID : **SA11.3016**

Amount of Each Receipt this Period  

2000.00
---------

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JOSEPH GREEN**

Mailing Address **4631 BRUCE AVE**

City **EDINA** State **MN** Zip Code **55424-1124**

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

Name of Employer **TCF** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  

M M	/	D D	/	Y Y	-	Y Y	-	Y Y	-	Y Y
10		03		2013						

Transaction ID : **SA11.2297**

Amount of Each Receipt this Period  

500.00
--------

CONTRIBUTION

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

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

2500.00
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14020112317

**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)	PAGE 75 OF 231
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>ARNIE GREGORY</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 30 / 2013		
Mailing Address 5505 KNOLL DR			Transaction ID : SA11.4209		
City EDINA	State MN	Zip Code 55436-1022	Amount of Each Receipt this Period 10400.00 CONTRIBUTION		
FEC ID number of contributing federal political committee.			[C]		
Name of Employer GRECO, LLC		Occupation CEO			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 10400.00			

Full Name (Last, First, Middle Initial) <b>ARNIE GREGORY</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 30 / 2013		
Mailing Address 5505 KNOLL DR			Transaction ID : SA11.4209B		
City EDINA	State MN	Zip Code 55436-1022	Amount of Each Receipt this Period -2600.00 CONTRIBUTION		
FEC ID number of contributing federal political committee.			[C]		
Name of Employer GRECO, LLC		Occupation CEO			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 10400.00			
[MEMO ITEM] REATTRIBUTION REQUESTED REDESIGNATION GENERAL					

Full Name (Last, First, Middle Initial) <b>ARNIE GREGORY</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 30 / 2013		
Mailing Address 5505 KNOLL DR			Transaction ID : SA11.4596		
City EDINA	State MN	Zip Code 55436-1022	Amount of Each Receipt this Period 2600.00 CONTRIBUTION		
FEC ID number of contributing federal political committee.			[C]		
Name of Employer GRECO, LLC		Occupation CEO			
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 10400.00			
[MEMO ITEM] REATTRIBUTION REQUESTED REDESIGNATION FROM PRIMARY					

SUBTOTAL of Receipts This Page (optional).....			10400.00		
TOTAL This Period (last page this line number only).....			10400.00		

14020112318

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 76 OF 231
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 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)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**ARTHUR J. HACKNEY**

Mailing Address **1407 WEST 31ST AVENUE, SUITE 100**

City <b>ANCHORAGE</b>	State <b>AK</b>	Zip Code <b>99503-3678</b>
--------------------------	--------------------	-------------------------------

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

Name of Employer <b>HACKNEY &amp; HACKNEY INC</b>	Occupation <b>CONSULTANT</b>
--	---------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  

MM	DD	YYYY
12	22	2013

**Transaction ID : SA11.3551**

Amount of Each Receipt this Period  

25.00
-------

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**JAMES THOMAS HALVERSON**

Mailing Address **21 WOODLAND DR**

City <b>EDINA</b>	State <b>MN</b>	Zip Code <b>55424-1632</b>
----------------------	--------------------	-------------------------------

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

Name of Employer <b>PIPER JAFFRAY</b>	Occupation <b>INVESTMENT BANKER</b>
--	--

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  

MM	DD	YYYY
11	20	2013

**Transaction ID : SA11.2917**

Amount of Each Receipt this Period  

2000.00
---------

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**DANIEL HAMANN**

Mailing Address **2605 SO 95 CIRCLE**

City <b>OMAHA</b>	State <b>NE</b>	Zip Code <b>68124-</b>
----------------------	--------------------	---------------------------

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

Name of Employer <b>SPECTUM FINANCIAL SERVICES</b>	Occupation <b>EXECUTIVE</b>
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Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**5200.00**

Date of Receipt  

MM	DD	YYYY
12	06	2013

**Transaction ID : SA11.3440**

Amount of Each Receipt this Period  

5200.00
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**CONTRIBUTION**

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

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

<b>7225.00</b>
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14020112319



**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)	PAGE 77 OF 231						
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14

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)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**DANIEL HAMANN**

Mailing Address **2605 SO 95 CIRCLE**

City <b>OMAHA</b>	State <b>NE</b>	Zip Code <b>68124-</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>SPECTUM FINANCIAL SERVICES</b>	Occupation <b>EXECUTIVE</b>
---	--------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**5200.00**

Date of Receipt  

MM	DD	YYYY
12	06	2013

Transaction ID : **SA11.3440B**

Amount of Each Receipt this Period  

<b>-2600.00</b>
-----------------

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
**DANIEL HAMANN**

Mailing Address **2605 SO 95 CIRCLE**

City <b>OMAHA</b>	State <b>NE</b>	Zip Code <b>68124-</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>SPECTUM FINANCIAL SERVICES</b>	Occupation <b>EXECUTIVE</b>
---	--------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**5200.00**

Date of Receipt  

MM	DD	YYYY
12	06	2013

Transaction ID : **SA11.4580B**

Amount of Each Receipt this Period  

<b>2600.00</b>
----------------

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
**EDWARD H. HAMM**

Mailing Address **243 S BEACH RD**

City <b>HOBE SOUND</b>	State <b>FL</b>	Zip Code <b>33455-2512</b>
---------------------------	--------------------	-------------------------------

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

Name of Employer <b>INFORMATION REQUESTED PER BEST EFF</b>	Occupation <b>INFORMATION REQUESTED PER BEST EFF</b>
---	---

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  

MM	DD	YYYY
12	20	2013

Transaction ID : **SA11.4096**

Amount of Each Receipt this Period  

<b>1000.00</b>
----------------

CONTRIBUTION

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

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

<b>1000.00</b>
----------------

14020112320

**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)	PAGE 78 OF 231
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**MICHAEL HAPPE**

Mailing Address **8645 SHERWOOD BLUFF**

City <b>EDEN PRAIRIE</b>	State <b>MN</b>	Zip Code <b>55347-3433</b>
-----------------------------	--------------------	-------------------------------

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

Name of Employer <b>THE TORO COMPANY</b>	Occupation <b>VICE PRESIDENT</b>
---	-------------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 28 / 2013**

**Transaction ID : SA11.4195**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MRS. MARTIN R. HARRIS**

Mailing Address **41 GRANBURG CIRCLE**

City <b>SAN ANTONIO</b>	State <b>TX</b>	Zip Code <b>78218-3029</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>N/A</b>	Occupation <b>RETIRED</b>
--------------------------------	------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 17 / 2013**

**Transaction ID : SA11.2708**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. J. STEVEN HART**

Mailing Address **701 8TH ST. NW FL. 5**

City <b>WASHINGTON</b>	State <b>DC</b>	Zip Code <b>20001-</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>INFORMATION REQUESTED PER BEST EFF</b>	Occupation <b>INFORMATION REQUESTED PER BEST EFF</b>
---	---

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 10 / 2013**

**Transaction ID : SA11.3574**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

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

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

**1000.00**

14020112321

**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)	PAGE 79 OF 231
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**MR. KEVIN HART**

Mailing Address 53 PENINSULA RD

City State Zip Code  
ST PAUL MN 55110-

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

Name of Employer Occupation  
VAN CLEMENTS & COL INVESTMENT SERVICES

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
MM / DD / YYYY  
12 / 17 / 2013

Transaction ID : SA11.3980

Amount of Each Receipt this Period  
2600.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. KEVIN HART**

Mailing Address 53 PENINSULA RD

City State Zip Code  
ST PAUL MN 55110-

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

Name of Employer Occupation  
VAN CLEMENTS & COL INVESTMENT SERVICES

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
MM / DD / YYYY  
12 / 17 / 2013

Transaction ID : SA11.4066

Amount of Each Receipt this Period  
2600.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MRS. POLLY D. HART**

Mailing Address 53 PENINSULA RD

City State Zip Code  
ST PAUL MN 55110-

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

Name of Employer Occupation  
SELF EMPLOYED ARTIST

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
MM / DD / YYYY  
12 / 17 / 2013

Transaction ID : SA11.3981

Amount of Each Receipt this Period  
2600.00  
CONTRIBUTION

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

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

7800.00

14020112322

**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)	PAGE 80 OF 231
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. POLLY D. HART**

Mailing Address **53 PENINSULA RD**

City <b>ST PAUL</b>	State <b>MN</b>	Zip Code <b>55110-</b>
------------------------	--------------------	---------------------------

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

Name of Employer <b>SELF EMPLOYED</b>	Occupation <b>ARTIST</b>
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Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 17 / 2013**

**Transaction ID : SA11.3982**

Amount of Each Receipt this Period  
**2600.00**

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**LARRY HASSLER**

Mailing Address **8885 ALFA LANE**

City <b>INVER GROVE HEIGHTS</b>	State <b>MN</b>	Zip Code <b>55077-3710</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>NONE</b>	Occupation <b>RETIRED</b>
---------------------------------	------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 30 / 2013**

**Transaction ID : SA11.4208**

Amount of Each Receipt this Period  
**5200.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**LARRY HASSLER**

Mailing Address **8885 ALFA LANE**

City <b>INVER GROVE HEIGHTS</b>	State <b>MN</b>	Zip Code <b>55077-3710</b>
------------------------------------	--------------------	-------------------------------

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

Name of Employer <b>NONE</b>	Occupation <b>RETIRED</b>
---------------------------------	------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 30 / 2013**

**Transaction ID : SA11.4208B**

Amount of Each Receipt this Period  
**-2600.00**

CONTRIBUTION

**[MEMO ITEM]  
REDESIGNATION TO GENERAL**

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

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

**7800.00**

14020112323

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

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

FOR LINE NUMBER: PAGE 81 OF 231  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**LARRY HASSLER**

Mailing Address **8885 ALFA LANE**

City **INVER GROVE HEIGHTS** State **MN** Zip Code **55077-3710**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt **12 / 30 / 2013**

Transaction ID : **SA11.4592**

Amount of Each Receipt this Period  
**2600.00**

CONTRIBUTION

[MEMO ITEM]  
REDESIGNATION FROM PRIMARY

**B.** Full Name (Last, First, Middle Initial)  
**JIM HAYS**

Mailing Address **100 SOUTH POINT DR #2605**

City **MIAMI BEACH** State **FL** Zip Code **33139-7372**

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

Name of Employer **HAYS CORP.** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt **12 / 31 / 2013**

Transaction ID : **SA11.4287**

Amount of Each Receipt this Period  
**5000.00**

CONTRIBUTION

REATTRIBUTION REQUESTED

**C.** Full Name (Last, First, Middle Initial)  
**MARTHA HEAD**

Mailing Address **1616 22ND ST**

City **MINNEAPOLIS** State **MN** Zip Code **55405-2401**

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

Name of Employer **SELF EMPLOYED** Occupation **MANAGER/INVESTOR**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **10 / 12 / 2013**

Transaction ID : **SA11.2621**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

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

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

**5500.00**

14020112324

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

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

FOR LINE NUMBER: PAGE 82 OF 231  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**KENNETH B. HEITHOFF**

Mailing Address **4911 FISHER ISLAND DRIVE**

City **MIAMI BEACH** State **FL** Zip Code **33109-0183**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **7800.00**

Date of Receipt  
MM / DD / YYYY  
**12 / 31 / 2013**

**Transaction ID : SA11.4357**

Amount of Each Receipt this Period  
**2600.00**

**CONTRIBUTION**

**REATTRIBUTION REQUESTED**

**B.** Full Name (Last, First, Middle Initial)  
**MR. THOMAS J. HELGESON**

Mailing Address **2647 SOUTH SHORE BLVD**

City **WHITE BEAR LAKE** State **MN** Zip Code **55110-3951**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
MM / DD / YYYY  
**10 / 12 / 2013**

**Transaction ID : SA11.2625**

Amount of Each Receipt this Period  
**1000.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**MR. THOMAS J. HELGESON**

Mailing Address **2647 SOUTH SHORE BLVD**

City **WHITE BEAR LAKE** State **MN** Zip Code **55110-3951**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
MM / DD / YYYY  
**12 / 11 / 2013**

**Transaction ID : SA11.3863**

Amount of Each Receipt this Period  
**500.00**

**CONTRIBUTION**

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

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

**4100.00**

14020112325

**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)	PAGE 83 OF 231		
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>BRUCE HENDRY</b>			Date of Receipt MM / DD / YYYY 10 / 02 / 2013		
Mailing Address 46760 AGNES BAY ROAD			Transaction ID : SA11.2225		
City DRUMMOND	State WI	Zip Code 54832-4435	Amount of Each Receipt this Period 10400.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer NONE		Occupation RETIRED			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00			

Full Name (Last, First, Middle Initial) <b>BRUCE HENDRY</b>			Date of Receipt MM / DD / YYYY 10 / 02 / 2013		
Mailing Address 46760 AGNES BAY ROAD			Transaction ID : SA11.2225B		
City DRUMMOND	State WI	Zip Code 54832-4435	Amount of Each Receipt this Period -2600.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer NONE		Occupation RETIRED			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00	[MEMO ITEM] PRESUMPTIVELY REDESIGNATED REDESIGNATION TO GENERAL		

Full Name (Last, First, Middle Initial) <b>BRUCE HENDRY</b>			Date of Receipt MM / DD / YYYY 10 / 02 / 2013		
Mailing Address 46760 AGNES BAY ROAD			Transaction ID : SA11.2325		
City DRUMMOND	State WI	Zip Code 54832-4435	Amount of Each Receipt this Period 2600.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer NONE		Occupation RETIRED			
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00	[MEMO ITEM] PRESUMPTIVELY REDESIGNATED REDESIGNATION FROM PRIMARY		

SUBTOTAL of Receipts This Page (optional).....	10400.00
TOTAL This Period (last page this line number only).....	10400.00

14020112326

**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)	PAGE 84 OF 231
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 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)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**BRUCE HENDRY**

Mailing Address **46760 AGNES BAY ROAD**

City **DRUMMOND** State **WI** Zip Code **54832-4435**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 MM / DD / YYYY  
**10 / 02 / 2013**

Transaction ID : **SA11.2324**

Amount of Each Receipt this Period  
**7800.00**

CONTRIBUTION

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
**BRUCE HENDRY**

Mailing Address **46760 AGNES BAY ROAD**

City **DRUMMOND** State **WI** Zip Code **54832-4435**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 MM / DD / YYYY  
**12 / 06 / 2013**

Transaction ID : **SA11.2324B**

Amount of Each Receipt this Period  
**-5200.00**

CONTRIBUTION

[MEMO ITEM]  
 REATTRIBUTION REQUESTED REATTRIBUTION T SPOUSE

**C.** Full Name (Last, First, Middle Initial)  
**SHARON HENDRY**

Mailing Address **100 3RD AVE S**

City **MINNEAPOLIS** State **MN** Zip Code **55401-2525**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 MM / DD / YYYY  
**12 / 06 / 2013**

Transaction ID : **SA11.3343**

Amount of Each Receipt this Period  
**5200.00**

CONTRIBUTION

[MEMO ITEM]  
 PRESUMPTIVELY REATTRIBUTED REATTRIBUTK FROM SPOUSE

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

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

**0.00**

14020112327



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 85 OF 231	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>A. GARY HENDRICKSON</b>			Date of Receipt MM / DD / YYYY 09 / 28 / 2013	
Mailing Address 2102 CEDAR LAKE PKWY			Transaction ID : SA11.2316	
City MINNEAPOLIS	State MN	Zip Code 55416-3616	Amount of Each Receipt this Period CONTRIBUTION 7800.00	
FEC ID number of contributing federal political committee. C			[MEMO ITEM] VERIFIED REATTRIBUTION	
Name of Employer VALSPAR CORPORATION		Occupation CEO		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) <b>B. GARY HENDRICKSON</b>			Date of Receipt MM / DD / YYYY 11 / 05 / 2013	
Mailing Address 2102 CEDAR LAKE PKWY			Transaction ID : SA11.2798	
City MINNEAPOLIS	State MN	Zip Code 55416-3616	Amount of Each Receipt this Period CONTRIBUTION -5200.00	
FEC ID number of contributing federal political committee. C			[MEMO ITEM] VERIFIED REATTRIBUTION REATTRIBUTION TO SPOUSE	
Name of Employer VALSPAR CORPORATION		Occupation CEO		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) <b>C. SHARON HENDRY</b>			Date of Receipt MM / DD / YYYY 12 / 06 / 2013	
Mailing Address 100 3RD AVE S			Transaction ID : SA11.3343B	
City MINNEAPOLIS	State MN	Zip Code 55401-2525	Amount of Each Receipt this Period CONTRIBUTION -2600.00	
FEC ID number of contributing federal political committee. C			[MEMO ITEM] PRESUMPTIVELY REATTRIBUTED REDESIGNATI TO GENERAL	
Name of Employer NONE		Occupation RETIRED		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00		

SUBTOTAL of Receipts This Page (optional).....			0.00	
TOTAL This Period (last page this line number only).....				

14020112328

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 86 OF 231
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 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)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**SHARON HENDRY**

Mailing Address 100 3RD AVE S

City MINNEAPOLIS	State MN	Zip Code 55401-2525
---------------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
MM / DD / YYYY  
12 / 06 / 2013

Transaction ID : SA11.3346

Amount of Each Receipt this Period  
2600.00

CONTRIBUTION

**[MEMO ITEM]**  
PRESUMPTIVELY REDESIGNATED  
REDESIGNATION FROM PRIMARY

**B.** Full Name (Last, First, Middle Initial)  
**VANESSA HENDRICKSON**

Mailing Address 2102 CEDAR LAKE PKWY

City MINNEAPOLIS	State MN	Zip Code 55416-3616
---------------------	-------------	------------------------

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

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
MM / DD / YYYY  
09 / 28 / 2013

Transaction ID : SA11.2797

Amount of Each Receipt this Period  
5200.00

CONTRIBUTION

**[MEMO ITEM]**  
VERIFIED REATTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**VANESSA HENDRICKSON**

Mailing Address 2102 CEDAR LAKE PKWY

City MINNEAPOLIS	State MN	Zip Code 55416-3616
---------------------	-------------	------------------------

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

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
MM / DD / YYYY  
11 / 05 / 2013

Transaction ID : SA11.2797B

Amount of Each Receipt this Period  
-2600.00

CONTRIBUTION

**[MEMO ITEM]**  
VERIFIED REATTRIBUTION REDESIGNATION TO  
GENERAL

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

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

0.00

14020112329

**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)	PAGE 87 OF 231
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 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)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**VANESSA HENDRICKSON**

Mailing Address **2102 CEDAR LAKE PKWY**

City **MINNEAPOLIS** State **MN** Zip Code **55416-3616**

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

Name of Employer **NONE** Occupation **HOMEMAKER**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 05 / 2013**

Transaction ID : **SA11.2800**

Amount of Each Receipt this Period  
**2600.00**

CONTRIBUTION

**[MEMO ITEM]**  
 VERIFIED REATTRIBUTION REDESIGNATION FRC  
 PRIMARY

**B.** Full Name (Last, First, Middle Initial)  
**CHARLES HENGEL**

Mailing Address **3005 MAPLEWOOD RD**

City **WAYZATA** State **MN** Zip Code **55391-2642**

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

Name of Employer **MARKETING ART** Occupation **ADVERTISING**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 31 / 2013**

Transaction ID : **SA11.4341**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**LARRY HENNINGER**

Mailing Address **1453 TIROL DRIVE**

City **INCLINE VILLAGE** State **NV** Zip Code **89451-7903**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 28 / 2013**

Transaction ID : **SA11.4194**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

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

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

**1500.00**

14020112330

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 88 OF 231	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ANDREW HOCHBERG**

Mailing Address **77 S DEERE PARK**

City **HIGHLAND PARK** State **IL** Zip Code **60035-**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**12 / 13 / 2013**

**Transaction ID : SA11.3919**

Amount of Each Receipt this Period  
**500.00**

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MICHAEL HOFFMAN**

Mailing Address **8111 LYNDALE AVENUE SOUTH**

City **BLOOMINGTON** State **MN** Zip Code **55420-1136**

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

Name of Employer **THE TORO COMPANY** Occupation **CHAIRMAN AND CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
**10 / 22 / 2013**

**Transaction ID : SA11.2674**

Amount of Each Receipt this Period  
**2500.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**KEVIN J. HOLLEY**

Mailing Address **33 COLLEGE HILL RD.**

City **WARWICK** State **RI** Zip Code **02886-2776**

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

Name of Employer **GUNNING LAFAZIA** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**11 / 20 / 2013**

**Transaction ID : SA11.2918**

Amount of Each Receipt this Period  
**500.00**

**CONTRIBUTION**

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

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

**3500.00**

14020112331

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

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

FOR LINE NUMBER: PAGE 89 OF 231  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**MICHAEL HONSA**

Mailing Address **2061 THERESA ST**

City **MENDOTA HEIGHTS** State **MN** Zip Code **55120-1307**

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

Name of Employer **TRANSWESTERN** Occupation **BROKER**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **125.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**09 / 27 / 2013**

Transaction ID : **SA11.1964**

Amount of Each Receipt this Period  
**125.00**

CONTRIBUTION

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**MICHAEL HONSA**

Mailing Address **2061 THERESA ST**

City **MENDOTA HEIGHTS** State **MN** Zip Code **55120-1307**

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

Name of Employer **TRANSWESTERN** Occupation **BROKER**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **125.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**11 / 18 / 2013**

Transaction ID : **SA11.2889**

Amount of Each Receipt this Period  
**-125.00**

CONTRIBUTION

**[MEMO ITEM]**  
 PRESUMPTIVELY REATTRIBUTED REATTRIBUTIC  
 TO SPOUSE

**C.** Full Name (Last, First, Middle Initial)  
**SARA CULLEN HONSA**

Mailing Address **2061 THERESA ST.**

City **MENDOTA HEIGHTS** State **MN** Zip Code **55120-1307**

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

Name of Employer **ALLINA HEALTH** Occupation **NURSE**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **125.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**11 / 18 / 2013**

Transaction ID : **SA11.2888**

Amount of Each Receipt this Period  
**125.00**

CONTRIBUTION

**[MEMO ITEM]**  
 PRESUMPTIVELY REATTRIBUTED REATTRIBUTIC  
 FROM SPOUSE

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

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

**0.00**

14020112332

**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)	PAGE 90 OF 231
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>EDWARD J. HUDSON</b>		Date of Receipt MM / DD / YYYY 12 / 31 / 2013
Mailing Address 8304 RIVER FALLS DR		Transaction ID : SA11.4314
City POTOMAC	State MD	
Zip Code 20854-3895	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period CONTRIBUTION 1000.00
Name of Employer CAPITAL ONE	Occupation FINANCE	CONTRIBUTION 2500.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) <b>ALLISON IVERSON</b>		Date of Receipt MM / DD / YYYY 12 / 17 / 2013
Mailing Address 837 BALD LAKE COURT		Transaction ID : SA11.3528
City EAGAN	State MN	
Zip Code 55123-2480	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period CONTRIBUTION 2500.00
Name of Employer NONE	Occupation HOMEMAKER	CONTRIBUTION 2500.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) <b>DARREN JACKSON</b>		Date of Receipt MM / DD / YYYY 12 / 30 / 2013
Mailing Address 290 WOODLAWN AVENUE		Transaction ID : SA11.4207
City SAINT PAUL	State MN	
Zip Code 55105-1237	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period CONTRIBUTION 10400.00
Name of Employer AAP	Occupation EXECUTIVE	CONTRIBUTION 10400.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	13900.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020112333

**SCHEDULE A (FEC Form 3)**

**ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 91 OF 231

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial)

**DARREN JACKSON**

Mailing Address **290 WOODLAWN AVENUE**

City State Zip Code  
**SAINT PAUL MN 55105-1237**

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

Name of Employer Occupation  
**AAP EXECUTIVE**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **10400.00**

Date of Receipt

M M M	D D D	Y Y Y Y Y Y Y Y
12	30	2013

Transaction ID : **SA11.4207B**

Amount of Each Receipt this Period

<b>-2600.00</b>
-----------------

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION TO GENERAL

Full Name (Last, First, Middle Initial)

**DARREN JACKSON**

Mailing Address **290 WOODLAWN AVENUE**

City State Zip Code  
**SAINT PAUL MN 55105-1237**

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

Name of Employer Occupation  
**AAP EXECUTIVE**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **10400.00**

Date of Receipt

M M M	D D D	Y Y Y Y Y Y Y Y
12	30	2013

Transaction ID : **SA11.4582**

Amount of Each Receipt this Period

<b>2600.00</b>
----------------

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM PRIMARY

Full Name (Last, First, Middle Initial)

**ROLF PETER JACOBSON**

Mailing Address **14864 RICHARDS DR WEST**

City State Zip Code  
**MINNETONKA MN 55345-2064**

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

Name of Employer Occupation  
**DAILY PRINTING INC. PRESIDENT/CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)  
Election Cycle-to-Date **300.00**

Date of Receipt

M M M	D D D	Y Y Y Y Y Y Y Y
12	12	2013

Transaction ID : **SA11.3494**

Amount of Each Receipt this Period

<b>300.00</b>
---------------

CONTRIBUTION

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

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

<b>300.00</b>
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14020112334

**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)	PAGE 92 OF 231
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**DOUGLAS JAEGER**

Mailing Address **450 RICE STREET**

City <b>ANOKA</b>	State <b>MN</b>	Zip Code <b>55303-2128</b>
----------------------	--------------------	-------------------------------

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

Name of Employer <b>ADOLFSON &amp; PETERSON INC.</b>	Occupation <b>CEO</b>
---	--------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 31 / 2013**

**Transaction ID : SA11.4285**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**WILLIAM JARRETT**

Mailing Address **4500 BROWDALE AVENUE**

City <b>EDINA</b>	State <b>MN</b>	Zip Code <b>55424-1141</b>
----------------------	--------------------	-------------------------------

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

Name of Employer <b>TRIANGLE CAPITAL LLC</b>	Occupation <b>INVESTMENT BANKING</b>
---	---

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 21 / 2013**

**Transaction ID : SA11.2934**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ALEX JARVIS**

Mailing Address **1306 CLAYBORNE HOUSE CT**

City <b>MCLEAN</b>	State <b>VA</b>	Zip Code <b>22101-2402</b>
-----------------------	--------------------	-------------------------------

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

Name of Employer <b>FIERCE ISAKOWTIZ</b>	Occupation <b>PARTNER</b>
---	------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 24 / 2013**

**Transaction ID : SA11.2936**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

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

**2000.00**

14020112335



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

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

FOR LINE NUMBER: PAGE 93 OF 231  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**GORDON A. JENSEN**

Mailing Address **9260 W. NORMA TRAIL**

City **SIoux FALLS** State **SD** Zip Code **57106-4814**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 23 / 2013**

Transaction ID : **SA11.2763**

Amount of Each Receipt this Period  
**300.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DEWEY JOHNSON**

Mailing Address **4504 LAKEVIEW DR.**

City **EDINA** State **MN** Zip Code **55424-1516**

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

Name of Employer **SDC EQUITY PARTNERS** Occupation **SHOPPING CENTER DEVELOPER**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 04 / 2013**

Transaction ID : **SA11.3110**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NEEL CAMERON JOHNSON**

Mailing Address **349 SALEM CHURCH RD**

City **SUNFISH LAKE** State **MN** Zip Code **55118-4720**

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

Name of Employer **WELLS FARGO** Occupation **BANKER**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **1250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 22 / 2013**

Transaction ID : **SA11.3543**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

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

**800.00**

14020112336

**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)	PAGE 94 OF 231
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>A. STEVEN M. JOHNSON</b>			Date of Receipt MM / DD / YYYY 11 / 19 / 2013		
Mailing Address 18365 W SIOUX VISTA DR			<b>Transaction ID : SA11.2892</b>		
City JORDAN	State MN	Zip Code 55352-9206	Amount of Each Receipt this Period 250.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period 425.00 CONTRIBUTION		
Name of Employer N/A		Occupation N/A	Election Cycle-to-Date 425.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

Full Name (Last, First, Middle Initial) <b>B. STEVEN M. JOHNSON</b>			Date of Receipt MM / DD / YYYY 12 / 04 / 2013		
Mailing Address 18365 W SIOUX VISTA DR			<b>Transaction ID : SA11.3273</b>		
City JORDAN	State MN	Zip Code 55352-9206	Amount of Each Receipt this Period 50.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period 425.00		
Name of Employer N/A		Occupation N/A	Election Cycle-to-Date 425.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

Full Name (Last, First, Middle Initial) <b>C. PAUL TUDOR JONES II</b>			Date of Receipt MM / DD / YYYY 11 / 13 / 2013		
Mailing Address 92 HARBOR DR			<b>Transaction ID : SA11.2840</b>		
City GREENWICH	State CT	Zip Code 06830-7018	Amount of Each Receipt this Period 5200.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period 5200.00		
Name of Employer TUDOR INVESTMENT CORP.		Occupation MONEY MANAGER	Election Cycle-to-Date 5200.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5500.00
<b>TOTAL</b> This Period (last page this line number only).....	5500.00

14020112337

**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)		PAGE 95 OF 231	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
				<input type="checkbox"/> 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)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>PAUL TUDOR JONES II</b>			Date of Receipt MM / DD / YYYY 11 / 19 / 2013	
Mailing Address 92 HARBOR DR			Transaction ID : SA11.2840B	
City GREENWICH	State CT	Zip Code 06830-7018	Amount of Each Receipt this Period -2600.00 CONTRIBUTION	
FEC ID number of contributing federal political committee. C			[MEMO ITEM] PRESUMPTIVELY REDESIGNATED REDESIGNATION TO GENERAL	
Name of Employer TUDOR INVESTMENT CORP.		Occupation MONEY MANAGER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) <b>PAUL TUDOR JONES II</b>			Date of Receipt MM / DD / YYYY 11 / 19 / 2013	
Mailing Address 92 HARBOR DR			Transaction ID : SA11.2904	
City GREENWICH	State CT	Zip Code 06830-7018	Amount of Each Receipt this Period 2600.00 CONTRIBUTION	
FEC ID number of contributing federal political committee. C			[MEMO ITEM] PRESUMPTIVELY REDESIGNATED REDESIGNATION FROM PRIMARY	
Name of Employer TUDOR INVESTMENT CORP.		Occupation MONEY MANAGER		
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) <b>SONIA M. JONES</b>			Date of Receipt MM / DD / YYYY 11 / 13 / 2013	
Mailing Address 92 HARBOR DR			Transaction ID : SA11.2839	
City GREENWICH	State CT	Zip Code 06830-7018	Amount of Each Receipt this Period 5200.00 CONTRIBUTION	
FEC ID number of contributing federal political committee. C				
Name of Employer SELF EMPLOYED		Occupation HOMEMAKER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 5200.00		

SUBTOTAL of Receipts This Page (optional).....			5200.00	
TOTAL This Period (last page this line number only).....				

14020112338

**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)	PAGE 96 OF 231
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12 <input type="checkbox"/> 11b <input type="checkbox"/> 13a <input type="checkbox"/> 11c <input type="checkbox"/> 13b <input type="checkbox"/> 11d <input type="checkbox"/> 14 <input type="checkbox"/> 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)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**SONIA M. JONES**

Mailing Address **92 HARBOR DR**

City **GREENWICH** State **CT** Zip Code **06830-7018**

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

Name of Employer **SELF EMPLOYED** Occupation **HOMEMAKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**11 / 19 / 2013**

Transaction ID : **SA11.2839B**

Amount of Each Receipt this Period  
**-2600.00**

CONTRIBUTION

**[MEMO ITEM]**  
 PRESUMPTIVELY REDESIGNATED  
 REDESIGNATION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
**SONIA M. JONES**

Mailing Address **92 HARBOR DR**

City **GREENWICH** State **CT** Zip Code **06830-7018**

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

Name of Employer **SELF EMPLOYED** Occupation **HOMEMAKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**11 / 19 / 2013**

Transaction ID : **SA11.2902**

Amount of Each Receipt this Period  
**2600.00**

CONTRIBUTION

**[MEMO ITEM]**  
 PRESUMPTIVELY REDESIGNATED  
 REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
**MR. RONALD F. JOST**

Mailing Address **652 136TH LN NE**

City **HAM LAKE** State **MN** Zip Code **55304-**

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

Name of Employer **NORTH CENTRAL** Occupation **PE FIRM**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**12 / 17 / 2013**

Transaction ID : **SA11.3977**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

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

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

**500.00**

**500.00**

14020112339

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 97 OF 231	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**THOMAS G. KAMP**

Mailing Address **5821 SOUTHWOOD DRIVE**

City **BLOOMINGTON** State **MN** Zip Code **55437-1739**

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

Name of Employer **CORNERSTONE CAPITAL MANAGEMENT, LL** Occupation **INVESTMENT MANAGEMENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
**10 / 24 / 2013**

Transaction ID : **SA11.2764**

Amount of Each Receipt this Period  
**4000.00**

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**THOMAS G. KAMP**

Mailing Address **5821 SOUTHWOOD DRIVE**

City **BLOOMINGTON** State **MN** Zip Code **55437-1739**

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

Name of Employer **CORNERSTONE CAPITAL MANAGEMENT, LL** Occupation **INVESTMENT MANAGEMENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
**11 / 14 / 2013**

Transaction ID : **SA11.2764B**

Amount of Each Receipt this Period  
**-1400.00**

CONTRIBUTION

**[MEMO ITEM]**  
**PRESUMPTIVELY REDESIGNATED  
 REDESIGNATION TO GENERAL**

**C.** Full Name (Last, First, Middle Initial)  
**THOMAS G. KAMP**

Mailing Address **5821 SOUTHWOOD DRIVE**

City **BLOOMINGTON** State **MN** Zip Code **55437-1739**

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

Name of Employer **CORNERSTONE CAPITAL MANAGEMENT, LL** Occupation **INVESTMENT MANAGEMENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
**11 / 14 / 2013**

Transaction ID : **SA11.2860**

Amount of Each Receipt this Period  
**1400.00**

CONTRIBUTION

**[MEMO ITEM]**  
**PRESUMPTIVELY REDESIGNATED  
 REDESIGNATION FROM PRIMARY**

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

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

**4000.00**

14020112340

**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)	PAGE 98 OF 231
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**THOMAS G. KAMP**

Mailing Address **5821 SOUTHWOOD DRIVE**

City <b>BLOOMINGTON</b>	State <b>MN</b>	Zip Code <b>55437-1739</b>
----------------------------	--------------------	-------------------------------

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

Name of Employer <b>CORNERSTONE CAPITAL MANAGEMENT, LL</b>	Occupation <b>INVESTMENT MANAGEMENT</b>
---	--

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**10 / 24 / 2013**

Transaction ID : **SA11.2859**

Amount of Each Receipt this Period  
**4000.00**

CONTRIBUTION

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
**CHERI L. KAMP**

Mailing Address **5821 SOUTHWOOD DRIVE**

City <b>BLOOMINGTON</b>	State <b>MN</b>	Zip Code <b>55437-1739</b>
----------------------------	--------------------	-------------------------------

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

Name of Employer <b>NONE</b>	Occupation <b>HOMEMAKER</b>
---------------------------------	--------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 02 / 2013**

Transaction ID : **SA11.3027**

Amount of Each Receipt this Period  
**2000.00**

CONTRIBUTION

**[MEMO ITEM]**  
 PRESUMPTIVELY REATTRIBUTED REATTRIBUTIC  
 FROM SPOUSE

**C.** Full Name (Last, First, Middle Initial)  
**THOMAS G. KAMP**

Mailing Address **5821 SOUTHWOOD DRIVE**

City <b>BLOOMINGTON</b>	State <b>MN</b>	Zip Code <b>55437-1739</b>
----------------------------	--------------------	-------------------------------

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

Name of Employer <b>CORNERSTONE CAPITAL MANAGEMENT, LL</b>	Occupation <b>INVESTMENT MANAGEMENT</b>
---	--

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 02 / 2013**

Transaction ID : **SA11.2859B**

Amount of Each Receipt this Period  
**-2000.00**

CONTRIBUTION

**[MEMO ITEM]**  
 PRESUMPTIVELY REDESIGNATED REATTRIBUTI  
 TO SPOUSE

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

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

**0.00**

14020112341

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 99 OF 231
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**THOMAS G. KAMP**

Mailing Address **5821 SOUTHWOOD DRIVE**

City **BLOOMINGTON** State **MN** Zip Code **55437-1739**

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

Name of Employer **CORNERSTONE CAPITAL MANAGEMENT, LL** Occupation **INVESTMENT MANAGEMENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 02 / 2013

Transaction ID : **SA11.2860B**

Amount of Each Receipt this Period  
 0.00

CONTRIBUTION

**[MEMO ITEM]**  
 PRESUMPTIVELY REDESIGNATED  
 REDESIGNATION TO PRIMARY

**B.** Full Name (Last, First, Middle Initial)  
**THOMAS G. KAMP**

Mailing Address **5821 SOUTHWOOD DRIVE**

City **BLOOMINGTON** State **MN** Zip Code **55437-1739**

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

Name of Employer **CORNERSTONE CAPITAL MANAGEMENT, LL** Occupation **INVESTMENT MANAGEMENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 12 / 02 / 2013

Transaction ID : **SA11.3026**

Amount of Each Receipt this Period  
 0.00

CONTRIBUTION

**[MEMO ITEM]**  
 PRESUMPTIVELY REDESIGNATED  
 REDESIGNATION FROM GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**KRISTI KAMPMeyer**

Mailing Address **260 SALEM CHURCH RD**

City **SUNFISH LAKE** State **MN** Zip Code **55118-4740**

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

Name of Employer **SUNDIAL SOLAR** Occupation **SOLAR SALES**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 27 / 2013

Transaction ID : **SA11.1958**

Amount of Each Receipt this Period  
 2500.00

CONTRIBUTION

**[MEMO ITEM]**

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

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

0.00

14020112342

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

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

FOR LINE NUMBER: PAGE 100 OF 231  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	<input type="checkbox"/>	15
	12		13a		13b		14		

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**KRISTI KAMPMEYER**

Mailing Address **260 SALEM CHURCH RD**

City **SUNFISH LAKE** State **MN** Zip Code **55118-4740**

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

Name of Employer **SUNDIAL SOLAR** Occupation **SOLAR SALES**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt  
**11 / 18 / 2013**

Transaction ID : **SA11.2891**

Amount of Each Receipt this Period  
**0.00**

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION TO SPOUSE

**B.** Full Name (Last, First, Middle Initial)  
**MICHAEL KAMPMEYER**

Mailing Address **260 SALEM CHURCH ROAD**

City **SUNFISH LAKE** State **MN** Zip Code **55118-4740**

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

Name of Employer **DIRECTOR/OWNER** Occupation **ROUNDBARK**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **0.00**

Date of Receipt  
**11 / 18 / 2013**

Transaction ID : **SA11.2890**

Amount of Each Receipt this Period  
**0.00**

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION REQUESTED REATTRIBUTION FROM SPOUSE

**C.** Full Name (Last, First, Middle Initial)  
**KRISTI KAMPMEYER**

Mailing Address **260 SALEM CHURCH RD**

City **SUNFISH LAKE** State **MN** Zip Code **55118-4740**

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

Name of Employer **SUNDIAL SOLAR** Occupation **SOLAR SALES**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt  
**12 / 31 / 2013**

Transaction ID : **SA11.4271**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

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

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

**500.00**

14020112343



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

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

FOR LINE NUMBER: PAGE 101 OF 231

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**KRISTI KAMPMEYER**

Mailing Address **260 SALEM CHURCH RD**

City <b>SUNFISH LAKE</b>	State <b>MN</b>	Zip Code <b>55118-4740</b>
-----------------------------	--------------------	-------------------------------

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

Name of Employer <b>SUNDIAL SOLAR</b>	Occupation <b>SOLAR SALES</b>
--	----------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**3000.00**

Date of Receipt  

MM	DD	YYYY
12	31	2013

**Transaction ID : SA11.4271B**

Amount of Each Receipt this Period  

-400.00
---------

**CONTRIBUTION**

**[MEMO ITEM]  
REDESIGNATION TO GENERAL**

**B.** Full Name (Last, First, Middle Initial)  
**KRISTI KAMPMEYER**

Mailing Address **260 SALEM CHURCH RD**

City <b>SUNFISH LAKE</b>	State <b>MN</b>	Zip Code <b>55118-4740</b>
-----------------------------	--------------------	-------------------------------

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

Name of Employer <b>SUNDIAL SOLAR</b>	Occupation <b>SOLAR SALES</b>
--	----------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**3000.00**

Date of Receipt  

MM	DD	YYYY
12	31	2013

**Transaction ID : SA11.4453**

Amount of Each Receipt this Period  

400.00
--------

**CONTRIBUTION**

**[MEMO ITEM]  
REDESIGNATION FROM PRIMARY**

**C.** Full Name (Last, First, Middle Initial)  
**FREDERIC KANE JR.**

Mailing Address **5204 FARADAY CT.**

City <b>FAIRFAX</b>	State <b>VA</b>	Zip Code <b>22032-2708</b>
------------------------	--------------------	-------------------------------

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

Name of Employer <b>NONE</b>	Occupation <b>RETIRED</b>
---------------------------------	------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  

MM	DD	YYYY
12	16	2013

**Transaction ID : SA11.3515**

Amount of Each Receipt this Period  

1000.00
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**CONTRIBUTION**

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

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

1000.00
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14020112344

**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)	PAGE 102 OF 231
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>WILLIAM JAMES KATT</b>		Date of Receipt MM / DD / YYYY 12 / 06 / 2013
Mailing Address 740 N PLANKINTON AVE STE 600		Transaction ID : SA11.3445
City MILWAUKEE	State WI	Zip Code 53203-2421
FEC ID number of contributing federal political committee.	C	
Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF	Amount of Each Receipt this Period 250.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	CONTRIBUTION

Full Name (Last, First, Middle Initial) <b>MR. LEE KEARNEY</b>		Date of Receipt MM / DD / YYYY 12 / 13 / 2013
Mailing Address 7611 SE EVERGREEN HWY.		Transaction ID : SA11.3934
City VANCOUVER	State WA	Zip Code 98664-
FEC ID number of contributing federal political committee.	C	
Name of Employer NONE	Occupation RETIRED	Amount of Each Receipt this Period 500.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	CONTRIBUTION

Full Name (Last, First, Middle Initial) <b>MR. ALEXANDER M. KEITH</b>		Date of Receipt MM / DD / YYYY 12 / 17 / 2013
Mailing Address 5225 MEADOW CROSSING RD SW		Transaction ID : SA11.4040
City ROCHESTER	State MN	Zip Code 55902-
FEC ID number of contributing federal political committee.	C	
Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF	Amount of Each Receipt this Period 500.00
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	CONTRIBUTION

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020112345

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

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

FOR LINE NUMBER: PAGE 103 OF 231  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**SANDRA KENNEDY**

Mailing Address 17190 SILVER CHARM

City LEESBURG State VA Zip Code 20176-7156

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

Name of Employer RETAIL INDUSTRY LEADERS ASSOCIATION Occupation TRADE ASSOCIATION PRESIDENT

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt  
MM / DD / YYYY  
11 / 13 / 2013

Transaction ID : SA11.2810

Amount of Each Receipt this Period  
CONTRIBUTION 250.00

**B.** Full Name (Last, First, Middle Initial)  
**PATRICIA KIELMEYER**

Mailing Address 1413 119TH ST NW

City MONTICELLO State MN Zip Code 55362-3014

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

Name of Employer MORTGAGE REFERENCES INC. Occupation OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt  
MM / DD / YYYY  
10 / 09 / 2013

Transaction ID : SA11.2474

Amount of Each Receipt this Period  
CONTRIBUTION 500.00

**C.** Full Name (Last, First, Middle Initial)  
**RB KIERNAT**

Mailing Address 2512 UPTON AVENUE SOUTH

City MINNEAPOLIS State MN Zip Code 55405-2346

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

Name of Employer QUETICO PARTNERS Occupation INVESTMENT BANKING

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 750.00

Date of Receipt  
MM / DD / YYYY  
12 / 28 / 2013

Transaction ID : SA11.4193

Amount of Each Receipt this Period  
CONTRIBUTION 250.00

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

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

1000.00

14020112346

**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)	PAGE 104 OF 231
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 15	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**MR. DANIEL J. KIPP**

Mailing Address **800 HUMBOLDT AVE.**

City **WINNETKA** State **IL** Zip Code **60093-**

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

Name of Employer **WINONA CAPITAL** Occupation **MANAGING DIRECTOR**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 10 / 2013**

**Transaction ID : SA11.3578**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. DAN L. KIRBY**

Mailing Address **2 S RIVERVIEW HTS**

City **SIOUX FALLS** State **SD** Zip Code **57105-0254**

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

Name of Employer **KIRBY FNANCIAL LLC** Occupation **INVESTOR**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 04 / 2013**

**Transaction ID : SA11.3274**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. DAN L. KIRBY**

Mailing Address **2 S RIVERVIEW HTS**

City **SIOUX FALLS** State **SD** Zip Code **57105-0254**

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

Name of Employer **KIRBY FNANCIAL LLC** Occupation **INVESTOR**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 11 / 2013**

**Transaction ID : SA11.3482**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

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

**2250.00**

14020112347

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

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

FOR LINE NUMBER: PAGE 105 OF 231  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**STEVEN R. KNUTH**

Mailing Address **887 HIGHLANDER TRAIL**

City **HUDSON** State **WI** Zip Code **54016-7970**

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

Name of Employer **PUBLIC AFFAIRS COMPANY** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt **12 / 06 / 2013**  
Transaction ID : **SA11.3444**

Amount of Each Receipt this Period  
**2000.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. STEVE KUHN**

Mailing Address **311 FIFTH ST UNIT 1205**

City **AUSTIN** State **TX** Zip Code **78701-**

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

Name of Employer **PINE RIVER CAPITAL** Occupation **MANAGING DIRECTOR**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt **12 / 17 / 2013**  
Transaction ID : **SA11.4037**

Amount of Each Receipt this Period  
**2600.00**  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. STEVE KUHN**

Mailing Address **311 FIFTH ST UNIT 1205**

City **AUSTIN** State **TX** Zip Code **78701-**

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

Name of Employer **PINE RIVER CAPITAL** Occupation **MANAGING DIRECTOR**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt **12 / 17 / 2013**  
Transaction ID : **SA11.4038**

Amount of Each Receipt this Period  
**2600.00**  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... **7200.00**

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

14020112348

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 106 OF 231
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**CHRISTOPHER KURTZMAN**

Mailing Address **21672 TALL TIMBERS RD**

City <b>NISSWA</b>	State <b>MN</b>	Zip Code <b>56468-2365</b>
-----------------------	--------------------	-------------------------------

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

Name of Employer <b>BANG PRINTING</b>	Occupation <b>PRINTING</b>
--	-------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  

MM	DD	YYYY
10	30	2013

Transaction ID : **SA11.2722**

Amount of Each Receipt this Period  

1000.00
---------

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. GREGORY LARSEN**

Mailing Address **7808 CREEKRIDGE CR**

City <b>EDINA</b>	State <b>MN</b>	Zip Code <b>55439-2611</b>
----------------------	--------------------	-------------------------------

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

Name of Employer <b>CREEKRIDGE CAPITAL</b>	Occupation <b>CEO</b>
---	--------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**839.00**

Date of Receipt  

MM	DD	YYYY
11	02	2013

Transaction ID : **SA11.4352**

Amount of Each Receipt this Period  

839.00
--------

CONTRIBUTION

IN-KIND: EVENT CATERING

**C.** Full Name (Last, First, Middle Initial)  
**JEFFREY T. LARSON**

Mailing Address **7300 HUDSON BLVD**

City <b>SAINT PAUL</b>	State <b>MN</b>	Zip Code <b>55128-7141</b>
---------------------------	--------------------	-------------------------------

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

Name of Employer <b>INFORMATION REQUESTED PER BEST EFFC</b>	Occupation <b>INFORMATION REQUESTED PER BEST EFF</b>
--	---

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**2000.00**

Date of Receipt  

MM	DD	YYYY
12	30	2013

Transaction ID : **SA11.4229**

Amount of Each Receipt this Period  

2000.00
---------

CONTRIBUTION

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

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

3839.00
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14020112349

**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)	PAGE 107 OF 231
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>RONALD S. LEAFBLAD</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 23 / 2013		
Mailing Address 4800 ROLLING GREEN PKWY			<b>Transaction ID : SA11.4112</b>		
City EDINA	State MN	Zip Code 55436-1348	Amount of Each Receipt this Period CONTRIBUTION 1000.00		
FEC ID number of contributing federal political committee. C			Name of Employer INFORMATION REQUESTED PER BEST EFF		
Name of Employer INFORMATION REQUESTED PER BEST EFF			Occupation INFORMATION REQUESTED PER BEST EFF		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 1000.00			

Full Name (Last, First, Middle Initial) <b>PAUL LEAND</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 05 / 2013		
Mailing Address 152 STUYVESANT AVE			<b>Transaction ID : SA11.2778</b>		
City RYE	State NY	Zip Code 10580-3113	Amount of Each Receipt this Period CONTRIBUTION 10400.00		
FEC ID number of contributing federal political committee. C			Name of Employer AMA CAPITAL PARTNERS		
Name of Employer AMA CAPITAL PARTNERS			Occupation BANKER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 10400.00			

Full Name (Last, First, Middle Initial) <b>PAUL LEAND</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 05 / 2013		
Mailing Address 152 STUYVESANT AVE			<b>Transaction ID : SA11.2778B</b>		
City RYE	State NY	Zip Code 10580-3113	Amount of Each Receipt this Period CONTRIBUTION -2600.00		
FEC ID number of contributing federal political committee. C			Name of Employer AMA CAPITAL PARTNERS		
Name of Employer AMA CAPITAL PARTNERS			Occupation BANKER		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 10400.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....			11400.00		
<b>TOTAL</b> This Period (last page this line number only).....					

14020112350

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

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

FOR LINE NUMBER: PAGE 108 OF 231  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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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)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**PAUL LEAND**

Mailing Address **152 STUYVESANT AVE**

City **RYE** State **NY** Zip Code **10580-3113**

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

Name of Employer **AMA CAPITAL PARTNERS** Occupation **BANKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **10400.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**11 / 05 / 2013**

Transaction ID : **SA11.4584**

Amount of Each Receipt this Period  
**2600.00**

**CONTRIBUTION**

**[MEMO ITEM]**  
**REATTRIBUTION REQUESTED REDESIGNATION FROM PRIMARY**

**B.** Full Name (Last, First, Middle Initial)  
**RICHARD LEE**

Mailing Address **6826 LILLIAN LN**

City **EDEN PRAIRIE** State **MN** Zip Code **55346-3550**

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

Name of Employer **CUSTOM EXPRESSIONS** Occupation **COMMERCIAL CONSTRUCTION - SUBCONT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**11 / 05 / 2013**

Transaction ID : **SA11.2780**

Amount of Each Receipt this Period  
**1000.00**

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**THOMAS J. LEE**

Mailing Address **163 STONEBRIDGE RD**

City **ST PAUL** State **MN** Zip Code **55118-4481**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**11 / 20 / 2013**

Transaction ID : **SA11.2913**

Amount of Each Receipt this Period  
**500.00**

**CONTRIBUTION**

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

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

**1500.00**

14020112351



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

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

FOR LINE NUMBER: PAGE 109 OF 231  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. JEAN LEJEUNE**

Mailing Address **2820 COUNTY RD 24**

City **LONG LAKE** State **MN** Zip Code **55356-**

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

Name of Employer **NONE** Occupation **HOMEMAKER**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 10 / 2013**

Transaction ID : **SA11.3612**

Amount of Each Receipt this Period  
**2600.00**

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. LAURENCE F. LEJEUNE**

Mailing Address **2820 COUNTY RD 24**

City **LONG LAKE** State **MN** Zip Code **55356-**

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

Name of Employer **LEJEUNE INVESTMENT COMPANY** Occupation **CEO**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 10 / 2013**

Transaction ID : **SA11.3611**

Amount of Each Receipt this Period  
**2600.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. LAURENCE F. LEJEUNE**

Mailing Address **2820 COUNTY RD 24**

City **LONG LAKE** State **MN** Zip Code **55356-**

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

Name of Employer **LEJEUNE INVESTMENT COMPANY** Occupation **CEO**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 30 / 2013**

Transaction ID : **SA11.4220**

Amount of Each Receipt this Period  
**5200.00**

CONTRIBUTION

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

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

**10400.00**

14020112352

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

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

FOR LINE NUMBER: PAGE 110 OF 231  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. JEAN LEJEUNE**

Mailing Address **2820 COUNTY RD 24**

City **LONG LAKE** State **MN** Zip Code **55356-**

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

Name of Employer **NONE** Occupation **HOMEMAKER**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**5200.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 30 / 2013**

Transaction ID : **SA11.4408**

Amount of Each Receipt this Period  
**2600.00**

CONTRIBUTION

**[MEMO ITEM]  
PRESUMPTIVELY REDESIGNATED REATTRIBUTION FROM SPOUSE**

**B.** Full Name (Last, First, Middle Initial)  
**MR. LAURENCE F. LEJEUNE**

Mailing Address **2820 COUNTY RD 24**

City **LONG LAKE** State **MN** Zip Code **55356-**

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

Name of Employer **LEJEUNE INVESTMENT COMPANY** Occupation **CEO**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**5200.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 30 / 2013**

Transaction ID : **SA11.4220B**

Amount of Each Receipt this Period  
**-2600.00**

CONTRIBUTION

**[MEMO ITEM]  
REATTRIBUTION TO SPOUSE**

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

Mailing Address **480 OLD LONG LAKE RD**

City **WAYZATA** State **MN** Zip Code **55391-9681**

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

Name of Employer **FABCON** Occupation **CEO**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 31 / 2013**

Transaction ID : **SA11.4284**

Amount of Each Receipt this Period  
**500.00**

CONTRIBUTION

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

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

**500.00**

14020112353

**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)	PAGE 111 OF 231
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**RICHARD C. LINDMARK**

Mailing Address **200 N HOLCOMBE AVE  
APT 202**

City **LITCHFIELD** State **MN** Zip Code **55355-2289**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFFORTS** Occupation **INFORMATION REQUESTED PER BEST EFFORTS**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **11 / 20 / 2013**

Transaction ID : **SA11.2928**

Amount of Each Receipt this Period **250.00**

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MRS. PATRICIA M. LOBENFELD**

Mailing Address **34 ROCKY BROOK RD.**

City **NEW CANAAN** State **CT** Zip Code **06840-**

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

Name of Employer **HOGAN LOVELLS LLC** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **12 / 17 / 2013**

Transaction ID : **SA11.3956**

Amount of Each Receipt this Period **500.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**HUGH LOUD**

Mailing Address **P.O. BOX 11660**

City **ASPEN** State **CO** Zip Code **81612-9509**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt **12 / 17 / 2013**

Transaction ID : **SA11.3524**

Amount of Each Receipt this Period **500.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... **1250.00**

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

14020112354

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

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

FOR LINE NUMBER: PAGE 112 OF 231  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**DAVID LUBBEN**

Mailing Address 11126 EASTWOOD AVE. SE

City DELANO	State MN	Zip Code 55328-8336
----------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
12 / 18 / 2013

Transaction ID : SA11.3530

Amount of Each Receipt this Period  
5200.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DAVID LUBBEN**

Mailing Address 11126 EASTWOOD AVE. SE

City DELANO	State MN	Zip Code 55328-8336
----------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
12 / 18 / 2013

Transaction ID : SA11.3530B

Amount of Each Receipt this Period  
-2600.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**DAVID LUBBEN**

Mailing Address 11126 EASTWOOD AVE. SE

City DELANO	State MN	Zip Code 55328-8336
----------------	-------------	------------------------

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

Name of Employer NONE	Occupation RETIRED
--------------------------	-----------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
12 / 18 / 2013

Transaction ID : SA11.4586

Amount of Each Receipt this Period  
2600.00

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM PRIMARY

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

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

5200.00

14020112355

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

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

FOR LINE NUMBER: PAGE 113 OF 231  
(check only one)

11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**STEPHEN PAUL LUCKE**

Mailing Address **27 COOPER CIR**

City **EDINA** State **MN** Zip Code **55436-1316**

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

Name of Employer **DORSEY & WHITNEY LLP** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**11 / 12 / 2013**

Transaction ID : **SA11.2851**

Amount of Each Receipt this Period  
**1000.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MARY M. LUEDERS**

Mailing Address **4605 S 975 E**

City **ZIONSVILLE** State **IN** Zip Code **46077-8685**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**12 / 20 / 2013**

Transaction ID : **SA11.4087**

Amount of Each Receipt this Period  
**250.00**  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. JOHN C. LUNDQUIST**

Mailing Address **1074 LOMA LINDA AVE.**

City **MOUND** State **MN** Zip Code **55364-**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**12 / 11 / 2013**

Transaction ID : **SA11.3862**

Amount of Each Receipt this Period  
**500.00**  
CONTRIBUTION

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

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

**1750.00**

14020112356

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

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

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 (check only one)  
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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT LYONS**

Mailing Address 163 ADDISON ROAD

City RIVERSIDE State IL Zip Code 60546-2001

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

Name of Employer GATX CORPORATION Occupation FINANCE

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 03 / 2013

Transaction ID : SA11.3106

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**WENDELL MADDOX**

Mailing Address 7500 EQUITABLE DRIVE

City EDEN PRAIRIE State MN Zip Code 55344-3673

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

Name of Employer INFORMATION REQUESTED PER BEST EFF Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 31 / 2013

Transaction ID : SA11.4355

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**BRIAN MARKLEY**

Mailing Address 710 CRUM CREEK ROAD

City BROOMALL State PA Zip Code 19008-3405

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

Name of Employer SOLOMON EDWARDS GROUP Occupation EXECUTIVE

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 05 / 2013

Transaction ID : SA11.3286

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

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

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

**1500.00**

14020112357

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

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

FOR LINE NUMBER: PAGE 115 OF 231  
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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT J. MARZEC**

Mailing Address **36 PARK LANE**

City **MINNEAPOLIS** State **MN** Zip Code **55416-4340**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
**11 / 20 / 2013**

Transaction ID : **SA11.2916**

Amount of Each Receipt this Period  
**300.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**SHIRLEY COX MATTESON**

Mailing Address **620 SAND HILL ROAD, APT 400D**

City **PALO ALTO** State **CA** Zip Code **94304-2602**

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

Name of Employer **MATTESON COMPANIES** Occupation **VICE-CHAIRMAN**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
**12 / 20 / 2013**

Transaction ID : **SA11.4067**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JOHN MCCARTHY**

Mailing Address **8251 WALDORF COURT**

City **EDEN PRAIRIE** State **MN** Zip Code **55347-2158**

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

Name of Employer **CUSHMAN & WAKEFIELD / NORTHMARQ** Occupation **COMMERCIAL REAL ESTATE**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
**12 / 30 / 2013**

Transaction ID : **SA11.4211**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

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

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

**2300.00**

14020112358

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

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

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(check only one)  
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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**PATRICK J. MCHALE**

Mailing Address 16661 IVYWOOD ST

City ANDOVER State MN Zip Code 55304-2468

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

Name of Employer GRACO INC. Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2600.00

Date of Receipt 12 / 20 / 2013  
Transaction ID : SA11.4094

Amount of Each Receipt this Period  
CONTRIBUTION 5200.00

**B.** Full Name (Last, First, Middle Initial)  
**PATRICK J. MCHALE**

Mailing Address 16661 IVYWOOD ST

City ANDOVER State MN Zip Code 55304-2468

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

Name of Employer GRACO INC. Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2600.00

Date of Receipt 12 / 20 / 2013  
Transaction ID : SA11.4094B

Amount of Each Receipt this Period  
CONTRIBUTION -2600.00

**[MEMO ITEM]**  
REATTRIBUTION TO SPOUSE

**C.** Full Name (Last, First, Middle Initial)  
**TONI LYNN MCHALE**

Mailing Address 16661 IVYWOOD STREET

City ANDOVER State MN Zip Code 55304-2468

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

Name of Employer INFORMATION REQUESTED PER BEST EFF. Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2600.00

Date of Receipt 12 / 20 / 2013  
Transaction ID : SA11.4426

Amount of Each Receipt this Period  
CONTRIBUTION 2600.00

**[MEMO ITEM]**  
PRESUMPTIVELY REATTRIBUTED REATTRIBUTED FROM SPOUSE

**SUBTOTAL** of Receipts This Page (optional) ..... 5200.00

**TOTAL** This Period (last page this line number only) ..... 5200.00

14020112359



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

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

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**MR. ROBERT F. MCKEON**

Mailing Address 18557 SE FERLAND CT

City State Zip Code  
JUPITER FL 33469-

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

Name of Employer Occupation  
BCM MANAGEMENT SERVICES BUSINESS OWNER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
250.00

Date of Receipt  
12 / 17 / 2013

Transaction ID : SA11.4026

Amount of Each Receipt this Period  
250.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**WILLIAM MCLAUGHLIN**

Mailing Address 2350 W LAKE OF THE ISLES PKWY

City State Zip Code  
MINNEAPOLIS MN 55405-2302

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
11 / 20 / 2013

Transaction ID : SA11.2958

Amount of Each Receipt this Period  
2000.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DOUGLAS DEHAAS MCMILLAN**

Mailing Address 707 GOODRICH AVE.

City State Zip Code  
ST. PAUL MN 55105-3525

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

Name of Employer Occupation  
MCMILLAN ELECTRIC COMPANY EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
2000.00

Date of Receipt  
12 / 16 / 2013

Transaction ID : SA11.3507

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

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

3250.00

14020112360

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

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

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(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**JIM MCPHILLIAMY**

Mailing Address 1221 BILMORE DRIVE

City CHARLOTTE State NC Zip Code 28207-2552

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

Name of Employer CHARLOTTE HOUNDS Occupation PRESIDENT

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt 12 / 06 / 2013  
Transaction ID : SA11.3347

Amount of Each Receipt this Period  
CONTRIBUTION 250.00

**B.** Full Name (Last, First, Middle Initial)  
**AL MCQUINN**

Mailing Address 1551 GULF SHORE BLVD S

City NAPLES State FL Zip Code 34102-7454

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 5200.00

Date of Receipt 11 / 26 / 2013  
Transaction ID : SA11.2967

Amount of Each Receipt this Period  
CONTRIBUTION 5200.00

**C.** Full Name (Last, First, Middle Initial)  
**AL MCQUINN**

Mailing Address 1551 GULF SHORE BLVD S

City NAPLES State FL Zip Code 34102-7454

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

Name of Employer NONE Occupation RETIRED

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 5200.00

Date of Receipt 11 / 26 / 2013  
Transaction ID : SA11.2967B

Amount of Each Receipt this Period  
CONTRIBUTION -2600.00

**[MEMO ITEM]**  
PRESUMPTIVELY REDESIGNATED  
REDESIGNATION TO GENERAL

**SUBTOTAL** of Receipts This Page (optional)..... 5450.00

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

14020112361

**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)	PAGE 119 OF 231
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>AL MCQUINN</b>		Date of Receipt MM / DD / YYYY 11 / 26 / 2013
Mailing Address 1551 GULF SHORE BLVD S		Transaction ID : SA11.4588
City NAPLES	State FL	Zip Code 34102-7454
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2600.00 CONTRIBUTION	
Name of Employer NONE	Occupation RETIRED	[MEMO ITEM] PRESUMPTIVELY REDESIGNATED REDESIGNATION FROM PRIMARY
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

Full Name (Last, First, Middle Initial) <b>DANIEL P. MEYER</b>		Date of Receipt MM / DD / YYYY 12 / 06 / 2013
Mailing Address 2100 PENNSYLVANIA AVE NW SUITE 500		Transaction ID : SA11.3441
City WASHINGTON	State DC	Zip Code 20037-3204
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 1000.00 CONTRIBUTION	
Name of Employer THE DURBESTEIN GROUP, INC.	Occupation SENIOR VICE PRESIDENT	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>ROBERT MILLER</b>		Date of Receipt MM / DD / YYYY 10 / 29 / 2013
Mailing Address 18578 BEARPATH TRAIL		Transaction ID : SA11.2717
City EDEN PRAIRIE	State MN	Zip Code 55347-3457
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00 CONTRIBUTION	
Name of Employer TE MILLER DEVELOPMENT	Occupation REAL ESTATE	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020112362

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

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

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/>	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**STEWART C. MILLS JR.**

Mailing Address **PO BOX 5055**  
**512 LAUREL STREET**

City **BRAINERD** State **MN** Zip Code **56401-5055**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
MM / DD / YYYY  
**12 / 31 / 2013**

Transaction ID : **SA11.4364**

Amount of Each Receipt this Period  
**2600.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**COREY MILTIMORE**

Mailing Address **15813 PORCHLIGHT LN**

City **EDEN PRAIRIE** State **MN** Zip Code **55347-**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
MM / DD / YYYY  
**12 / 30 / 2013**

Transaction ID : **SA11.4302**

Amount of Each Receipt this Period  
**250.00**  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**PATRICK MINEA**

Mailing Address **5204 RIDGE ROAD**

City **EDINA** State **MN** Zip Code **55436-1079**

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

Name of Employer **NORTHMARQ CAPITAL** Occupation **MORTGAGE BANKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
MM / DD / YYYY  
**12 / 26 / 2013**

Transaction ID : **SA11.4124**

Amount of Each Receipt this Period  
**1000.00**  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....  
**3850.00**

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

14020112363

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

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

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**EDDIE MORADIAN**

Mailing Address 2120 CHARLTON ROAD

City State Zip Code  
SUNFISH LAKE MN 55118-4737

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

Name of Employer Occupation  
MD BIOSCIENCES, INC. CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
750.00

Date of Receipt  
MM / DD / YYYY  
12 / 11 / 2013

Transaction ID : SA11.3483

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DANIEL MORAN**

Mailing Address 4612 LAKEVIEW DR

City State Zip Code  
EDINA MN 55424-1518

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

Name of Employer Occupation  
MERRILL LYNCH SR. VP-WEALTH MANAGEMETN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
MM / DD / YYYY  
11 / 29 / 2013

Transaction ID : SA11.2947

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JOHN MORRISON**

Mailing Address 3093 FORT CHARLES DR

City State Zip Code  
NAPLES FL 34102-7920

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

Name of Employer Occupation  
CENTRAL BANK GROUP BANKING

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5000.00

Date of Receipt  
MM / DD / YYYY  
12 / 20 / 2013

Transaction ID : SA11.4093

Amount of Each Receipt this Period  
5000.00  
CONTRIBUTION

REATTRIBUTION REQUESTED

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

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

6000.00

14020112364

**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)	PAGE 122 OF 231
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 15	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>MARK MOWAT</b>		Date of Receipt MM / DD / YYYY 12 / 09 / 2013
Mailing Address 13404 EAGLE RUN DRIVE		Transaction ID : SA11.3447
City OMAHA	State NE	Zip Code 68164-2478
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2600.00 CONTRIBUTION	
Name of Employer MOWAT CAPITAL SERVICES, LLC	Occupation FINANCIAL ADVISOR	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2600.00	

Full Name (Last, First, Middle Initial) <b>BRIAN C. MURRAY</b>		Date of Receipt MM / DD / YYYY 12 / 20 / 2013
Mailing Address 4801 ALDRICH AVE S		Transaction ID : SA11.4077
City MINNEAPOLIS	State MN	Zip Code 55419-5350
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2500.00 CONTRIBUTION	
Name of Employer RYAN COMPANIES	Occupation CFO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) <b>MR. TIMOTHY MURRAY</b>		Date of Receipt MM / DD / YYYY 11 / 20 / 2013
Mailing Address 57217 200TH ST		Transaction ID : SA11.2962
City MANKATO	State MN	Zip Code 56001-6768
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00 CONTRIBUTION	
Name of Employer MANKATO ANESTHESIA ASSOCIATES	Occupation PHYSICIAN	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5350.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020112365

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

Use separate schedule(s)  
for each category of the  
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 11a     11b     11c     11d  
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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**MR. TIMOTHY MURRAY**

Mailing Address **57217 200TH ST**

City **MANKATO** State **MN** Zip Code **56001-6768**

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

Name of Employer **MANKATO ANESTHESIA ASSOCIATES** Occupation **PHYSICIAN**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**12 / 11 / 2013**

Transaction ID : **SA11.3902**

Amount of Each Receipt this Period  
**250.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**CARY MUSECH**

Mailing Address **20540 SUMMERVILLE RD**

City **DEEPHAVEN** State **MN** Zip Code **55331-9215**

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

Name of Employer **TONKA BAY EQUITY PARTNERS** Occupation **INVESTMENT MANAGEMENT**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**11 / 03 / 2013**

Transaction ID : **SA11.2777**

Amount of Each Receipt this Period  
**2600.00**  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MARTY NANNE**

Mailing Address **4350 BAKER ROAD**

City **MINNETONKA** State **MN** Zip Code **55343-8609**

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

Name of Employer **THE KNW GROUP** Occupation **OWNER/PRESIDENT**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**11 / 14 / 2013**

Transaction ID : **SA11.2854**

Amount of Each Receipt this Period  
**250.00**  
CONTRIBUTION

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

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

**3100.00**

14020112366

**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)		PAGE 124 OF 231	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>MARTY LOUIS NANNE</b>			Date of Receipt MM / DD / YYYY 12 / 30 / 2013	
Mailing Address 5300 DUNDEE ROAD			Transaction ID : SA11.4252	
City EDINA	State MN	Zip Code 55436-2030	Amount of Each Receipt this Period CONTRIBUTION 250.00	
FEC ID number of contributing federal political committee. C		Name of Employer THE KNW GROUP		
Occupation CEO		Election Cycle-to-Date 600.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				

Full Name (Last, First, Middle Initial) <b>TOM R. NARDINI</b>			Date of Receipt MM / DD / YYYY 12 / 03 / 2013	
Mailing Address 5872 HOBE LN			Transaction ID : SA11.3223	
City WHITE BEAR LAKE	State MN	Zip Code 55110-6464	Amount of Each Receipt this Period CONTRIBUTION 1000.00	
FEC ID number of contributing federal political committee. C		Name of Employer INFORMATION REQUESTED PER BEST EFF		
Occupation INFORMATION REQUESTED PER BEST EFF		Election Cycle-to-Date 1000.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)				

Full Name (Last, First, Middle Initial) <b>KEITH NELSEN</b>			Date of Receipt MM / DD / YYYY 12 / 30 / 2013	
Mailing Address 5240 HALIFAX AVE. S.			Transaction ID : SA11.4205	
City EDINA	State MN	Zip Code 55424-1401	Amount of Each Receipt this Period CONTRIBUTION 2600.00	
FEC ID number of contributing federal political committee. C		Name of Employer BEST BUY CO., INC.		
Occupation ATTORNEY/GENERAL COUNSEL		Election Cycle-to-Date 7800.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		REATTRIBUTION REQUESTED		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3850.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020112367



**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)	PAGE 125 OF 231
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 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)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**MR. JOHN H. NELSON**

Mailing Address 1601 S 187TH CIR.

City OMAHA	State NE	Zip Code 68130-
FEC ID number of contributing federal political committee. C		
Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Date of Receipt: 12 / 10 / 2013  
Transaction ID : SA11.3576  
Amount of Each Receipt this Period: 250.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JOHN J. NELSON**

Mailing Address 2154 CHARLTON RD

City SUNFISH LAKE	State MN	Zip Code 55118-4737
FEC ID number of contributing federal political committee. C		
Name of Employer NELSON	Occupation CEO	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5600.00	

Date of Receipt: 12 / 30 / 2013  
Transaction ID : SA11.4250  
Amount of Each Receipt this Period: 2600.00  
CONTRIBUTION  
REATTRIBUTION REQUESTED

**C.** Full Name (Last, First, Middle Initial)  
**KEVIN NELSON**

Mailing Address 7208 LANHAM LANE

City EDINA	State MN	Zip Code 55439-1822
FEC ID number of contributing federal political committee. C		
Name of Employer SELF	Occupation PHYSICIAN	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Date of Receipt: 11 / 07 / 2013  
Transaction ID : SA11.2781  
Amount of Each Receipt this Period: 250.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... 3100.00

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

14020112368

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 126 OF 231	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>A. MICHAEL NELSON</b>		Date of Receipt MM / DD / YYYY 12 / 05 / 2013
Mailing Address 111 SOUTH WACKER DRIVE		Transaction ID : SA11.3284
City CHICAGO	State IL	Zip Code 60606-4302
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5000.00 CONTRIBUTION	
Name of Employer THE PRITZKER GROUP	Occupation INVESTMENT PARTNER	REATTRIBUTION REQUESTED
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5000.00	

Full Name (Last, First, Middle Initial) <b>B. MR. STEVEN D. NELSON</b>		Date of Receipt MM / DD / YYYY 12 / 17 / 2013
Mailing Address 3775 LINDEN LN.		Transaction ID : SA11.3962
City EAGAN	State MN	Zip Code 55123-
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 250.00 CONTRIBUTION	
Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF	REATTRIBUTION REQUESTED
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00	

Full Name (Last, First, Middle Initial) <b>C. TODD NICHOLSON</b>		Date of Receipt MM / DD / YYYY 12 / 16 / 2013
Mailing Address 76 DELLWOOD AVENUE		Transaction ID : SA11.3520
City DELLWOOD	State MN	Zip Code 55110-1401
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 500.00 CONTRIBUTION	
Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF	REATTRIBUTION REQUESTED
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5750.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020112369

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

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

FOR LINE NUMBER: PAGE 127 OF 231  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**RICHARD NOBLE**

Mailing Address **120 SALEM CHURCH RD**

City **SUNFISH LAKE** State **MN** Zip Code **55118-4741**

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

Name of Employer **SUMMIT INFORMATION RESOURCES** Occupation **BUSINESS OWNER**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt **10 / 09 / 2013**  
Transaction ID : **SA11.2432**

Amount of Each Receipt this Period  
**250.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JOHN NOLAN**

Mailing Address **328 BARRY AVE S  
328 BARRY AVE S, STE 300**

City **MINNEAPOLIS** State **MN** Zip Code **55391-1662**

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

Name of Employer **SELF** Occupation **OWNER**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt **12 / 06 / 2013**  
Transaction ID : **SA11.4289**

Amount of Each Receipt this Period  
**2600.00**  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**STUART H. NOLAN**

Mailing Address **7020 WILLOW CREEK RD**

City **EDEN PRAIRIE** State **MN** Zip Code **55344-3224**

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

Name of Employer **STUARTCO** Occupation **FOUNDER**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt **11 / 07 / 2013**  
Transaction ID : **SA11.2844**

Amount of Each Receipt this Period  
**2500.00**  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... **5350.00**

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

14020112370

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 128 OF 231
	(check only one)	
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 12	<input type="checkbox"/> 13a
	<input type="checkbox"/> 13b	<input type="checkbox"/> 11c
	<input type="checkbox"/> 14	<input type="checkbox"/> 11d
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**RORY O'NEILL**

Mailing Address **4877 ROLLING GREEN PKWY**

City <b>EDINA</b>	State <b>MN</b>	Zip Code <b>55436-1347</b>
----------------------	--------------------	-------------------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
--	--

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**10400.00**

Date of Receipt  

M M	D D	Y Y Y Y
12	23	2013

Transaction ID : **SA11.4116**

Amount of Each Receipt this Period  

CONTRIBUTION
10400.00

**B.** Full Name (Last, First, Middle Initial)  
**RORY O'NEILL**

Mailing Address **4877 ROLLING GREEN PKWY**

City <b>EDINA</b>	State <b>MN</b>	Zip Code <b>55436-1347</b>
----------------------	--------------------	-------------------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
--	--

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**10400.00**

Date of Receipt  

M M	D D	Y Y Y Y
12	23	2013

Transaction ID : **SA11.4116B**

Amount of Each Receipt this Period  

CONTRIBUTION
-2600.00

[MEMO ITEM]  
REATTRIBUTION REQUESTED REDESIGNATION GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**RORY O'NEILL**

Mailing Address **4877 ROLLING GREEN PKWY**

City <b>EDINA</b>	State <b>MN</b>	Zip Code <b>55436-1347</b>
----------------------	--------------------	-------------------------------

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

Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF
--	--

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**10400.00**

Date of Receipt  

M M	D D	Y Y Y Y
12	23	2013

Transaction ID : **SA11.4433**

Amount of Each Receipt this Period  

CONTRIBUTION
2600.00

[MEMO ITEM]  
REDESIGNATION FROM PRIMARY

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

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

10400.00
----------

14020112371

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

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

FOR LINE NUMBER: PAGE 129 OF 231  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**PETER R. OFFENHAUSER**

Mailing Address 2014 W 21ST ST

City State Zip Code  
MINNEAPOLIS MN 55405-2414

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

Name of Employer Occupation  
NORTHERN PACIFIC GROUP INVESTOR

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
MM / DD / YYYY  
12 / 06 / 2013

Transaction ID : SA11.3437

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MIKE OHMES**

Mailing Address 1022 BROMPTON PL

City State Zip Code  
MENDOTA HEIGHTS MN 55118-1002

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

Name of Employer Occupation  
CUSHMAN WAKEFIELD / NORTHMARQ COMMERCIAL REAL ESTATE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
MM / DD / YYYY  
12 / 31 / 2013

Transaction ID : SA11.4315

Amount of Each Receipt this Period  
5200.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**CARLETON OLMANSON**

Mailing Address 360 RIDGE CIRCLE

City State Zip Code  
WAYZATA MN 55391-9576

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

Name of Employer Occupation  
LAKESIDE CAPITAL MANAGEMENT INVESTMENT MANAGER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
3600.00

Date of Receipt  
MM / DD / YYYY  
12 / 30 / 2013

Transaction ID : SA11.4203

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

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

6700.00

14020112372

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 130 OF 231	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**CLIFFORD OLSON**

Mailing Address 18787 HOBBY HILLS CIRCLE

City	State	Zip Code
PRIOR LAKE	MN	55372-9704

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

Name of Employer	Occupation
NATIONAL FLOORING EQUIPMENT	BUSINESS

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  

MM	DD	YYYY
10	29	2013

Transaction ID : SA11.2716

Amount of Each Receipt this Period  

1000.00
---------

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. RICHARD OLSON**

Mailing Address 40783 BOW TR.

City	State	Zip Code
NERSTRAND	MN	55053-

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

Name of Employer	Occupation
SELF-EMPLOYED	BUS. MGMT.

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  

MM	DD	YYYY
12	10	2013

Transaction ID : SA11.3780

Amount of Each Receipt this Period  

1000.00
---------

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DONALD OREN**

Mailing Address 3105 SANDY HOOK DR

City	State	Zip Code
ROSEVILLE	MN	55113-2128

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

Name of Employer	Occupation
DART TRANSIT CO	CHAIRMAN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  

MM	DD	YYYY
12	30	2013

Transaction ID : SA11.4436B

Amount of Each Receipt this Period  

-2600.00
----------

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION TO GENERAL

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

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

2000.00
---------

14020112373

**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)	PAGE 131 OF 231
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 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)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**DONALD OREN**

Mailing Address **3105 SANDY HOOK DR**

City **ROSEVILLE** State **MN** Zip Code **55113-2128**

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

Name of Employer **DART TRANSIT CO** Occupation **CHAIRMAN**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **10000.00**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	3	0	/	2	0	1	3

Transaction ID : **SA11.4439**

Amount of Each Receipt this Period  

2	6	0	0	.	0	0
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**CONTRIBUTION**

**[MEMO ITEM]**  
**REDESIGNATION FROM PRIMARY**

**B.** Full Name (Last, First, Middle Initial)  
**DARRYLE L. OWENS**

Mailing Address **2119 E LAKE OF THE ISLES PKWY**

City **MINNEAPOLIS** State **MN** Zip Code **55405-2409**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	3	/	2	0	1	3

Transaction ID : **SA11.2838**

Amount of Each Receipt this Period  

1	0	0	0	.	0	0
---	---	---	---	---	---	---

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**EDUARDO PADILLA**

Mailing Address **4638 W LAKE HARRIET PKWY**

City **MINNEAPOLIS** State **MN** Zip Code **55410-1922**

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

Name of Employer **NORTHMARQ** Occupation **COMMERCIAL REAL ESTATE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **350.00**

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	3	/	2	0	1	3

Transaction ID : **SA11.3553**

Amount of Each Receipt this Period  

2	5	0	0	.	0	0
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**CONTRIBUTION**

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

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

1	2	5	0	.	0	0
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1	2	5	0	.	0	0
---	---	---	---	---	---	---

14020112374

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

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

FOR LINE NUMBER: PAGE 132 OF 231

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
---	------------------------------	------------------------------	------------------------------	-----------------------------	------------------------------	------------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**HOWARD PASTER**

Mailing Address **301 WILSHIRE WALK**

City **HOPKINS** State **MN** Zip Code **55305-4832**

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

Name of Employer **PASTER ENTERPRISES** Occupation **BUSINESS OWNER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 12 / 11 / 2013

Transaction ID : **SA11.3477**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MERLYN PETERMANN**

Mailing Address **3416 HWY. 32 S**

City **HAWLEY** State **MN** Zip Code **56549-**

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

Name of Employer **SELF EMPLOYED** Occupation **FARMER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 12 / 13 / 2013

Transaction ID : **SA11.3915**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**ANTHONY M. PHELAN JR**

Mailing Address **2445 LONG ST**

City **BEAUMONT** State **TX** Zip Code **77702-1718**

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

Name of Employer **SELF** Occupation **SPECULATOR**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  
 12 / 03 / 2013

Transaction ID : **SA11.3113**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

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

**1500.00**

14020112375



**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)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**PETER F. PIERCE**

Mailing Address 6205 BALDER LN

City EDINA State MN Zip Code 55439-1101

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

Name of Employer LYLE SIGNS, INC. Occupation SALES AND MANUFACTURING

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 9000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 29 / 2013

Transaction ID : SA11.2952

Amount of Each Receipt this Period  
9000.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**PETER F. PIERCE**

Mailing Address 6205 BALDER LN

City EDINA State MN Zip Code 55439-1101

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

Name of Employer LYLE SIGNS, INC. Occupation SALES AND MANUFACTURING

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 9000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 29 / 2013

Transaction ID : SA11.2952B

Amount of Each Receipt this Period  
-2600.00  
CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION REQUESTED REDESIGNATION GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**PETER F. PIERCE**

Mailing Address 6205 BALDER LN

City EDINA State MN Zip Code 55439-1101

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

Name of Employer LYLE SIGNS, INC. Occupation SALES AND MANUFACTURING

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 9000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
11 / 29 / 2013

Transaction ID : SA11.4590

Amount of Each Receipt this Period  
2600.00  
CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM PRIMARY

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

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

9000.00

14020112376

**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)	PAGE 134 OF 231
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>STEVE PONTIUS</b>		Date of Receipt MM / DD / YYYY 11 / 14 / 2013
Mailing Address 4609 EDINA BLVD		Transaction ID : SA11.2861
City EDINA	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period CONTRIBUTION 1000.00
Name of Employer SELF	Occupation SMALL BUSINESS OWNER	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>LAWRENCE POST</b>		Date of Receipt MM / DD / YYYY 12 / 13 / 2013
Mailing Address 1160 TOWER ROAD		Transaction ID : SA11.3504
City BEVERLY HILLS	State CA	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period CONTRIBUTION 350.00
Name of Employer POST ADVISORY GROUP LLC	Occupation INVESTMENT ADVISOR	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 350.00	

Full Name (Last, First, Middle Initial) <b>MR. GARY B. PRICE</b>		Date of Receipt MM / DD / YYYY 12 / 13 / 2013
Mailing Address 3120 LEEWARD LN.		Transaction ID : SA11.3923
City NAPLES	State FL	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period CONTRIBUTION 500.00
Name of Employer FIFTH AVENUE ADVISORS	Occupation FINANCIAL MANAGEMENT	CONTRIBUTION
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1850.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020112377

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 135 OF 231
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**MR. RONALD N. QUINN**

Mailing Address 9904 BROADMOOR RD.

City OMAHA	State NE	Zip Code 68114-
---------------	-------------	--------------------

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

Name of Employer TENASKA, INC.	Occupation EXECUTIVE VICE PRESIDENT
-----------------------------------	--

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
 12 / 13 / 2013

Transaction ID : SA11.3922

Amount of Each Receipt this Period  
 1000.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MRS. QIAN S. REDMOND**

Mailing Address 7321 WASHINGTON AVE S

City EDINA	State MN	Zip Code 55439-
---------------	-------------	--------------------

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

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
 12 / 17 / 2013

Transaction ID : SA11.3985

Amount of Each Receipt this Period  
 2600.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MRS. QIAN S. REDMOND**

Mailing Address 7321 WASHINGTON AVE S

City EDINA	State MN	Zip Code 55439-
---------------	-------------	--------------------

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

Name of Employer NONE	Occupation HOMEMAKER
--------------------------	-------------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
 12 / 17 / 2013

Transaction ID : SA11.3986

Amount of Each Receipt this Period  
 2600.00  
 CONTRIBUTION

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

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

6200.00

14020112378

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

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

FOR LINE NUMBER: PAGE 136 OF 231  
(check only one)  
 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)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**MR. THOMAS M. REDMOND**

Mailing Address 7321 WASHINGTON AVE S

City State Zip Code  
EDINA MN 55439-

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
MM / DD / YYYY  
12 / 17 / 2013

Transaction ID : SA11.3983

Amount of Each Receipt this Period  
2600.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. THOMAS M. REDMOND**

Mailing Address 7321 WASHINGTON AVE S

City State Zip Code  
EDINA MN 55439-

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
MM / DD / YYYY  
12 / 17 / 2013

Transaction ID : SA11.3984

Amount of Each Receipt this Period  
2600.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. THOMAS C. REED**

Mailing Address 1410 ALEXANDER VALLEY RD

City State Zip Code  
HEALDSBURG CA 95448-

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

Name of Employer Occupation  
NONE RETIRED

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
500.00

Date of Receipt  
MM / DD / YYYY  
12 / 17 / 2013

Transaction ID : SA11.4010

Amount of Each Receipt this Period  
500.00  
CONTRIBUTION

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

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

5700.00

14020112379

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 137 OF 231	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>DAVID REMICK</b>		Date of Receipt MM / DD / YYYY 12 / 31 / 2013	
Mailing Address 4220 CROCKER AVENUE		Transaction ID : SA11.4256	
City EDINA	State MN	Zip Code 55416-5012	Amount of Each Receipt this Period 2600.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer CLEMENTS CHEVROLET CADILLAC AND SUI	Occupation OWNER	Election Cycle-to-Date 2600.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>MR. FREDERICK RICHARDS</b>		Date of Receipt MM / DD / YYYY 10 / 25 / 2013	
Mailing Address 4600 MOORLAND AVENUE 4600 MOORLAND AVE.		Transaction ID : SA11.2772	
City EDINA	State MN	Zip Code 55424-1159	Amount of Each Receipt this Period 390.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer PRESTWICK PARTNERS, LLC	Occupation INVESTMENT BANKER	Election Cycle-to-Date 1670.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

Full Name (Last, First, Middle Initial) <b>MR. FREDERICK RICHARDS</b>		Date of Receipt MM / DD / YYYY 11 / 25 / 2013	
Mailing Address 4600 MOORLAND AVENUE 4600 MOORLAND AVE.		Transaction ID : SA11.3348	
City EDINA	State MN	Zip Code 55424-1159	Amount of Each Receipt this Period 390.00
FEC ID number of contributing federal political committee. C		CONTRIBUTION	
Name of Employer PRESTWICK PARTNERS, LLC	Occupation INVESTMENT BANKER	Election Cycle-to-Date 1670.00	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3380.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020112380

**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)		PAGE 138 OF 231	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**MR. FREDERICK RICHARDS**

Mailing Address **4600 MOORLAND AVENUE**  
**4600 MOORLAND AVE.**

City **EDINA** State **MN** Zip Code **55424-1159**

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

Name of Employer **PRESTWICK PARTNERS, LLC** Occupation **INVESTMENT BANKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1670.00**

Date of Receipt  
**12 / 26 / 2013**

Transaction ID : **SA11.4298**

Amount of Each Receipt this Period  
**390.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**PETER J. RICHTER**

Mailing Address **644 HILLSIDE AVE.**

City **GLEN ELLYN** State **IL** Zip Code **60137-**

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

Name of Employer **CARGILL INC.** Occupation **EXECUTIVE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**10 / 01 / 2013**

Transaction ID : **SA11.2264**

Amount of Each Receipt this Period  
**250.00**  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. J. PETER RICKETTS**

Mailing Address **6450 PRAIRE AVE.**

City **OMAHA** State **NE** Zip Code **68132-**

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

Name of Employer **DRAKON, LLC** Occupation **INVESTOR/CONSULTANT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
**12 / 13 / 2013**

Transaction ID : **SA11.3917**

Amount of Each Receipt this Period  
**2600.00**  
CONTRIBUTION

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

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

**3240.00**

14020112381

**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)	PAGE 139 OF 231
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 12	<input type="checkbox"/> 11b <input type="checkbox"/> 13a
	<input type="checkbox"/> 11c <input type="checkbox"/> 13b	<input type="checkbox"/> 11d <input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>MR. J. PETER RICKETTS</b>			Date of Receipt MM / DD / YYYY 12 / 13 / 2013		
Mailing Address 6450 PRAIRE AVE.			<b>Transaction ID : SA11.3918</b>		
City OMAHA	State NE	Zip Code 68132-	Amount of Each Receipt this Period CONTRIBUTION 2600.00		
FEC ID number of contributing federal political committee. C		Name of Employer DRAKON, LLC			
Occupation INVESTOR/CONSULTANT		Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Election Cycle-to-Date 5200.00					

Full Name (Last, First, Middle Initial) <b>MR. CARL W. RINDELAUB</b>			Date of Receipt MM / DD / YYYY 12 / 12 / 2013		
Mailing Address 4951 MOREHEAD AVENUE			<b>Transaction ID : SA11.3816</b>		
City WHITE BEAR LAKE	State MN	Zip Code 55110-	Amount of Each Receipt this Period CONTRIBUTION 250.00		
FEC ID number of contributing federal political committee. C		Name of Employer SELF EMPLOYED			
Occupation DENTIST		Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Election Cycle-to-Date 250.00					

Full Name (Last, First, Middle Initial) <b>RYAN D. ROBINSON</b>			Date of Receipt MM / DD / YYYY 12 / 30 / 2013		
Mailing Address 413 WYNSTONE DRIVE			<b>Transaction ID : SA11.4304</b>		
City WEXFORD	State PA	Zip Code 15090-	Amount of Each Receipt this Period CONTRIBUTION 250.00		
FEC ID number of contributing federal political committee. C		Name of Employer URGENT CARE HOLDINGS, LLC			
Occupation MANAGEMENT		Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Election Cycle-to-Date 250.00					

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3100.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020112382

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

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

FOR LINE NUMBER: PAGE 140 OF 231  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**MR. KEVIN ROCHE**

Mailing Address **6800 DAKOTA TRL.**

City **EDINA** State **MN** Zip Code **55439-**

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

Name of Employer **ROCHE CONSULTING** Occupation **CONSULTANT**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
**12 / 11 / 2013**

**Transaction ID : SA11.3852**

Amount of Each Receipt this Period  
**5000.00**  
**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**MR. KEVIN ROCHE**

Mailing Address **6800 DAKOTA TRL.**

City **EDINA** State **MN** Zip Code **55439-**

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

Name of Employer **ROCHE CONSULTING** Occupation **CONSULTANT**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
**12 / 11 / 2013**

**Transaction ID : SA11.3852B**

Amount of Each Receipt this Period  
**-2400.00**  
**CONTRIBUTION**

**[MEMO ITEM]**  
**REDESIGNATION TO GENERAL**

**C.** Full Name (Last, First, Middle Initial)  
**MR. KEVIN ROCHE**

Mailing Address **6800 DAKOTA TRL.**

City **EDINA** State **MN** Zip Code **55439-**

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

Name of Employer **ROCHE CONSULTING** Occupation **CONSULTANT**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
**12 / 11 / 2013**

**Transaction ID : SA11.4441**

Amount of Each Receipt this Period  
**2400.00**  
**CONTRIBUTION**

**[MEMO ITEM]**  
**REDESIGNATION FROM PRIMARY**

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

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

**5000.00**

14020112383



**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)		PAGE 141 OF 231	
	<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**CHARLES ROELLIG**

Mailing Address **162 SEMINARY DRIVE**

City **MENLO PARK** State **CA** Zip Code **94025-3569**

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

Name of Employer **CENTURY PARK CAPITAL PARTNERS** Occupation **PRIVATE EQUITY INVESTOR**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 24 / 2013**

Transaction ID : **SA11.4122**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**PAUL T. ROGALSKI**

Mailing Address **4933 LAWN AVENUE**

City **WESTERN SPRINGS** State **IL** Zip Code **60558-1732**

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

Name of Employer **ROBERT W. BAIRD & CO** Occupation **MANAGING DIRECTOR**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 06 / 2013**

Transaction ID : **SA11.3436**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. DAVID E. ROGERS**

Mailing Address **16823 PASADENA CT**

City **OMAHA** State **NE** Zip Code **68130-**

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

Name of Employer **FRONTIER HOLDINGS, LLC** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 17 / 2013**

Transaction ID : **SA11.4035**

Amount of Each Receipt this Period  
**2600.00**  
 CONTRIBUTION

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

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

**4100.00**

14020112384

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

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

FOR LINE NUMBER: PAGE 142 OF 231  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**MR. DAVID E. ROGERS**

Mailing Address 16823 PASADENA CT

City State Zip Code  
OMAHA NE 68130-

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

Name of Employer Occupation  
FRONTIER HOLDINGS, LLC CEO

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
MM / DD / YYYY  
12 / 17 / 2013

Transaction ID : SA11.4036

Amount of Each Receipt this Period  
2600.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JULIE ROSEN**

Mailing Address 105 CEDAR BLUFF DR

City State Zip Code  
FAIRMONT MN 56031-1739

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

Name of Employer Occupation  
STATE OF MINNESOTA STATE SENATOR

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
MM / DD / YYYY  
11 / 26 / 2013

Transaction ID : SA11.3009

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**KEN ROSENBLUM**

Mailing Address 1418 MOUNT CURVE AVENUE

City State Zip Code  
MINNEAPOLIS MN 55403-1010

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

Name of Employer Occupation  
STELLAR VENTURES R&D

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
MM / DD / YYYY  
12 / 19 / 2013

Transaction ID : SA11.3535

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

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

4600.00

14020112385

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

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

FOR LINE NUMBER: PAGE 143 OF 231

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**MS. MARY LOU ROSENCRAZ**

Mailing Address **186 JERRY BROWNE RD., APT. 1408**

City **MYSTIC** State **CT** Zip Code **06355-**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 / 11 / 2013**

Transaction ID : **SA11.3858**

Amount of Each Receipt this Period  
**250.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**COLLEEN C. RYAN**

Mailing Address **19785 LAKEVIEW AVE**

City **EXCELSIOR** State **MN** Zip Code **55331-9351**

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

Name of Employer **NONE** Occupation **HOMEMAKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **600.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 / 22 / 2013**

Transaction ID : **SA11.3550**

Amount of Each Receipt this Period  
**100.00**  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**PATRICK RYAN**

Mailing Address **105 CLAY CLIFFE DR.**

City **TONKA BAY** State **MN** Zip Code **55331-9512**

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

Name of Employer **RYAN COMPANIES US, INC.** Occupation **CONSTRUCTION/REAL ESTATE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **10400.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 / 30 / 2013**

Transaction ID : **SA11.4202**

Amount of Each Receipt this Period  
**5200.00**  
CONTRIBUTION

REATTRIBUTION REQUESTED

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

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

**5550.00**

14020112386

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 144 OF 231	
	(check only one)			
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<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>HILARY SANTONI</b>		Date of Receipt							
Mailing Address 5529 CONCORD AVE		<table border="1"> <tr> <td>MM</td> <td>DD</td> <td>YYYY</td> </tr> <tr> <td>11</td> <td>26</td> <td>2013</td> </tr> </table>		MM	DD	YYYY	11	26	2013
MM	DD	YYYY							
11	26	2013							
City	State	Zip Code	<b>Transaction ID : SA11.3014</b>						
EDINA	MN	55424-1563							
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period							
C		<table border="1"> <tr> <td>1000.00</td> </tr> </table>		1000.00					
1000.00									
Name of Employer	Occupation	CONTRIBUTION							
NONE	HOMEMAKER								
Receipt For: 2014	Election Cycle-to-Date								
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<table border="1"> <tr> <td>1000.00</td> </tr> </table>		1000.00					
1000.00									
<input type="checkbox"/> Other (specify)									

Full Name (Last, First, Middle Initial) <b>PEGGY SAUER</b>		Date of Receipt							
Mailing Address 3100 EDWARD ST NE		<table border="1"> <tr> <td>MM</td> <td>DD</td> <td>YYYY</td> </tr> <tr> <td>12</td> <td>03</td> <td>2013</td> </tr> </table>		MM	DD	YYYY	12	03	2013
MM	DD	YYYY							
12	03	2013							
City	State	Zip Code	<b>Transaction ID : SA11.3055</b>						
MINNEAPOLIS	MN	55418-2355							
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period							
C		<table border="1"> <tr> <td>50.00</td> </tr> </table>		50.00					
50.00									
Name of Employer	Occupation	CONTRIBUTION							
NONE	RETIRED								
Receipt For: 2014	Election Cycle-to-Date								
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<table border="1"> <tr> <td>550.00</td> </tr> </table>		550.00					
550.00									
<input type="checkbox"/> Other (specify)									

Full Name (Last, First, Middle Initial) <b>FRANK A. SAVAGE</b>		Date of Receipt							
Mailing Address 138 GRANDVIEW AVE		<table border="1"> <tr> <td>MM</td> <td>DD</td> <td>YYYY</td> </tr> <tr> <td>12</td> <td>23</td> <td>2013</td> </tr> </table>		MM	DD	YYYY	12	23	2013
MM	DD	YYYY							
12	23	2013							
City	State	Zip Code	<b>Transaction ID : SA11.4119</b>						
RYE	NY	10580-2029							
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period							
C		<table border="1"> <tr> <td>5000.00</td> </tr> </table>		5000.00					
5000.00									
Name of Employer	Occupation	CONTRIBUTION							
LAZARD	INVESTMENT BANKER								
Receipt For: 2014	Election Cycle-to-Date								
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General		<table border="1"> <tr> <td>2600.00</td> </tr> </table>		2600.00					
2600.00									
<input type="checkbox"/> Other (specify)									

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<table border="1"> <tr> <td>6050.00</td> </tr> </table>	6050.00
6050.00		
<b>TOTAL</b> This Period (last page this line number only).....	<table border="1"> <tr> <td></td> </tr> </table>	

14020112387

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

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

FOR LINE NUMBER: PAGE 145 OF 231  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**CYNTHIA SAVAGE**

Mailing Address **138 GRANDVIEW AVE**

City **RYE** State **NY** Zip Code **10580-2029**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**12 / 23 / 2013**

Transaction ID : **SA11.4430**

Amount of Each Receipt this Period  
**2400.00**  
 CONTRIBUTION

**[MEMO ITEM]**  
 PRESUMPTIVELY REATTRIBUTED REATTRIBUTIC  
 FROM SPOUSE

**B.** Full Name (Last, First, Middle Initial)  
**FRANK A. SAVAGE**

Mailing Address **138 GRANDVIEW AVE**

City **RYE** State **NY** Zip Code **10580-2029**

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

Name of Employer **LAZARD** Occupation **INVESTMENT BANKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**12 / 23 / 2013**

Transaction ID : **SA11.4119B**

Amount of Each Receipt this Period  
**-2400.00**  
 CONTRIBUTION

**[MEMO ITEM]**  
 REATTRIBUTION TO SPOUSE

**C.** Full Name (Last, First, Middle Initial)  
**JANE SMITH SCHELLHAS**

Mailing Address **16 OVERHOLT PASS**

City **EDINA** State **MN** Zip Code **55439-1146**

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

Name of Employer **NONE** Occupation **HOMEMAKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**10 / 17 / 2013**

Transaction ID : **SA11.2687**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

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

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

**500.00**  
**500.00**

14020112388

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

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

FOR LINE NUMBER: PAGE 146 OF 231  
(check only one)  
 11a    11b    11c    11d  
 12    13a    13b    14    15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**THOMAS SCHEPERS**

Mailing Address **4341 BROOK AVENUE**

City **ST. LOUIS PARK** State **MN** Zip Code **55424-**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**12 / 05 / 2013**

**Transaction ID : SA11.3356**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JULIE ANN SCHMIDT**

Mailing Address **13220 45TH AVE N**

City **PLYMOUTH** State **MN** Zip Code **55442-2342**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**11 / 04 / 2013**

**Transaction ID : SA11.2828**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NEIL SCHMIDGALL**

Mailing Address **46968 206TH ST**

City **MORRIS** State **MN** Zip Code **56267-1037**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
 Primary    General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
**12 / 09 / 2013**

**Transaction ID : SA11.3457**

Amount of Each Receipt this Period  
**250.00**  
 CONTRIBUTION

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

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

**750.00**

14020112389

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

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

FOR LINE NUMBER: PAGE 147 OF 231  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**RICHARD SCHMOKER**

Mailing Address **6616 BISCAYNE BLVD**

City **EDINA** State **MN** Zip Code **55436-1704**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**09 / 27 / 2013**

Transaction ID : **SA11.1778**

Amount of Each Receipt this Period  
**5000.00**

CONTRIBUTION

**[MEMO ITEM]**  
PRESUMPTIVELY REATTRIBUTED

**B.** Full Name (Last, First, Middle Initial)  
**CATHERINE SCHMOKER**

Mailing Address **6616 BISCAYNE BLVD**

City **EDINA** State **MN** Zip Code **55436-1704**

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

Name of Employer **SELF** Occupation **SELF**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**10 / 01 / 2013**

Transaction ID : **SA11.2718**

Amount of Each Receipt this Period  
**2400.00**

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION FROM SPOUSE

**C.** Full Name (Last, First, Middle Initial)  
**RICHARD SCHMOKER**

Mailing Address **6616 BISCAYNE BLVD**

City **EDINA** State **MN** Zip Code **55436-1704**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**10 / 01 / 2013**

Transaction ID : **SA11.2719**

Amount of Each Receipt this Period  
**-2500.00**

CONTRIBUTION

**[MEMO ITEM]**  
PRESUMPTIVELY REATTRIBUTED REATTRIBUTED TO SPOUSE

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

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

**0.00**

14020112390

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 148 OF 231
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b
		<input type="checkbox"/> 11d
		<input type="checkbox"/> 14
		<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial)  
**A. GEORGE P. SCHNEPF**

Mailing Address 512 13TH AVE. N

City State Zip Code  
SARTELL MN 56377-1755

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

Name of Employer Occupation  
COLD SPRING GRANITE CO CFO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
499.00

Date of Receipt  
MM / DD / YYYY  
10 / 28 / 2013

Transaction ID : SA11.2819

Amount of Each Receipt this Period  
499.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. THOMAS SCHREIER**

Mailing Address 5330 LEXINGTON AVE N

City State Zip Code  
SHOREVIEW MN 55126-1356

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

Name of Employer Occupation  
NUVEEN INVESTMENTS VICE CHAIRMAN

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
1000.00

Date of Receipt  
MM / DD / YYYY  
11 / 14 / 2013

Transaction ID : SA11.2865

Amount of Each Receipt this Period  
1000.00

CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. MAUREEN G. SCHULZE**

Mailing Address 3033 EXCELSIOR BLVD.  
SUITE #525

City State Zip Code  
MINNEAPOLIS MN 55416-3375

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

Name of Employer Occupation  
HOUSEWIFE HOUSEWIFE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
MM / DD / YYYY  
11 / 07 / 2013

Transaction ID : SA11.4422B

Amount of Each Receipt this Period  
-2600.00

CONTRIBUTION

[MEMO ITEM]  
PRESUMPTIVELY REATTRIBUTED REDESIGNATI  
TO GENERAL

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

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

1499.00

14020112391



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

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

FOR LINE NUMBER: PAGE 149 OF 231  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**MAUREEN G. SCHULZE**

Mailing Address **3033 EXCELSIOR BLVD.**  
**SUITE #525**

City **MINNEAPOLIS** State **MN** Zip Code **55416-3375**

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

Name of Employer **HOUSEWIFE** Occupation **HOUSEWIFE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
MM / DD / YYYY  
**11 / 07 / 2013**

Transaction ID : **SA11.4425**

Amount of Each Receipt this Period  
**2600.00**

CONTRIBUTION

**[MEMO ITEM]**  
PRESUMPTIVELY REATTRIBUTED REDESIGNATION FROM PRIMARY

**B.** Full Name (Last, First, Middle Initial)  
**RICHARD M. SCHULZE**

Mailing Address **3033 EXCELSIOR BLVD**  
**SUITE 525**

City **MINNEAPOLIS** State **MN** Zip Code **55416-3375**

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

Name of Employer **BEST BUY CO., INC.** Occupation **FOUNDER & CHAIRMAN EMERITUS**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
MM / DD / YYYY  
**11 / 07 / 2013**

Transaction ID : **SA11.2843**

Amount of Each Receipt this Period  
**10400.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**RICHARD M. SCHULZE**

Mailing Address **3033 EXCELSIOR BLVD**  
**SUITE 525**

City **MINNEAPOLIS** State **MN** Zip Code **55416-3375**

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

Name of Employer **BEST BUY CO., INC.** Occupation **FOUNDER & CHAIRMAN EMERITUS**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
MM / DD / YYYY  
**11 / 19 / 2013**

Transaction ID : **SA11.2843B**

Amount of Each Receipt this Period  
**-2600.00**

CONTRIBUTION

**[MEMO ITEM]**  
REATTRIBUTION REQUESTED REDESIGNATION GENERAL

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

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

**10400.00**

14020112392

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 150 OF 231
	(check only one)	
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	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**RICHARD M. SCHULZE**

Mailing Address 3033 EXCELSIOR BLVD  
SUITE 525

City State Zip Code  
MINNEAPOLIS MN 55416-3375

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

Name of Employer Occupation  
BEST BUY CO., INC. FOUNDER & CHAIRMAN EMERITUS

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
MM / DD / YYYY  
11 / 19 / 2013

Transaction ID : SA11.2908

Amount of Each Receipt this Period  
2600.00

CONTRIBUTION

[MEMO ITEM]  
REATTRIBUTION REQUESTED REDESIGNATION FROM PRIMARY

**B.** Full Name (Last, First, Middle Initial)  
**RICHARD M. SCHULZE**

Mailing Address 3033 EXCELSIOR BLVD  
SUITE 525

City State Zip Code  
MINNEAPOLIS MN 55416-3375

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

Name of Employer Occupation  
BEST BUY CO., INC. FOUNDER & CHAIRMAN EMERITUS

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
MM / DD / YYYY  
11 / 07 / 2013

Transaction ID : SA11.2907

Amount of Each Receipt this Period  
7800.00

CONTRIBUTION

[MEMO ITEM]

**C.** Full Name (Last, First, Middle Initial)  
**MAUREEN G. SCHULZE**

Mailing Address 3033 EXCELSIOR BLVD.  
SUITE #525

City State Zip Code  
MINNEAPOLIS MN 55416-3375

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

Name of Employer Occupation  
HOUSEWIFE HOUSEWIFE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
MM / DD / YYYY  
11 / 07 / 2013

Transaction ID : SA11.4422

Amount of Each Receipt this Period  
5200.00

CONTRIBUTION

[MEMO ITEM]  
PRESUMPTIVELY REATTRIBUTED REATTRIBUTED FROM SPOUSE

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

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

0.00

14020112393

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

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

FOR LINE NUMBER: PAGE 151 OF 231  
(check only one)

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**RICHARD M. SCHULZE**

Mailing Address **3033 EXCELSIOR BLVD**  
**SUITE 525**

City **MINNEAPOLIS** State **MN** Zip Code **55416-3375**

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

Name of Employer **BEST BUY CO., INC.** Occupation **FOUNDER & CHAIRMAN EMERITUS**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
MM / DD / YYYY  
**11 / 07 / 2013**

Transaction ID : **SA11.2907B**

Amount of Each Receipt this Period  
**-5200.00**

CONTRIBUTION

**[MEMO ITEM]**  
PRESUMPTIVELY REDESIGNATED REATTRIBUTED TO SPOUSE

**B.** Full Name (Last, First, Middle Initial)  
**MR. GERALD A. SCHWALBACH**

Mailing Address **601 CARLSON PKWY., STE. 350**

City **MINNETONKA** State **MN** Zip Code **55305-**

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

Name of Employer **SPENSA DEVELOPMENT GROUP, LLC** Occupation **CHAIRMAN**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
MM / DD / YYYY  
**10 / 02 / 2013**

Transaction ID : **SA11.2204**

Amount of Each Receipt this Period  
**1000.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. GERALD A. SCHWALBACH**

Mailing Address **601 CARLSON PKWY., STE. 350**

City **MINNETONKA** State **MN** Zip Code **55305-**

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

Name of Employer **SPENSA DEVELOPMENT GROUP, LLC** Occupation **CHAIRMAN**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
MM / DD / YYYY  
**12 / 13 / 2013**

Transaction ID : **SA11.3937**

Amount of Each Receipt this Period  
**1600.00**

CONTRIBUTION

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

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

**2600.00**

14020112394

**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)	PAGE 152 OF 231
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 11c
<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>MR. KEITH SCHWARTZWALD</b>		Date of Receipt MM / DD / YYYY 12 / 17 / 2013
Mailing Address 660 HIDDEN CREEK TRL		Transaction ID : SA11.3978
City	State Zip Code	
MENDOTA HEIGHTS	MN 55118-	Amount of Each Receipt this Period CONTRIBUTION 1000.00
FEC ID number of contributing federal political committee.	C	
Name of Employer NONE	Occupation RETIRED	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 1000.00	

Full Name (Last, First, Middle Initial) <b>MR. DOUGLAS P. SEATON</b>		Date of Receipt MM / DD / YYYY 12 / 10 / 2013
Mailing Address 7300 METRO BLVD. STE. 500		Transaction ID : SA11.3580
City	State Zip Code	
MINNEAPOLIS	MN 55439-	Amount of Each Receipt this Period CONTRIBUTION 2000.00
FEC ID number of contributing federal political committee.	C	
Name of Employer SEATON, BECK & PETERS	Occupation PARTNER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 2000.00	

Full Name (Last, First, Middle Initial) <b>MRS. BETTY S. SEMBLER</b>		Date of Receipt MM / DD / YYYY 12 / 17 / 2013
Mailing Address 180 BEACH DRIVE NE PH 2500		Transaction ID : SA11.4063
City	State Zip Code	
ST. PETERSBURG	FL 33701-	Amount of Each Receipt this Period CONTRIBUTION 500.00
FEC ID number of contributing federal political committee.	C	
Name of Employer N/A	Occupation HOMEMAKER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3500.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020112395

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

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

FOR LINE NUMBER: PAGE 153 OF 231  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**MR. DAVID F. SENGER**

Mailing Address 4371 AVONDALE ST.

City State Zip Code  
MINNETONKA MN 55345-

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

Name of Employer Occupation  
MOSS & BARNETT ATTORNEY

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 11 / 2013

Transaction ID : SA11.3853

Amount of Each Receipt this Period  
 3000.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. DAVID F. SENGER**

Mailing Address 4371 AVONDALE ST.

City State Zip Code  
MINNETONKA MN 55345-

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

Name of Employer Occupation  
MOSS & BARNETT ATTORNEY

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 11 / 2013

Transaction ID : SA11.3853B

Amount of Each Receipt this Period  
 -400.00  
 CONTRIBUTION

[MEMO ITEM]  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**MR. DAVID F. SENGER**

Mailing Address 4371 AVONDALE ST.

City State Zip Code  
MINNETONKA MN 55345-

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

Name of Employer Occupation  
MOSS & BARNETT ATTORNEY

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
3000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 11 / 2013

Transaction ID : SA11.4443

Amount of Each Receipt this Period  
 400.00  
 CONTRIBUTION

[MEMO ITEM]  
REDESIGNATION FROM PRIMARY

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

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

3000.00

14020112396

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

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

FOR LINE NUMBER: PAGE 154 OF 231  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**JAMES E. SENSKE**

Mailing Address 18467 BEARPATH TRL

City EDEN PRAIRIE State MN Zip Code 55347-3472

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
 11 / 04 / 2013

Transaction ID : SA11.2834

Amount of Each Receipt this Period  
 250.00  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**BRAD M. SERLIN**

Mailing Address 1545 S. CICERO AVE

City CICERO State IL Zip Code 60804-1529

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

Name of Employer Occupation  
UNITED SCRAP METAL METAL RECYCLING

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
 12 / 05 / 2013

Transaction ID : SA11.3279

Amount of Each Receipt this Period  
 500.00  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**KEITH SHAPIRO**

Mailing Address 77 W. WACKER DRIVE, SUITE 3100

City CHICAGO State IL Zip Code 60601-4904

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

Name of Employer Occupation  
GREENBERG TRAURIG, LLP ATTORNEY

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 2600.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
 12 / 04 / 2013

Transaction ID : SA11.3109

Amount of Each Receipt this Period  
 2600.00  
 CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... 3350.00

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

14020112397

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

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

FOR LINE NUMBER: PAGE 155 OF 231  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**BRIAN SHORT**

Mailing Address **215 SOUTH 11TH STREET**

City **MINNEAPOLIS** State **MN** Zip Code **55403-2503**

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

Name of Employer **LEAMINGTON CO EXECUTIVE OFFICES** Occupation **EXECUTIVE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
MM / DD / YYYY  
**12 / 31 / 2013**

Transaction ID : **SA11.4363**

Amount of Each Receipt this Period  
**1000.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**GEORGE SHULTZ**

Mailing Address **434 GALVEZ MALL, ROOM 239**

City **STANFORD** State **CA** Zip Code **94305-6003**

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

Name of Employer **HOOVER INSTITUTE** Occupation **DISTINGUISHED FELLOW**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1500.00**

Date of Receipt  
MM / DD / YYYY  
**11 / 14 / 2013**

Transaction ID : **SA11.2864**

Amount of Each Receipt this Period  
**1500.00**  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**TODD SHUMAN**

Mailing Address **4628 CASCO AVE**

City **EDINA** State **MN** Zip Code **55424-1127**

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

Name of Employer **HONEYWELL INC.** Occupation **SALES**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
MM / DD / YYYY  
**11 / 26 / 2013**

Transaction ID : **SA11.3013**

Amount of Each Receipt this Period  
**1000.00**  
CONTRIBUTION

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

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

**3500.00**

14020112398

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

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

FOR LINE NUMBER: PAGE 156 OF 231  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**ELIZABETH D. SHUMAN**

Mailing Address **4628 CASCO AVENUE**

City **EDINA** State **MN** Zip Code **55424-1127**

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

Name of Employer **GENERAL MILLS** Occupation **FINANCE**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**12 / 31 / 2013**

Transaction ID : **SA11.4309**

Amount of Each Receipt this Period  
**500.00**  
 CONTRIBUTION

**[MEMO ITEM]**  
 PRESUMPTIVELY REATTRIBUTED REATTRIBUTED FROM SPOUSE

**B.** Full Name (Last, First, Middle Initial)  
**TODD SHUMAN**

Mailing Address **4628 CASCO AVE**

City **EDINA** State **MN** Zip Code **55424-1127**

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

Name of Employer **HONEYWELL INC.** Occupation **SALES**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
**12 / 31 / 2013**

Transaction ID : **SA11.3013B**

Amount of Each Receipt this Period  
**-500.00**  
 CONTRIBUTION

**[MEMO ITEM]**  
 REATTRIBUTION TO SPOUSE

**C.** Full Name (Last, First, Middle Initial)  
**MR. PATRICK KEVIN SIENKO**

Mailing Address **551 ABBEY WAY**  
**551 ABBEY WAY**

City **MENDOTA HEIGHTS** State **MN** Zip Code **55120-1734**

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

Name of Employer **RBC WEALTH MANAGEMENT** Occupation **FINANCIAL CONSULTANT**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **300.00**

Date of Receipt  
**12 / 12 / 2013**

Transaction ID : **SA11.3811**

Amount of Each Receipt this Period  
**100.00**  
 CONTRIBUTION

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

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

**100.00**

14020112399



**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)	PAGE 157 OF 231
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 12	<input type="checkbox"/> 13a
<input type="checkbox"/> 13b	<input type="checkbox"/> 11d
<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**THOMAS SIERING**

Mailing Address **18887 MAGENTA BAY**

City **EDEN PRAIRIE** State **MN** Zip Code **55347-2102**

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

Name of Employer **TWO HARBORS INVESTMENT** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
MM / DD / YYYY  
**11 / 13 / 2013**

Transaction ID : **SA11.2842**

Amount of Each Receipt this Period  
**5200.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**THOMAS SIERING**

Mailing Address **18887 MAGENTA BAY**

City **EDEN PRAIRIE** State **MN** Zip Code **55347-2102**

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

Name of Employer **TWO HARBORS INVESTMENT** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
MM / DD / YYYY  
**11 / 19 / 2013**

Transaction ID : **SA11.2842B**

Amount of Each Receipt this Period  
**-2600.00**  
CONTRIBUTION

**[MEMO ITEM]**  
PRESUMPTIVELY REDESIGNATED  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**THOMAS SIERING**

Mailing Address **18887 MAGENTA BAY**

City **EDEN PRAIRIE** State **MN** Zip Code **55347-2102**

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

Name of Employer **TWO HARBORS INVESTMENT** Occupation **CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
MM / DD / YYYY  
**11 / 19 / 2013**

Transaction ID : **SA11.2906**

Amount of Each Receipt this Period  
**2600.00**  
CONTRIBUTION

**[MEMO ITEM]**  
PRESUMPTIVELY REDESIGNATED  
REDESIGNATION FROM PRIMARY

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

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

**5200.00**

14020112400

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 158 OF 231	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**MICHAEL SILL II**

Mailing Address 3660 NORTHOME RD

City DEEPHAVEN State MN Zip Code 55391-3021

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

Name of Employer ROAD MACHINERY & SUPPLIES Occupation PRESIDENT AND CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt 12 / 27 / 2013

Transaction ID : SA11.4192

Amount of Each Receipt this Period 500.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MR. MICHAEL H. SIMMONDS**

Mailing Address 11404 DODGE RD. STE. 650

City OMAHA State NE Zip Code 68154-

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

Name of Employer SIMMONDS HOLDINGS, LLC Occupation EXECUTIVE

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt 12 / 10 / 2013

Transaction ID : SA11.3575

Amount of Each Receipt this Period 1000.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**PHILIP E. SORAN**

Mailing Address 5625 INTERLACHAN CIRCLE

City EDINA State MN Zip Code 55436-1331

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

Name of Employer INFORMATION REQUESTED PER BEST EFFC Occupation INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5200.00

Date of Receipt 12 / 30 / 2013

Transaction ID : SA11.4214

Amount of Each Receipt this Period 5200.00  
CONTRIBUTION

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

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

6700.00

14020112401

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

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

FOR LINE NUMBER: PAGE 159 OF 231

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**PHILIP E. SORAN**

Mailing Address **5625 INTERLACHAN CIRCLE**

City **EDINA** State **MN** Zip Code **55436-1331**

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

Name of Employer  
INFORMATION REQUESTED PER BEST EFF

Occupation  
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5200.00**

Date of Receipt  
**12 / 30 / 2013**

**Transaction ID : SA11.4214B**

Amount of Each Receipt this Period  
**-2600.00**

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
**PHILIP E. SORAN**

Mailing Address **5625 INTERLACHAN CIRCLE**

City **EDINA** State **MN** Zip Code **55436-1331**

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

Name of Employer  
INFORMATION REQUESTED PER BEST EFF

Occupation  
INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5200.00**

Date of Receipt  
**12 / 30 / 2013**

**Transaction ID : SA11.4598**

Amount of Each Receipt this Period  
**2600.00**

CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
**ANNE SPAETH**

Mailing Address **21700 FAIRVIEW STREET**

City **GREENWOOD** State **MN** Zip Code **55331-8747**

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

Name of Employer  
**NONE**

Occupation  
**HOMEMAKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**5200.00**

Date of Receipt  
**09 / 27 / 2013**

**Transaction ID : SA11.2803**

Amount of Each Receipt this Period  
**5200.00**

CONTRIBUTION

**[MEMO ITEM]**  
VERIFIED REATTRIBUTION

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

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

**0.00**

14020112402

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

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

FOR LINE NUMBER: PAGE 160 OF 231

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>ANNE SPAETH</b>		Date of Receipt MM / DD / YYYY 11 / 11 / 2013
Mailing Address 21700 FAIRVIEW STREET		Transaction ID : SA11.2803B
City GREENWOOD	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period -2600.00 CONTRIBUTION
Name of Employer NONE	Occupation HOMEMAKER	[MEMO ITEM] VERIFIED REATTRIBUTION REDESIGNATION TO GENERAL
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

Full Name (Last, First, Middle Initial) <b>ANNE SPAETH</b>		Date of Receipt MM / DD / YYYY 11 / 11 / 2013
Mailing Address 21700 FAIRVIEW STREET		Transaction ID : SA11.2806
City GREENWOOD	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2600.00 CONTRIBUTION
Name of Employer NONE	Occupation HOMEMAKER	[MEMO ITEM] VERIFIED REATTRIBUTION REDESIGNATION FRC PRIMARY
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

Full Name (Last, First, Middle Initial) <b>JASON SPAETH</b>		Date of Receipt MM / DD / YYYY 09 / 27 / 2013
Mailing Address 21700 FAIRVIEW STREET		Transaction ID : SA11.2314
City GREENWOOD	State MN	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 7800.00 CONTRIBUTION
Name of Employer VARDE PARTNERS, INC.	Occupation MANAGING PARTNER	[MEMO ITEM] REATTRIBUTION REQUESTED
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	0.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020112403

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 161 OF 231	
	(check only one)			
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**JASON SPAETH**

Mailing Address **21700 FAIRVIEW STREET**

City **GREENWOOD** State **MN** Zip Code **55331-8747**

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

Name of Employer **VARDE PARTNERS, INC.** Occupation **MANAGING PARTNER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 11 / 2013**

Transaction ID : **SA11.2804**

Amount of Each Receipt this Period  
**-5200.00**

CONTRIBUTION

**[MEMO ITEM]**  
 VERIFIED REATTRIBUTION REATTRIBUTION TO SPOUSE

**B.** Full Name (Last, First, Middle Initial)  
**WARREN STALEY**

Mailing Address **P.O. BOX 19000**

City **AVON** State **CO** Zip Code **81620-9010**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**12 / 11 / 2013**

Transaction ID : **SA11.3480**

Amount of Each Receipt this Period  
**5200.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**JASON STEIN**

Mailing Address **1943 52ND AVE N**

City **MOORHEAD** State **MN** Zip Code **56560-8810**

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

Name of Employer **BSE** Occupation **SALES**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 14 / 2013**

Transaction ID : **SA11.2853**

Amount of Each Receipt this Period  
**250.00**

CONTRIBUTION

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

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

**5450.00**

14020112404

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

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

FOR LINE NUMBER: PAGE 162 OF 231  
(check only one)  
 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)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**DANIEL S. SULLIVAN**

Mailing Address 12970 MOUNTAIN PL

City ANCHORAGE State AK Zip Code 99516-3186

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
10 / 03 / 2013

Transaction ID : SA11.2303

Amount of Each Receipt this Period  
10400.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DANIEL S. SULLIVAN**

Mailing Address 12970 MOUNTAIN PL

City ANCHORAGE State AK Zip Code 99516-3186

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
10 / 03 / 2013

Transaction ID : SA11.2303B

Amount of Each Receipt this Period  
-2600.00  
CONTRIBUTION

[MEMO ITEM]  
PRESUMPTIVELY REATTRIBUTED AND REDESIGNATED REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**DANIEL S. SULLIVAN**

Mailing Address 12970 MOUNTAIN PL

City ANCHORAGE State AK Zip Code 99516-3186

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
10 / 03 / 2013

Transaction ID : SA11.2349

Amount of Each Receipt this Period  
2600.00  
CONTRIBUTION

[MEMO ITEM]  
PRESUMPTIVELY REATTRIBUTED AND REDESIGNATED REDESIGNATION FROM PRIMA

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

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

10400.00

14020112405

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

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

FOR LINE NUMBER: PAGE 163 OF 231  
(check only one)  
 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)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**DANIEL S. SULLIVAN**

Mailing Address 12970 MOUNTAIN PL

City State Zip Code  
ANCHORAGE AK 99516-3186

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
10 / 03 / 2013

Transaction ID : SA11.2348

Amount of Each Receipt this Period  
7800.00  
CONTRIBUTION

[MEMO ITEM]

**B.** Full Name (Last, First, Middle Initial)  
**DANIEL S. SULLIVAN**

Mailing Address 12970 MOUNTAIN PL

City State Zip Code  
ANCHORAGE AK 99516-3186

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
10 / 03 / 2013

Transaction ID : SA11.2348B

Amount of Each Receipt this Period  
-5200.00  
CONTRIBUTION

[MEMO ITEM]  
PRESUMPTIVELY REATTRIBUTED AND  
REDESIGNATED REATTRIBUTION TO SPOUSE

**C.** Full Name (Last, First, Middle Initial)  
**JULIE FATE SULLIVAN**

Mailing Address 12970 MOUNTAIN PL

City State Zip Code  
ANCHORAGE AK 99516-3186

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

Name of Employer Occupation  
INFORMATION REQUESTED PER BEST EFFC INFORMATION REQUESTED PER BEST EFF

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
5200.00

Date of Receipt  
10 / 03 / 2013

Transaction ID : SA11.2350

Amount of Each Receipt this Period  
5200.00  
CONTRIBUTION

[MEMO ITEM]  
PRESUMPTIVELY REATTRIBUTED AND  
REDESIGNATED REATTRIBUTION FROM SPOUSE

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

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

0.00

14020112406

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

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

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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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)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**FRANK C. SULLIVAN**

Mailing Address 27320 LAKE RD

City BAY VILLAGE	State OH	Zip Code 44140-2070
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer RPM INTERNATIONAL	Occupation CEO
---------------------------------------	-------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt: 10 / 28 / 2013  
Transaction ID : SA11.2821

Amount of Each Receipt this Period  
  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**FRANK C. SULLIVAN**

Mailing Address 27320 LAKE RD

City BAY VILLAGE	State OH	Zip Code 44140-2070
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer RPM INTERNATIONAL	Occupation CEO
---------------------------------------	-------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt: 11 / 19 / 2013  
Transaction ID : SA11.2821B

Amount of Each Receipt this Period  
  
CONTRIBUTION

**[MEMO ITEM]**  
PRESUMPTIVELY REDESIGNATED REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**FRANK C. SULLIVAN**

Mailing Address 27320 LAKE RD

City BAY VILLAGE	State OH	Zip Code 44140-2070
---------------------	-------------	------------------------

FEC ID number of contributing federal political committee.

Name of Employer RPM INTERNATIONAL	Occupation CEO
---------------------------------------	-------------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date

Date of Receipt: 11 / 19 / 2013  
Transaction ID : SA11.2898

Amount of Each Receipt this Period  
  
CONTRIBUTION

**[MEMO ITEM]**  
PRESUMPTIVELY REDESIGNATED REDESIGNATION FROM PRIMARY

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

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

14020112407



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

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

FOR LINE NUMBER: PAGE 165 OF 231

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 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)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>JULIE FATE SULLIVAN</b>		Date of Receipt MM / DD / YYYY 10 / 03 / 2013	
Mailing Address 12970 MOUNTAIN PL		Transaction ID : SA11.2350B	
City ANCHORAGE	State AK	Zip Code 99516-3186	Amount of Each Receipt this Period CONTRIBUTION -2600.00
FEC ID number of contributing federal political committee. C	Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF	[MEMO ITEM] PRESUMPTIVELY REATTRIBUTED AND REDESIGNATED REDESIGNATION TO GENERAL
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) <b>JULIE FATE SULLIVAN</b>		Date of Receipt MM / DD / YYYY 10 / 03 / 2013	
Mailing Address 12970 MOUNTAIN PL		Transaction ID : SA11.2353	
City ANCHORAGE	State AK	Zip Code 99516-3186	Amount of Each Receipt this Period CONTRIBUTION 2600.00
FEC ID number of contributing federal political committee. C	Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF	[MEMO ITEM] PRESUMPTIVELY REATTRIBUTED AND REDESIGNATED REDESIGNATION FROM PRIMAF
Receipt For: 2014 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 5200.00		

Full Name (Last, First, Middle Initial) <b>MICHAEL P. SULLIVAN JR.</b>		Date of Receipt MM / DD / YYYY 12 / 06 / 2013	
Mailing Address 81 WOODLAND CIR		Transaction ID : SA11.3438	
City EDINA	State MN	Zip Code 55424-1448	Amount of Each Receipt this Period CONTRIBUTION 250.00
FEC ID number of contributing federal political committee. C	Name of Employer GRAY PLANT MOODY	Occupation LAWYER	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	250.00
<b>TOTAL</b> This Period (last page this line number only) .....	

14020112408

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

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

FOR LINE NUMBER: PAGE 166 OF 231

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**MRS. SANDRA S. SULLIVAN**

Mailing Address P.O. BOX 777

City: MEDINA State: OH Zip Code: 44258-

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: HOMEMAKER

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 2600.00

Date of Receipt: 12 / 10 / 2013

Transaction ID : SA11.3610

Amount of Each Receipt this Period: 2600.00

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**THOMAS C. SULLIVAN**

Mailing Address PO BOX 777

City: MEDINA State: OH Zip Code: 44258-0777

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5200.00

Date of Receipt: 10 / 21 / 2013

Transaction ID : SA11.2738

Amount of Each Receipt this Period: 5200.00

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**THOMAS C. SULLIVAN**

Mailing Address PO BOX 777

City: MEDINA State: OH Zip Code: 44258-0777

FEC ID number of contributing federal political committee: C

Name of Employer: NONE Occupation: RETIRED

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date: 5200.00

Date of Receipt: 11 / 14 / 2013

Transaction ID : SA11.2738B

Amount of Each Receipt this Period: -5200.00

CONTRIBUTION

**[MEMO ITEM]**  
PRESUMPTIVELY REDESIGNATED  
REDESIGNATION TO GENERAL

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

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

7800.00

14020112409

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

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

FOR LINE NUMBER: PAGE 167 OF 231  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**THOMAS C. SULLIVAN**

Mailing Address **PO BOX 777**

City **MEDINA** State **OH** Zip Code **44258-0777**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 14 / 2013**

Transaction ID : **SA11.2855**

Amount of Each Receipt this Period  
**5200.00**  
 CONTRIBUTION

**[MEMO ITEM]**  
**PRESUMPTIVELY REDESIGNATED REDESIGNATION FROM PRIMARY**

**B.** Full Name (Last, First, Middle Initial)  
**THOMAS C. SULLIVAN**

Mailing Address **PO BOX 777**

City **MEDINA** State **OH** Zip Code **44258-0777**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 14 / 2013**

Transaction ID : **SA11.2855B**

Amount of Each Receipt this Period  
**-5200.00**  
 CONTRIBUTION

**[MEMO ITEM]**  
**PRESUMPTIVELY REDESIGNATED REDESIGNATION TO PRIMARY**

**C.** Full Name (Last, First, Middle Initial)  
**THOMAS C. SULLIVAN**

Mailing Address **PO BOX 777**

City **MEDINA** State **OH** Zip Code **44258-0777**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 14 / 2013**

Transaction ID : **SA11.2856**

Amount of Each Receipt this Period  
**5200.00**  
 CONTRIBUTION

**[MEMO ITEM]**  
**PRESUMPTIVELY REDESIGNATED REDESIGNATION FROM GENERAL**

**SUBTOTAL** of Receipts This Page (optional).....  
**0.00**

**TOTAL** This Period (last page this line number only).....  
**0.00**

14020112410

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

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

FOR LINE NUMBER: PAGE 168 OF 231  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	11d	<input type="checkbox"/>	15
<input type="checkbox"/>	12	<input type="checkbox"/>	13a	<input type="checkbox"/>	13b	<input type="checkbox"/>	14	<input type="checkbox"/>	

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)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**THOMAS C. SULLIVAN**

Mailing Address **PO BOX 777**

City **MEDINA** State **OH** Zip Code **44258-0777**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
MM / DD / YYYY  
**11 / 14 / 2013**

Transaction ID : **SA11.2856B**

Amount of Each Receipt this Period  
**-2600.00**  
CONTRIBUTION

**[MEMO ITEM]**  
PRESUMPTIVELY REDESIGNATED  
REDESIGNATION TO GENERAL

**B.** Full Name (Last, First, Middle Initial)  
**THOMAS C. SULLIVAN**

Mailing Address **PO BOX 777**

City **MEDINA** State **OH** Zip Code **44258-0777**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
MM / DD / YYYY  
**11 / 14 / 2013**

Transaction ID : **SA11.2858**

Amount of Each Receipt this Period  
**2600.00**  
CONTRIBUTION

**[MEMO ITEM]**  
PRESUMPTIVELY REDESIGNATED  
REDESIGNATION FROM PRIMARY

**C.** Full Name (Last, First, Middle Initial)  
**MR. THOMAS C. SULLIVAN**

Mailing Address **P.O. BOX 777**

City **MEDINA** State **OH** Zip Code **44258-**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
MM / DD / YYYY  
**12 / 10 / 2013**

Transaction ID : **SA11.3609**

Amount of Each Receipt this Period  
**2600.00**  
CONTRIBUTION

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

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

**2600.00**

14020112411

**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)	PAGE 169 OF 231
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 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)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**KERMIT S. SUTTON**

Mailing Address **715 10TH STREET SOUTH**

City **NAPLES** State **FL** Zip Code **34102-6725**

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

Name of Employer **SELF-EMPLOYED** Occupation **INVESTOR**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 / 23 / 2013**

Transaction ID : **SA11.4115**

Amount of Each Receipt this Period  
**3000.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**KERMIT S. SUTTON**

Mailing Address **715 10TH STREET SOUTH**

City **NAPLES** State **FL** Zip Code **34102-6725**

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

Name of Employer **SELF-EMPLOYED** Occupation **INVESTOR**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 / 23 / 2013**

Transaction ID : **SA11.4115B**

Amount of Each Receipt this Period  
**-400.00**  
CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION TO GENERAL

**C.** Full Name (Last, First, Middle Initial)  
**KERMIT S. SUTTON**

Mailing Address **715 10TH STREET SOUTH**

City **NAPLES** State **FL** Zip Code **34102-6725**

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

Name of Employer **SELF-EMPLOYED** Occupation **INVESTOR**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **3000.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**12 / 23 / 2013**

Transaction ID : **SA11.4451**

Amount of Each Receipt this Period  
**400.00**  
CONTRIBUTION

**[MEMO ITEM]**  
REDESIGNATION FROM PRIMARY

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

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

**3000.00**

14020112412

**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)	PAGE 170 OF 231
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>A. STEVEN SWARTZMAN</b>			Date of Receipt MM / DD / YYYY 12 / 18 / 2013		
Mailing Address 3621 WYNCOTE LN			<b>Transaction ID : SA11.3531</b>		
City FAIRWAY	State KS	Zip Code 66205-2740	Amount of Each Receipt this Period 100.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer C3 CAPITAL		Occupation FINANCE			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 350.00			

Full Name (Last, First, Middle Initial) <b>B. MR. EARL A. SWEEN</b>			Date of Receipt MM / DD / YYYY 12 / 17 / 2013		
Mailing Address 1400 SPYGLASS LN.			<b>Transaction ID : SA11.3945</b>		
City NAPLES	State FL	Zip Code 34102-	Amount of Each Receipt this Period 500.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer NONE		Occupation RETIRED			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 500.00			

Full Name (Last, First, Middle Initial) <b>C. DAVID TAICLET</b>			Date of Receipt MM / DD / YYYY 12 / 17 / 2013		
Mailing Address 13421 MANCHESTER ROAD, SUITE 204			<b>Transaction ID : SA11.3522</b>		
City SAINT LOUIS	State MO	Zip Code 63131-1741	Amount of Each Receipt this Period 10400.00 CONTRIBUTION		
FEC ID number of contributing federal political committee. C					
Name of Employer 1-800-FLOWERS.COM		Occupation EXECUTIVE			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 10400.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	11000.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020112413

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

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

FOR LINE NUMBER: PAGE 171 OF 231

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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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)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**DAVID TAICLET**

Mailing Address **13421 MANCHESTER ROAD, SUITE 204**

City <b>SAINT LOUIS</b>	State <b>MO</b>	Zip Code <b>63131-1741</b>
----------------------------	--------------------	-------------------------------

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

Name of Employer <b>1-800-FLOWERS.COM</b>	Occupation <b>EXECUTIVE</b>
--	--------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**10400.00**

Date of Receipt  

M M / D D / Y Y Y Y
12 / 17 / 2013

**Transaction ID : SA11.3522B**

Amount of Each Receipt this Period  

-2600.00
----------

**CONTRIBUTION**

**[MEMO ITEM]**  
**REDESIGNATION TO GENERAL**

**B.** Full Name (Last, First, Middle Initial)  
**DAVID TAICLET**

Mailing Address **13421 MANCHESTER ROAD, SUITE 204**

City <b>SAINT LOUIS</b>	State <b>MO</b>	Zip Code <b>63131-1741</b>
----------------------------	--------------------	-------------------------------

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

Name of Employer <b>1-800-FLOWERS.COM</b>	Occupation <b>EXECUTIVE</b>
--	--------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**10400.00**

Date of Receipt  

M M / D D / Y Y Y Y
12 / 17 / 2013

**Transaction ID : SA11.4600**

Amount of Each Receipt this Period  

2600.00
---------

**CONTRIBUTION**

**[MEMO ITEM]**  
**REDESIGNATION FROM PRIMARY**

**C.** Full Name (Last, First, Middle Initial)  
**GLEN A. TAYLOR**

Mailing Address **1 TAYLOR LANE**

City <b>MANKATO</b>	State <b>MN</b>	Zip Code <b>56001-2400</b>
------------------------	--------------------	-------------------------------

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

Name of Employer <b>TAYLOR CORPORATION</b>	Occupation <b>MANAGER</b>
---	------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**5200.00**

Date of Receipt  

M M / D D / Y Y Y Y
12 / 03 / 2013

**Transaction ID : SA11.3123**

Amount of Each Receipt this Period  

2600.00
---------

**CONTRIBUTION**

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

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

2600.00
---------

14020112414

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

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

FOR LINE NUMBER: PAGE 172 OF 231

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**JON THEOBALD**

Mailing Address **157 STONEBRIDGE RD**

City **ST PAUL** State **MN** Zip Code **55118-4481**

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

Name of Employer **MAIRS AND POWER, INC** Occupation **CORPORATE EXECUTIVE**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **750.00**

Date of Receipt  

MM	DD	YYYY
11	20	2013

**Transaction ID : SA11.2912**

Amount of Each Receipt this Period  

250.00
--------

**CONTRIBUTION**

**B.** Full Name (Last, First, Middle Initial)  
**HENRY THIERRY**

Mailing Address **765 EDGEWOOD RD**

City **REDWOOD CITY** State **CA** Zip Code **94062-1813**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **250.00**

Date of Receipt  

MM	DD	YYYY
12	31	2013

**Transaction ID : SA11.4386**

Amount of Each Receipt this Period  

250.00
--------

**CONTRIBUTION**

**C.** Full Name (Last, First, Middle Initial)  
**DAVID R. THIES**

Mailing Address **7250 LEWIS RIDGE PKWY #206**

City **EDINA** State **MN** Zip Code **55439-1938**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  

MM	DD	YYYY
11	07	2013

**Transaction ID : SA11.2845**

Amount of Each Receipt this Period  

5200.00
---------

**CONTRIBUTION**

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

5700.00
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**TOTAL** This Period (last page this line number only).....

14020112415



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

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

FOR LINE NUMBER: PAGE 173 OF 231  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**DAVID R. THIES**

Mailing Address **7250 LEWIS RIDGE PKWY**  
**#206**

City **EDINA** State **MN** Zip Code **55439-1938**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y Y Y  
**11 / 19 / 2013**

Transaction ID : **SA11.2845B**

Amount of Each Receipt this Period  
**-2600.00**  
CONTRIBUTION

**[MEMO ITEM]**  
**PRESUMPTIVELY REDESIGNATED  
REDESIGNATION TO GENERAL**

**B.** Full Name (Last, First, Middle Initial)  
**DAVID R. THIES**

Mailing Address **7250 LEWIS RIDGE PKWY**  
**#206**

City **EDINA** State **MN** Zip Code **55439-1938**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5200.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y Y Y  
**11 / 19 / 2013**

Transaction ID : **SA11.2900**

Amount of Each Receipt this Period  
**2600.00**  
CONTRIBUTION

**[MEMO ITEM]**  
**PRESUMPTIVELY REDESIGNATED  
REDESIGNATION FROM PRIMARY**

**C.** Full Name (Last, First, Middle Initial)  
**JOHN TRACY**

Mailing Address **675 LAURA CT**

City **MENDOTA HEIGHTS** State **MN** Zip Code **55118-1947**

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

Name of Employer **NONE** Occupation **RETIRED**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y Y Y  
**12 / 13 / 2013**

Transaction ID : **SA11.3500**

Amount of Each Receipt this Period  
**500.00**  
CONTRIBUTION

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

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

**500.00**

14020112416

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

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

FOR LINE NUMBER: PAGE 174 OF 231  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**MICHAEL E. TRAEGER**

Mailing Address **7105 ANTRIM CRT**

City **EDINA** State **MN** Zip Code **55439-1702**

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

Name of Employer **SOLUTION ENTERPRISES, INC.** Occupation **CONSULTANT/PRESIDENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
**10 / 21 / 2013**

**Transaction ID : SA11.2727**

Amount of Each Receipt this Period  
**500.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MICHAEL E. TRAEGER**

Mailing Address **7105 ANTRIM CRT**

City **EDINA** State **MN** Zip Code **55439-1702**

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

Name of Employer **SOLUTION ENTERPRISES, INC.** Occupation **CONSULTANT/PRESIDENT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2000.00**

Date of Receipt  
**12 / 26 / 2013**

**Transaction ID : SA11.4126**

Amount of Each Receipt this Period  
**500.00**  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**THOMAS E. TUFT**

Mailing Address **101 CENTRAL PARK WEST**

City **NEW YORK** State **NY** Zip Code **10023-4250**

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

Name of Employer **LAZARD** Occupation **CHAIRMAN, GLOBAL CAPITAL MARKETS**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2600.00**

Date of Receipt  
**12 / 23 / 2013**

**Transaction ID : SA11.4113**

Amount of Each Receipt this Period  
**2600.00**  
CONTRIBUTION

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

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

**3600.00**

14020112417

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

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

FOR LINE NUMBER: PAGE 175 OF 231  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**RICHARD E. UIHLEIN JR.**

Mailing Address **3325 HEISER ST**

City <b>HUDSON</b>	State <b>WI</b>	Zip Code <b>54016-</b>
-----------------------	--------------------	---------------------------

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

Name of Employer <b>ULINE</b>	Occupation <b>BRANCH MANAGER</b>
----------------------------------	-------------------------------------

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**1000.00**

Date of Receipt  

M M M	D D D	Y Y Y Y Y Y
11	12	2013

Transaction ID : **SA11.2852**

Amount of Each Receipt this Period  

<b>1000.00</b>
----------------

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JAMES ULLAND**

Mailing Address **1600 W 22ND ST 377-4698**

City <b>MINNEAPOLIS</b>	State <b>MN</b>	Zip Code <b>55405-2401</b>
----------------------------	--------------------	-------------------------------

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

Name of Employer <b>ULLAND INVESTMENT ADVISORS, INC</b>	Occupation <b>INVESTMENT ADVISOR</b>
--	---

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**750.00**

Date of Receipt  

M M M	D D D	Y Y Y Y Y Y
11	26	2013

Transaction ID : **SA11.3003**

Amount of Each Receipt this Period  

<b>250.00</b>
---------------

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MR. LEE D. VALENTA**

Mailing Address **4701 GOLF TERRACE  
4701 GOLF TER.**

City <b>EDINA</b>	State <b>MN</b>	Zip Code <b>55424-1514</b>
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FEC ID number of contributing federal political committee. **C**

Name of Employer <b>OPTUM, INC</b>	Occupation <b>EXECUTIVE VICE PRESIDENT</b>
---------------------------------------	---

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date  
**350.00**

Date of Receipt  

M M M	D D D	Y Y Y Y Y Y
12	13	2013

Transaction ID : **SA11.3910**

Amount of Each Receipt this Period  

<b>100.00</b>
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CONTRIBUTION

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

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

**1350.00**

14020112418

**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)	PAGE 176 OF 231
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>DAN VAN STEENBURG</b>			Date of Receipt MM / DD / YYYY 10 / 02 / 2013		
Mailing Address 11118 SWEETWATER PATH			Transaction ID : SA11.2096		
City WOODBURY	State MN	Zip Code 55129-5293	Amount of Each Receipt this Period 2500.00		
FEC ID number of contributing federal political committee. C		CONTRIBUTION			
Name of Employer SPIN THE PLANET	Occupation PRESIDENT		Election Cycle-to-Date 2500.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

Full Name (Last, First, Middle Initial) <b>MARK VANNOTE</b>			Date of Receipt MM / DD / YYYY 11 / 13 / 2013		
Mailing Address 2308 OLIVER AVE			Transaction ID : SA11.2836		
City MINNEAPOLIS	State MN	Zip Code 55405-2445	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C		CONTRIBUTION			
Name of Employer SELF	Occupation VC		Election Cycle-to-Date 1000.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

Full Name (Last, First, Middle Initial) <b>MR. LEO P. VARLEY</b>			Date of Receipt MM / DD / YYYY 12 / 18 / 2013		
Mailing Address 226 GROTTO ST. S			Transaction ID : SA11.3971		
City SAINT PAUL	State MN	Zip Code 55105-	Amount of Each Receipt this Period 500.00		
FEC ID number of contributing federal political committee. C		CONTRIBUTION			
Name of Employer INFORMATION REQUESTED PER BEST EFF	Occupation INFORMATION REQUESTED PER BEST EFF		Election Cycle-to-Date 500.00		
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)					

SUBTOTAL of Receipts This Page (optional).....	4000.00
TOTAL This Period (last page this line number only).....	

14020112419

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

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

FOR LINE NUMBER: PAGE 177 OF 231  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**PAUL MARTIN WALSER**

Mailing Address 165 GROVE LANE E

City WAYZATA State MN Zip Code 55391-1618

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

Name of Employer WALSER AUTOMOTIVE Occupation CEO

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2600.00

Date of Receipt  
MM / DD / YYYY  
10 / 25 / 2013

Transaction ID : SA11.2714

Amount of Each Receipt this Period  
2600.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DENNIS WALSH**

Mailing Address 1354 REST POINT CIRCLE

City ORONO State MN Zip Code 55364-9618

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

Name of Employer WALSH PARTNERS Occupation SALES

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
MM / DD / YYYY  
11 / 05 / 2013

Transaction ID : SA11.2779

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DENNIS WALSH**

Mailing Address 1354 REST POINT CIRCLE

City ORONO State MN Zip Code 55364-9618

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

Name of Employer WALSH PARTNERS Occupation SALES

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2000.00

Date of Receipt  
MM / DD / YYYY  
12 / 16 / 2013

Transaction ID : SA11.3519

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

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

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

4600.00

14020112420

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

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

FOR LINE NUMBER: PAGE 178 OF 231

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>ROBERT WEINSTINE</b>			Date of Receipt MM / DD / YYYY 11 / 26 / 2013		
Mailing Address <b>225 S 6TH STREET SUITE 3500</b>			<b>Transaction ID : SA11.2937</b>		
City <b>MINNEAPOLIS</b>	State <b>MN</b>	Zip Code <b>55402-4629</b>	Amount of Each Receipt this Period CONTRIBUTION 500.00		
FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer <b>WINTHROP WEINSTINE</b>			
Occupation <b>ATTORNEY</b>		Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Election Cycle-to-Date 1000.00					

Full Name (Last, First, Middle Initial) <b>JAY WEIR</b>			Date of Receipt MM / DD / YYYY 11 / 29 / 2013		
Mailing Address <b>208 NORTH BROAD STREET</b>			<b>Transaction ID : SA11.2950</b>		
City <b>MANKATO</b>	State <b>MN</b>	Zip Code <b>56001-3520</b>	Amount of Each Receipt this Period CONTRIBUTION 500.00		
FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer <b>WEIR INSURANCE</b>			
Occupation <b>INSURANCE</b>		Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Election Cycle-to-Date 1025.00					

Full Name (Last, First, Middle Initial) <b>PAUL WELLE</b>			Date of Receipt MM / DD / YYYY 10 / 02 / 2013		
Mailing Address <b>2496 POND CIR W</b>			<b>Transaction ID : SA11.2218</b>		
City <b>MENDOTA HEIGHTS</b>	State <b>MN</b>	Zip Code <b>55120-1939</b>	Amount of Each Receipt this Period CONTRIBUTION 250.00		
FEC ID number of contributing federal political committee. <b>C</b>		Name of Employer <b>NONE</b>			
Occupation <b>RETIRED</b>		Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)			
Election Cycle-to-Date 250.00					

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1250.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020112421

**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)	PAGE 179 OF 231
<input checked="" type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a
<input type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14
<input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>JOHN WEREMY</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 15 / 2013		
Mailing Address <b>6606 S 172ND AVE</b>			<b>Transaction ID : SA11.2589</b>		
City <b>OMAHA</b>	State <b>NE</b>	Zip Code <b>68135-3250</b>	Amount of Each Receipt this Period CONTRIBUTION 250.00		
FEC ID number of contributing federal political committee. <b>C</b>					
Name of Employer <b>SELF</b>		Occupation <b>PODIATRIST</b>			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 250.00			

Full Name (Last, First, Middle Initial) <b>MR. F. T. WEYERHAEUSER</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 12 / 2013		
Mailing Address <b>30 7TH ST E STE 2000</b>			<b>Transaction ID : SA11.3790</b>		
City <b>ST PAUL</b>	State <b>MN</b>	Zip Code <b>55101-</b>	Amount of Each Receipt this Period CONTRIBUTION 250.00		
FEC ID number of contributing federal political committee. <b>C</b>					
Name of Employer <b>NONE</b>		Occupation <b>RETIRED</b>			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 750.00			

Full Name (Last, First, Middle Initial) <b>MR. F. T. WEYERHAEUSER</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 12 / 20 / 2013		
Mailing Address <b>30 7TH ST E STE 2000</b>			<b>Transaction ID : SA11.4092</b>		
City <b>ST PAUL</b>	State <b>MN</b>	Zip Code <b>55101-</b>	Amount of Each Receipt this Period CONTRIBUTION 500.00		
FEC ID number of contributing federal political committee. <b>C</b>					
Name of Employer <b>NONE</b>		Occupation <b>RETIRED</b>			
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Election Cycle-to-Date 750.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	

14020112422

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

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

FOR LINE NUMBER: PAGE 180 OF 231  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**BENSON WHITNEY**

Mailing Address **5171 MANNING PLACE NW**

City **WASHINGTON** State **DC** Zip Code **20016-5328**

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

Name of Employer **ARGUS MANAGMENT** Occupation **CONSULTANT**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
MM / DD / YYYY  
**12 / 05 / 2013**

Transaction ID : **SA11.3278**

Amount of Each Receipt this Period  
**1000.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**MRS. GEORGIA WIESTER**

Mailing Address **7760 SANTA ROSA RD**

City **BUELLTON** State **CA** Zip Code **93427-**

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

Name of Employer **NONE** Occupation **HOMEMAKER**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **500.00**

Date of Receipt  
MM / DD / YYYY  
**12 / 17 / 2013**

Transaction ID : **SA11.4012**

Amount of Each Receipt this Period  
**500.00**  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**MARC WOLPOW**

Mailing Address **101 HUNTINGTON AVENUE**

City **BOSTON** State **MA** Zip Code **02199-7603**

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

Name of Employer **AUDAX GROUP** Occupation **CO-CEO**

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
MM / DD / YYYY  
**11 / 15 / 2013**

Transaction ID : **SA11.2867**

Amount of Each Receipt this Period  
**2500.00**  
CONTRIBUTION

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

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

**4000.00**

14020112423



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

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

FOR LINE NUMBER: PAGE 181 OF 231  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**JOHN E. WREN**

Mailing Address **2261 NORTHRIDGE AVE CIR**

City **STILLWATER** State **MN** Zip Code **55082-2506**

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

Name of Employer **LAKEVIEW MOTOR EXPRESS** Occupation **PRESIDENT & CEO**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **12 / 06 / 2013**  
Transaction ID : **SA11.3439**

Amount of Each Receipt this Period  
**1000.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**JUDY WRIGHT**

Mailing Address **4601 GULF SHORE BLVD N UNIT 16**

City **NAPLES** State **FL** Zip Code **34103-2214**

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

Name of Employer **INFORMATION REQUESTED PER BEST EFF** Occupation **INFORMATION REQUESTED PER BEST EFF**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt **12 / 31 / 2013**  
Transaction ID : **SA11.4372**

Amount of Each Receipt this Period  
**1000.00**  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**DANIEL A. YARANO**

Mailing Address **2169 EDGCUMBE ROAD**

City **ST. PAUL** State **MN** Zip Code **55116-2474**

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

Name of Employer **FREDRIKSON & BYRON, P.A** Occupation **ATTORNEY**

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date **440.53**

Date of Receipt **10 / 10 / 2013**  
Transaction ID : **SA11.4411**

Amount of Each Receipt this Period  
**190.53**  
CONTRIBUTION

**IN-KIND: EVENT CATERING**

**SUBTOTAL** of Receipts This Page (optional)..... **2190.53**

**TOTAL** This Period (last page this line number only)..... **2190.53**

14020112424

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

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

FOR LINE NUMBER: PAGE 182 OF 231  
(check only one)  
 11a     11b     11c     11d  
 12     13a     13b     14     15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**WILSON, ELSER, MOSKOWITZ, EDELMAN & DICKER LLP**

Mailing Address 150 EAST 42ND ST

City NEW YORK State NY Zip Code 10017-5612

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

Name of Employer Occupation

Receipt For: 2014  
 Primary     General  
 Other (specify)

Election Cycle-to-Date 2600.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 06 / 2013

Transaction ID : SA11.3442

Amount of Each Receipt this Period  
 2600.00  
 CONTRIBUTION

NO ITEMIZATION NECESSARY

**B.** 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  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

Amount of Each Receipt this Period

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

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

2600.00

621949.19

14020112425

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

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

FOR LINE NUMBER: PAGE 183 OF 231  
(check only one)  
 11a  11b  11c  11d  
 12  13a  13b  14  15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial)  
**A. 21ST CENTURY MAJORITY FUND**

Mailing Address **6065 ROSWELL RD NE**  
**#2274**

City **ATLANTA** State **GA** Zip Code **30328-4011**

FEC ID number of contributing federal political committee. **C C00361956**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **1000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**12 / 26 / 2013**

Transaction ID : **SA11.4181**

Amount of Each Receipt this Period  
**1000.00**  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. CITIZENS FOR PROSPERITY IN AMERICA TODAY PAC**

Mailing Address **228 S WASHINGTON ST**  
**SUITE 115**

City **ALEXANDRIA** State **VA** Zip Code **22314-5404**

FEC ID number of contributing federal political committee. **C C00491654**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**12 / 30 / 2013**

Transaction ID : **SA11.4232**

Amount of Each Receipt this Period  
**5000.00**  
 CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. COMMON VALUES PAC**

Mailing Address **901 N WASHINGTON ST**  
**SUITE 700**

City **ALEXANDRIA** State **VA** Zip Code **22314-1535**

FEC ID number of contributing federal political committee. **C C00442368**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y Y Y  
**12 / 23 / 2013**

Transaction ID : **SA11.4114**

Amount of Each Receipt this Period  
**5000.00**  
 CONTRIBUTION

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

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

**11000.00**

14020112426

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

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

FOR LINE NUMBER: PAGE 184 OF 231  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**DENALI LEADERSHIP PAC**

Mailing Address 2755 ILLIAMNA

City ANCHORAGE State AK Zip Code 99517-1217

FEC ID number of contributing federal political committee. **C** C00438291

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 27 / 2013

Transaction ID : SA11.4189

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**DIRIGO PAC**

Mailing Address PO BOX 1355

City ALEXANDRIA State VA Zip Code 22313-1355

FEC ID number of contributing federal political committee. **C** C00391797

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 26 / 2013

Transaction ID : SA11.4180

Amount of Each Receipt this Period  
2500.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**FREE STATE PAC**

Mailing Address PO BOX 2712

City TOPEKA State KS Zip Code 66601-2712

FEC ID number of contributing federal political committee. **C** C00455717

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 5000.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
12 / 26 / 2013

Transaction ID : SA11.4179

Amount of Each Receipt this Period  
5000.00  
CONTRIBUTION

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

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

8500.00

14020112427

**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)	PAGE 185 OF 231
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 15	
	<input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**FREEDOM FUND**

Mailing Address **701 8TH ST NW**  
**SUITE 500**

City **WASHINGTON** State **DC** Zip Code **20001-3965**

FEC ID number of contributing federal political committee. **C00390674**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 27 / 2013**

Transaction ID : **SA11.4188**

Amount of Each Receipt this Period  
**5000.00**  
 CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**HEARTLAND VALUES PAC**

Mailing Address **PO BOX 505**

City **SIOUX FALLS** State **SD** Zip Code **57101-0505**

FEC ID number of contributing federal political committee. **C00409003**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**12 / 31 / 2013**

Transaction ID : **SA11.4362**

Amount of Each Receipt this Period  
**5000.00**  
 CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**NEXT CENTURY FUND**

Mailing Address **116 S ROYAL ST**

City **ALEXANDRIA** State **VA** Zip Code **22314-3328**

FEC ID number of contributing federal political committee. **C00343947**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary  General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **10000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 20 / 2013**

Transaction ID : **SA11.2964**

Amount of Each Receipt this Period  
**5000.00**  
 CONTRIBUTION

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

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

**15000.00**

14020112428

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

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

FOR LINE NUMBER: PAGE 186 OF 231  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial)  
**A. NEXT CENTURY FUND**

Mailing Address 116 S ROYAL ST

City ALEXANDRIA	State VA	Zip Code 22314-3328
--------------------	-------------	------------------------

FEC ID number of contributing federal political committee. **C** C00343947

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  

M M M	D D D	Y Y Y Y Y Y
11	20	2013

Transaction ID : SA11.2965

Amount of Each Receipt this Period  
5000.00  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**B. PROMOTING OUR REPUBLICAN TEAM PAC**

Mailing Address 9856 ARCHER LANE

City DUBLIN	State OH	Zip Code 43017-
----------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C** C00440032

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  

M M M	D D D	Y Y Y Y Y Y
10	03	2013

Transaction ID : SA11.2290

Amount of Each Receipt this Period  
5000.00  
CONTRIBUTION

Full Name (Last, First, Middle Initial)  
**C. PROMOTING OUR REPUBLICAN TEAM PAC**

Mailing Address 9856 ARCHER LANE

City DUBLIN	State OH	Zip Code 43017-
----------------	-------------	--------------------

FEC ID number of contributing federal political committee. **C** C00440032

Name of Employer	Occupation
------------------	------------

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
10000.00

Date of Receipt  

M M M	D D D	Y Y Y Y Y Y
12	31	2013

Transaction ID : SA11.4396

Amount of Each Receipt this Period  
5000.00  
CONTRIBUTION

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

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

15000.00

14020112429

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

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 187 OF 231  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input type="checkbox"/> 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)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**RFW PAC**

Mailing Address **PO BOX 1281**

City **TUPELO** State **MS** Zip Code **38802-1281**

FEC ID number of contributing federal political committee. **C C00368696**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **2500.00**

Date of Receipt  
**12 / 26 / 2013**

**Transaction ID : SA11.4182**

Amount of Each Receipt this Period  
**2500.00**  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**ROCK CITY PAC**

Mailing Address **1015 STONEBRIDGE PARK DR**

City **FRANKLIN** State **TN** Zip Code **37069-4001**

FEC ID number of contributing federal political committee. **C C00436410**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
**12 / 23 / 2013**

**Transaction ID : SA11.4110**

Amount of Each Receipt this Period  
**5000.00**  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**RPM INTERNATIONAL INC./MANUFACTURING IN AMERICA**

Mailing Address **PO BOX 777**

City **MEDINA** State **OH** Zip Code **44258-0777**

FEC ID number of contributing federal political committee. **C C00402081**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **5000.00**

Date of Receipt  
**10 / 28 / 2013**

**Transaction ID : SA11.2822**

Amount of Each Receipt this Period  
**5000.00**  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**12500.00**

14020112430

**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)	PAGE 188 OF 231
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input checked="" type="checkbox"/> 11c <input type="checkbox"/> 11d <input type="checkbox"/> 12 <input type="checkbox"/> 13a <input type="checkbox"/> 13b <input type="checkbox"/> 14 <input type="checkbox"/> 15	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**TCF PAC**

Mailing Address **801 MARQUETTE AVE**

City **MINNEAPOLIS** State **MN** Zip Code **55402-**

FEC ID number of contributing federal political committee. **C00218263**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 17 / 2013

Transaction ID : **SA11.3979**

Amount of Each Receipt this Period  
**5000.00**

CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**THE ALAMO PAC**

Mailing Address **919 CONGRES AVE. STE. 1400**

City **AUSTIN** State **TX** Zip Code **78701-**

FEC ID number of contributing federal political committee. **C00387464**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **5000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 10 / 2013

Transaction ID : **SA11.3727**

Amount of Each Receipt this Period  
**5000.00**

CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**THE FREEDOM PROJECT**

Mailing Address **320 FIRST STREET SE**

City **WASHINGTON** State **DC** Zip Code **20003-1838**

FEC ID number of contributing federal political committee. **C00305805**

Name of Employer \_\_\_\_\_ Occupation \_\_\_\_\_

Receipt For: 2014  
 Primary     General  
 Other (specify) \_\_\_\_\_

Election Cycle-to-Date **10000.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 05 / 2013

Transaction ID : **SA11.2261**

Amount of Each Receipt this Period  
**5000.00**

CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**15000.00**

14020112431



**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 189 OF 231  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
			<input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**THE FREEDOM PROJECT**

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003-1838

FEC ID number of contributing federal political committee. **C** C00305805

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 10000.00

Date of Receipt 10 / 05 / 2013  
Transaction ID : SA11.2262

Amount of Each Receipt this Period  
5000.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
**THE HAWKEYE PAC**

Mailing Address PO BOX 192

City DES MOINES State IA Zip Code 50301-0192

FEC ID number of contributing federal political committee. **C** C00379479

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 1000.00

Date of Receipt 12 / 30 / 2013  
Transaction ID : SA11.4231

Amount of Each Receipt this Period  
1000.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
**THE HOME DEPOT INC. PAC**

Mailing Address 1155 F STREET NW  
SUITE 400

City WASHINGTON State DC Zip Code 20004-1346

FEC ID number of contributing federal political committee. **C** C00284885

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date 2500.00

Date of Receipt 12 / 20 / 2013  
Transaction ID : SA11.4097

Amount of Each Receipt this Period  
2500.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional)..... 8500.00

**TOTAL** This Period (last page this line number only)..... 85500.00

14020112432

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 190 OF 231

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input checked="" type="checkbox"/> 14	<input type="checkbox"/> 15
------------------------------	------------------------------	------------------------------	------------------------------	-----------------------------	------------------------------	------------------------------	--	-----------------------------

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**US BANCORP**

Mailing Address **U.S. BANCORP CENTER**  
**800 NICOLLET MALL**

City **MINNEAPOLIS** State **MN** Zip Code **55402**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify)

Election Cycle-to-Date  
**215.41**

Date of Receipt

**10 / 18 / 2013**

Transaction ID : SA14.277

Amount of Each Receipt this Period

**25.00**

**BANK FEE REVERSED**

**B.** 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

**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).....

**25.00**

**TOTAL** This Period (last page this line number only).....

**25.00**

14020112433

**SCHEDULE A (FEC Form 3)  
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 191 OF 231	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A.** Full Name (Last, First, Middle Initial)  
**US BANCORP**

Mailing Address **U.S. BANCORP CENTER**  
**800 NICOLLET MALL**

City **MINNEAPOLIS** State **MN** Zip Code **55402**

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For: 2014  
 Primary  General  
 Other (specify)

Election Cycle-to-Date **215.41**

Date of Receipt  
MM / DD / YYYY  
**10 / 31 / 2013**

Transaction ID : **SA15.252**

Amount of Each Receipt this Period  
**60.81**

**INTEREST**

**B.** 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  
MM / DD / YYYY

Amount of Each Receipt this Period

**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  
MM / DD / YYYY

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>60.81</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>60.81</b>

14020112434

**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)	PAGE 192 OF 231
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A. SCOTT ANDERSON**

Full Name (Last, First, Middle Initial)  
Mailing Address 3844 BIG TIMBER TRL

City EAGAN State MN Zip Code 55123

Purpose of Disbursement REIMBURSEMENT (SEE BELOW)

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

Date of Disbursement: 10 / 31 / 2013

Amount of Each Disbursement this Period: 844.99

Transaction ID: SB17.I244

**B. MINNEAPOLIS CLUB**

Full Name (Last, First, Middle Initial)  
Mailing Address 729 2ND AVE S

City MINNEAPOLIS State MN Zip Code 55401

Purpose of Disbursement FOOD & BEVERAGES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

Date of Disbursement: 09 / 04 / 2013

Amount of Each Disbursement this Period: 844.99

Transaction ID: SB17.I245

[MEMO ITEM]  
ANDERSON, 10/31

**C. MRS. JULIE BECKER**

Full Name (Last, First, Middle Initial)  
Mailing Address 16 HILL FARM CIRCLE

City NORTH OAKS State MN Zip Code 55127-2007

Purpose of Disbursement IN-KIND CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

Date of Disbursement: 10 / 03 / 2013

Amount of Each Disbursement this Period: 213.47

Transaction ID: SB17.4349

IN-KIND: EVENT CATERING

**SUBTOTAL** of Disbursements This Page (optional) ..... 1058.46

**TOTAL** This Period (last page this line number only) .....

14020112435

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>A. BRIAN C. BEH</b>		Date of Disbursement MM / DD / YYYY 11 / 02 / 2013
Mailing Address 8662 GREAT WATERS ALCOVE 8662 GREAT WATERS ALCOVE		Amount of Each Disbursement this Period 839.00 Transaction ID : SB17.4350
City EDEN PRAIRIE	State MN Zip Code 55347-3432	
Purpose of Disbursement IN-KIND CONTRIBUTION		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	IN-KIND: EVENT CATERING
State: District:		

Full Name (Last, First, Middle Initial) <b>B. GEORGE BILICIC</b>		Date of Disbursement MM / DD / YYYY 10 / 31 / 2013
Mailing Address C/O KRISTIN MOLLOY AYCO 321 BROADWAY		Amount of Each Disbursement this Period 3270.06 Transaction ID : SB17.I246
City SARATOGA SPRINGS	State NY Zip Code 12866	
Purpose of Disbursement REIMBURSEMENT (SEE BELOW)		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. LINKS CLUB</b>		Date of Disbursement MM / DD / YYYY 09 / 11 / 2013
Mailing Address 36 E 62ND ST		Amount of Each Disbursement this Period 3270.06 Transaction ID : SB17.I247
City NEW YORK	State NY Zip Code 10065	
Purpose of Disbursement FOOD & BEVERAGES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	4109.06
<b>TOTAL</b> This Period (last page this line number only) .....	

14020112436

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>A. JOANN CRONIN</b>		Date of Disbursement MM / DD / YYYY 11 / 19 / 2013
Mailing Address 4607 BROWDALE AVE		Amount of Each Disbursement this Period 571.59 Transaction ID : SB17.4354
City EDINA	State MN	
Zip Code 55424-1144	Purpose of Disbursement IN-KIND CONTRIBUTION	IN-KIND: EVENT CATERING AND EVENT SUPPLIE
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. JOE CRONIN</b>		Date of Disbursement MM / DD / YYYY 11 / 19 / 2013
Mailing Address 4607 BROWDALE AVE		Amount of Each Disbursement this Period 571.59 Transaction ID : SB17.4353
City EDINA	State MN	
Zip Code 55424-1144	Purpose of Disbursement IN-KIND CONTRIBUTION	IN-KIND: EVENT CATERING AND EVENT SUPPLIE
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. JON CROW</b>		Date of Disbursement MM / DD / YYYY 11 / 02 / 2013
Mailing Address 601 CARLSON PARKWAY, #800		Amount of Each Disbursement this Period 840.01 Transaction ID : SB17.4351
City MINNETONKA	State MN	
Zip Code 55305-5229	Purpose of Disbursement IN-KIND CONTRIBUTION	IN-KIND: EVENT CATERING
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	1983.19
<b>TOTAL</b> This Period (last page this line number only) .....	

14020112437

**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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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>A. TOM ERICKSON</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2013
Mailing Address 1894 SAPHIRE PT		Amount of Each Disbursement this Period 319.64 Transaction ID : SB17.I259
City EAGAN	State MN	
Purpose of Disbursement REIMBURSEMENT NO ITEMIZATION NECESSARY		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>B. TOM ERICKSON</b>		Date of Disbursement MM / DD / YYYY 10 / 02 / 2013
Mailing Address 1894 SAPHIRE PT		Amount of Each Disbursement this Period 8554.09 Transaction ID : SB17.I352
City EAGAN	State MN	
Purpose of Disbursement PAYROLL		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

Full Name (Last, First, Middle Initial) <b>C. TOM ERICKSON</b>		Date of Disbursement MM / DD / YYYY 10 / 02 / 2013
Mailing Address 1894 SAPHIRE PT		Amount of Each Disbursement this Period 1591.13 Transaction ID : SB17.I353
City EAGAN	State MN	
Purpose of Disbursement SALARY		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: _____	District: _____	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	10464.86
<b>TOTAL</b> This Period (last page this line number only) .....	

14020112438

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A. TOM ERICKSON**

Full Name (Last, First, Middle Initial)  
Mailing Address 1894 SAPPHIRE PT

City EAGAN State MN Zip Code 55122-8805

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 11 / 2013

Amount of Each Disbursement this Period

1591.12

Transaction ID : SB17.I354

**B. TOM ERICKSON**

Full Name (Last, First, Middle Initial)  
Mailing Address 1894 SAPPHIRE PT

City EAGAN State MN Zip Code 55122-8805

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
10 / 25 / 2013

Amount of Each Disbursement this Period

1591.11

Transaction ID : SB17.I355

**C. TOM ERICKSON**

Full Name (Last, First, Middle Initial)  
Mailing Address 1894 SAPPHIRE PT

City EAGAN State MN Zip Code 55122-8805

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY  
11 / 08 / 2013

Amount of Each Disbursement this Period

1591.12

Transaction ID : SB17.I356

**SUBTOTAL** of Disbursements This Page (optional) .....

4773.35

**TOTAL** This Period (last page this line number only) .....

14020112439



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 197 OF 231  
(check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A. TOM ERICKSON**

Full Name (Last, First, Middle Initial)  
Mailing Address 1894 SAPPHERE PT

City EAGAN State MN Zip Code 55122-8805

Purpose of Disbursement SALARY

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 22 / 2013

Amount of Each Disbursement this Period: 1591.13

Transaction ID : SB17.I357

Category/Type

**B. TOM ERICKSON**

Full Name (Last, First, Middle Initial)  
Mailing Address 1894 SAPPHERE PT

City EAGAN State MN Zip Code 55122-8805

Purpose of Disbursement SALARY

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 06 / 2013

Amount of Each Disbursement this Period: 1591.12

Transaction ID : SB17.I358

Category/Type

**C. TOM ERICKSON**

Full Name (Last, First, Middle Initial)  
Mailing Address 1894 SAPPHERE PT

City EAGAN State MN Zip Code 55122-8805

Purpose of Disbursement SALARY

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 20 / 2013

Amount of Each Disbursement this Period: 1591.12

Transaction ID : SB17.I359

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... 4773.37

**TOTAL** This Period (last page this line number only) .....

14020112440

**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)	PAGE 198 OF 231
	<input checked="" type="checkbox"/> 17 20a <input type="checkbox"/> 18 20b <input type="checkbox"/> 19a 20c <input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A. BRADLEY HEROLD**

Full Name (Last, First, Middle Initial)  
Mailing Address 54 CHELSEA DR

City CRAWFORDVILLE State FL Zip Code 32327-1831

Purpose of Disbursement REIMBURSEMENT (SEE BELOW)

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 12 / 03 / 2013

Amount of Each Disbursement this Period: 1519.00

Transaction ID : SB17.I331

Category/Type

**B. AIRTRAN**

Full Name (Last, First, Middle Initial)  
Mailing Address 200 GLEN EAGLES CT STE C

City CARROLLTON State GA Zip Code 30117

Purpose of Disbursement AIRFARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 12 / 03 / 2013

Amount of Each Disbursement this Period: 301.60

Transaction ID : SB17.I449

[MEMO ITEM]

Category/Type

**C. EMBASSY SUITES**

Full Name (Last, First, Middle Initial)  
Mailing Address 755 CROSSOVER LN

City MEMPHIS State TN Zip Code 38117

Purpose of Disbursement LODGING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  
 Other (specify)

State: District:

Date of Disbursement: 12 / 03 / 2013

Amount of Each Disbursement this Period: 515.67

Transaction ID : SB17.I446

[MEMO ITEM]

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 1519.00

**TOTAL** This Period (last page this line number only).....

14020112441

**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)

PAGE 199 OF 231

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial)  
**A. UBER TECHNOLOGIES, INC.**

Mailing Address 182 HOWARD STREET # 8

City State Zip Code  
SAN FRANCISCO CA 94105

Purpose of Disbursement  
TRAVEL EXPENSE

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 03 / 2013

Amount of Each Disbursement this Period

238.18
--------

Transaction ID : SB17.I450

[MEMO ITEM]

Full Name (Last, First, Middle Initial)  
**B. BRADLEY HEROLD**

Mailing Address 54 CHELSEA DR

City State Zip Code  
CRAWFORDVILLE FL 32327-1831

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 02 / 2013

Amount of Each Disbursement this Period

2104.72
---------

Transaction ID : SB17.I360

Full Name (Last, First, Middle Initial)  
**C. BRADLEY HEROLD**

Mailing Address 54 CHELSEA DR

City State Zip Code  
CRAWFORDVILLE FL 32327-1831

Purpose of Disbursement  
SALARY

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 11 / 2013

Amount of Each Disbursement this Period

2104.72
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Transaction ID : SB17.I361

**SUBTOTAL** of Disbursements This Page (optional) .....

4209.44
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**TOTAL** This Period (last page this line number only) .....

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14020112442

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>A. BRADLEY HEROLD</b>		Date of Disbursement MM / DD / YYYY 10 / 25 / 2013
Mailing Address 54 CHELSEA DR		Amount of Each Disbursement this Period 3937.72 Transaction ID : SB17.I362
City CRAWFORDVILLE	State FL	
Purpose of Disbursement SALARY		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. BRADLEY HEROLD</b>		Date of Disbursement MM / DD / YYYY 11 / 08 / 2013
Mailing Address 54 CHELSEA DR		Amount of Each Disbursement this Period 2104.72 Transaction ID : SB17.I363
City CRAWFORDVILLE	State FL	
Purpose of Disbursement SALARY		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. BRADLEY HEROLD</b>		Date of Disbursement MM / DD / YYYY 11 / 22 / 2013
Mailing Address 54 CHELSEA DR		Amount of Each Disbursement this Period 2104.72 Transaction ID : SB17.I364
City CRAWFORDVILLE	State FL	
Purpose of Disbursement SALARY		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

8147.16

14020112443

**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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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>A. BRADLEY HEROLD</b>		Date of Disbursement MM / DD / YYYY 12 / 06 / 2013
Mailing Address 54 CHELSEA DR		Amount of Each Disbursement this Period 2104.72 Transaction ID : SB17.I365
City CRAWFORDVILLE	State FL	
Purpose of Disbursement SALARY		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. BRADLEY HEROLD</b>		Date of Disbursement MM / DD / YYYY 12 / 20 / 2013
Mailing Address 54 CHELSEA DR		Amount of Each Disbursement this Period 2104.72 Transaction ID : SB17.I366
City CRAWFORDVILLE	State FL	
Purpose of Disbursement SALARY		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. MR. GREGORY LARSEN</b>		Date of Disbursement MM / DD / YYYY 11 / 02 / 2013
Mailing Address 7808 CREEKRIDGE CR		Amount of Each Disbursement this Period 839.00 Transaction ID : SB17.4352
City EDINA	State MN	
Purpose of Disbursement IN-KIND CONTRIBUTION		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	IN-KIND: EVENT CATERING
State:	District:	

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

5048.44

14020112444

**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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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial)  
**A. MICHAEL D. MCHUGH**

Mailing Address **GMB MEZZANINE CAPITAL PARTNERS  
50 S 6TH ST STE 1460**

City **MINNEAPOLIS** State **MN** Zip Code **55402**

Purpose of Disbursement  
**REIMBURSEMENT (SEE BELOW)**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
**11 / 13 / 2013**

Amount of Each Disbursement this Period  
**670.73**

Transaction ID : **SB17.I313**

Category/  
Type

Full Name (Last, First, Middle Initial)  
**B. MINNEAPOLIS CLUB**

Mailing Address **729 2ND AVE S**

City **MINNEAPOLIS** State **MN** Zip Code **55401**

Purpose of Disbursement  
**EVENT CATERING**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
**11 / 13 / 2013**

Amount of Each Disbursement this Period  
**670.73**

Transaction ID : **SB17.I444**

[MEMO ITEM]

Category/  
Type

Full Name (Last, First, Middle Initial)  
**C. RICHARD NELSON**

Mailing Address **1975 PORTLAND AVE**

City **SAINT PAUL** State **MN** Zip Code **55104**

Purpose of Disbursement  
**FINANCE CONSULTING**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
**10 / 03 / 2013**

Amount of Each Disbursement this Period  
**10000.00**

Transaction ID : **SB17.I140**

Category/  
Type

**SUBTOTAL** of Disbursements This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

**10670.73**

14020112445

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>A. RICHARD NELSON</b>		Date of Disbursement MM / DD / YYYY 12 / 06 / 2013
Mailing Address 1975 PORTLAND AVE		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.I326
City SAINT PAUL	State MN Zip Code 55104	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. ANNE NEU</b>		Date of Disbursement MM / DD / YYYY 12 / 06 / 2013
Mailing Address 36306 HEMINGWAY AVE		Amount of Each Disbursement this Period 1272.41 Transaction ID : SB17.I379
City NORTH BRANCH	State MN Zip Code 55056-5976	
Purpose of Disbursement SALARY		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ANNE NEU</b>		Date of Disbursement MM / DD / YYYY 12 / 06 / 2013
Mailing Address 36306 HEMINGWAY AVE		Amount of Each Disbursement this Period 1272.40 Transaction ID : SB17.I380
City NORTH BRANCH	State MN Zip Code 55056-5976	
Purpose of Disbursement SALARY		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

7544.81

14020112446

**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)		PAGE 204 OF 231	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>A. ANNE NEU</b>		Date of Disbursement MM / DD / YYYY 12 / 20 / 2013
Mailing Address 36306 HEMINGWAY AVE		Amount of Each Disbursement this Period 1272.41 Transaction ID : SB17.I381
City NORTH BRANCH	State MN Zip Code 55056-5976	
Purpose of Disbursement SALARY	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. WILLIAM F NYE</b>		Date of Disbursement MM / DD / YYYY 10 / 25 / 2013
Mailing Address 2140 CHARLTON RD		Amount of Each Disbursement this Period 907.96 Transaction ID : SB17.I374
City SUNFISH LAKE	State MN Zip Code 55118	
Purpose of Disbursement SALARY	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. WILLIAM F NYE</b>		Date of Disbursement MM / DD / YYYY 11 / 08 / 2013
Mailing Address 2140 CHARLTON RD		Amount of Each Disbursement this Period 907.95 Transaction ID : SB17.I375
City SUNFISH LAKE	State MN Zip Code 55118	
Purpose of Disbursement SALARY	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	3088.32
<b>TOTAL</b> This Period (last page this line number only) .....	

14020112447



**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>A. WILLIAM F NYE</b>		Date of Disbursement						
Mailing Address 2140 CHARLTON RD		<table border="1"><tr><td>M M</td><td>D D</td><td>Y Y Y Y</td></tr><tr><td>11</td><td>22</td><td>2013</td></tr></table>	M M	D D	Y Y Y Y	11	22	2013
M M	D D	Y Y Y Y						
11	22	2013						
City SUNFISH LAKE	State MN	Zip Code 55118						
Purpose of Disbursement SALARY		Amount of Each Disbursement this Period <table border="1"><tr><td>907.97</td></tr></table>	907.97					
907.97								
Candidate Name		Transaction ID : SB17.I376						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)							
State: District:	Category/ Type							

Full Name (Last, First, Middle Initial) <b>B. WILLIAM F NYE</b>		Date of Disbursement						
Mailing Address 2140 CHARLTON RD		<table border="1"><tr><td>M M</td><td>D D</td><td>Y Y Y Y</td></tr><tr><td>12</td><td>06</td><td>2013</td></tr></table>	M M	D D	Y Y Y Y	12	06	2013
M M	D D	Y Y Y Y						
12	06	2013						
City SUNFISH LAKE	State MN	Zip Code 55118						
Purpose of Disbursement SALARY		Amount of Each Disbursement this Period <table border="1"><tr><td>907.96</td></tr></table>	907.96					
907.96								
Candidate Name		Transaction ID : SB17.I377						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)							
State: District:	Category/ Type							

Full Name (Last, First, Middle Initial) <b>C. WILLIAM F NYE</b>		Date of Disbursement						
Mailing Address 2140 CHARLTON RD		<table border="1"><tr><td>M M</td><td>D D</td><td>Y Y Y Y</td></tr><tr><td>12</td><td>20</td><td>2013</td></tr></table>	M M	D D	Y Y Y Y	12	20	2013
M M	D D	Y Y Y Y						
12	20	2013						
City SUNFISH LAKE	State MN	Zip Code 55118						
Purpose of Disbursement SALARY		Amount of Each Disbursement this Period <table border="1"><tr><td>907.95</td></tr></table>	907.95					
907.95								
Candidate Name		Transaction ID : SB17.I378						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)							
State: District:	Category/ Type							

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<table border="1"><tr><td>2723.88</td></tr></table>	2723.88
2723.88		
<b>TOTAL</b> This Period (last page this line number only).....		

14820112448

**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)		PAGE 206 OF 231	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>A. KEVIN POINDEXTER</b>		Date of Disbursement MM / DD / YYYY 12 / 20 / 2013
Mailing Address 7532 AUTO CLUB CR		Amount of Each Disbursement this Period 812.62 Transaction ID : SB17.I382
City BLOOMINGTON	State MN Zip Code 55438	
Purpose of Disbursement SALARY	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. KEVIN POINDEXTER</b>		Date of Disbursement MM / DD / YYYY 12 / 20 / 2013
Mailing Address 7532 AUTO CLUB CR		Amount of Each Disbursement this Period 1500.09 Transaction ID : SB17.I383
City BLOOMINGTON	State MN Zip Code 55438	
Purpose of Disbursement SALARY	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CENTURYLINK</b>		Date of Disbursement MM / DD / YYYY 11 / 25 / 2013
Mailing Address 100 CENTURYLINK DR		Amount of Each Disbursement this Period 295.10 Transaction ID : SB17.I320
City MONROE	State LA Zip Code 71203	
Purpose of Disbursement PHONE SERVICE	Candidate Name	Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2607.81
<b>TOTAL</b> This Period (last page this line number only).....	

14020112449

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 207 OF 231  
(check only one)  
 17     18     19a     19b  
 20a     20b     20c     21

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A. CERIDIAN**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 10989

City NEWARK State NJ Zip Code 07193

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
10 / 03 / 2013

Amount of Each Disbursement this Period  
19948.91

Transaction ID : SB17.I338

Category/Type

**B. CERIDIAN**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 10989

City NEWARK State NJ Zip Code 07193

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
10 / 10 / 2013

Amount of Each Disbursement this Period  
2163.48

Transaction ID : SB17.I339

Category/Type

**C. CERIDIAN**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 10989

City NEWARK State NJ Zip Code 07193

Purpose of Disbursement  
PAYROLL TAXES

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
10 / 24 / 2013

Amount of Each Disbursement this Period  
5369.58

Transaction ID : SB17.I341

Category/Type

**SUBTOTAL** of Disbursements This Page (optional)..... 27481.97

**TOTAL** This Period (last page this line number only).....

14020112450

**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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<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>A. CERIDIAN</b>		Date of Disbursement MM / DD / YYYY 11 / 12 / 2013
Mailing Address PO BOX 10989		Amount of Each Disbursement this Period 3797.06 Transaction ID : SB17.I342
City NEWARK	State NJ	
Zip Code 07193	Purpose of Disbursement PAYROLL TAXES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. CERIDIAN</b>		Date of Disbursement MM / DD / YYYY 11 / 22 / 2013
Mailing Address PO BOX 10989		Amount of Each Disbursement this Period 3750.44 Transaction ID : SB17.I344
City NEWARK	State NJ	
Zip Code 07193	Purpose of Disbursement PAYROLL TAXES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. CERIDIAN</b>		Date of Disbursement MM / DD / YYYY 12 / 05 / 2013
Mailing Address PO BOX 10989		Amount of Each Disbursement this Period 4277.10 Transaction ID : SB17.I345
City NEWARK	State NJ	
Zip Code 07193	Purpose of Disbursement PAYROLL TAXES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

**SUBTOTAL** of Disbursements This Page (optional).....  
**TOTAL** This Period (last page this line number only).....

11824.60

14020112451

**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)	PAGE 209 OF 231			
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21	

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A. CERIDIAN**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 10989

City NEWARK State NJ Zip Code 07193

Purpose of Disbursement PAYROLL TAXES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 12 / 20 / 2013

Amount of Each Disbursement this Period: 5590.76

Transaction ID : SB17.1351

**B. CMDI - CRIMSON**

Full Name (Last, First, Middle Initial)  
Mailing Address 1593 SPRING HILL RD SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement ONLINE FUNDRAISING/CREDIT CARD PROCESSING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 01 / 2013

Amount of Each Disbursement this Period: 2153.18

Transaction ID : SB17.1188

**C. CMDI - CRIMSON**

Full Name (Last, First, Middle Initial)  
Mailing Address 1593 SPRING HILL RD SUITE 400

City TYSONS CORNER State VA Zip Code 22182-2245

Purpose of Disbursement DATABASE SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 29 / 2013

Amount of Each Disbursement this Period: 1639.25

Transaction ID : SB17.1258

**SUBTOTAL** of Disbursements This Page (optional)..... 9383.19

**TOTAL** This Period (last page this line number only).....

14020112452

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>A. CMDI - CRIMSON</b>		Date of Disbursement MM / DD / YYYY 11 / 26 / 2013	
Mailing Address 1593 SPRING HILL RD SUITE 400		Amount of Each Disbursement this Period 609.75	
City TYSONS CORNER	State VA	Zip Code 22182-2245	Transaction ID : SB17.I311
Purpose of Disbursement ONLINE FUNDRAISING		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. CMDI - CRIMSON</b>		Date of Disbursement MM / DD / YYYY 12 / 31 / 2013	
Mailing Address 1593 SPRING HILL RD SUITE 400		Amount of Each Disbursement this Period 1732.85	
City TYSONS CORNER	State VA	Zip Code 22182-2245	Transaction ID : SB17.I403
Purpose of Disbursement COMPLIANCE SOFTWARE		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) <b>C. CSM PROPERTIES, INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2013	
Mailing Address 500 WASHINGTON AVE S		Amount of Each Disbursement this Period 2275.00	
City MINNEAPOLIS	State MN	Zip Code 55415-1149	Transaction ID : SB17.I189
Purpose of Disbursement RENT		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

4617.60

14020112453

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>A. CSM PROPERTIES, INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 29 / 2013
Mailing Address 500 WASHINGTON AVE S		Amount of Each Disbursement this Period 2275.00 Transaction ID : SB17.I265
City MINNEAPOLIS	State MN	
Zip Code 55415-1149	Purpose of Disbursement RENT	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. CSM PROPERTIES, INC.</b>		Date of Disbursement MM / DD / YYYY 11 / 29 / 2013
Mailing Address 500 WASHINGTON AVE S		Amount of Each Disbursement this Period 2275.00 Transaction ID : SB17.I322
City MINNEAPOLIS	State MN	
Zip Code 55415-1149	Purpose of Disbursement RENT	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. FREEDOM FOUNDATION OF MINNESOTA</b>		Date of Disbursement MM / DD / YYYY 11 / 21 / 2013
Mailing Address 520 NICOLLETT MALL STE 510		Amount of Each Disbursement this Period 500.00 Transaction ID : SB17.I319
City MINNEAPOLIS	State MN	
Zip Code 55402	Purpose of Disbursement USED FURNITURE	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

5050.00
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14020112454

**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)		PAGE 212 OF 231	
	<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A. HARRIS MEDIA, LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 611 S CONGRESS AVE  
SUTIE 400

City Austin State TX Zip Code 78704-8706

Purpose of Disbursement  
WEB CONSULTING AND ADVERTISING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 03 / 2013

Amount of Each Disbursement this Period: 6527.53

Transaction ID: SB17.I138

**B. HARRIS MEDIA, LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 611 S CONGRESS AVE  
SUTIE 400

City Austin State TX Zip Code 78704-8706

Purpose of Disbursement  
ONLINE CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 29 / 2013

Amount of Each Disbursement this Period: 6535.62

Transaction ID: SB17.I266

**C. HARRIS MEDIA, LLC**

Full Name (Last, First, Middle Initial)  
Mailing Address 611 S CONGRESS AVE  
SUTIE 400

City Austin State TX Zip Code 78704-8706

Purpose of Disbursement  
ONLINE STRATEGY CONSULTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 29 / 2013

Amount of Each Disbursement this Period: 15086.43

Transaction ID: SB17.I323

**SUBTOTAL** of Disbursements This Page (optional)..... 28149.58

**TOTAL** This Period (last page this line number only).....

14020112455



**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
20a	20b	20c	21

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial)  
**A. HISPANIC REPUBLICAN ASSEMBLY OF MINNESOTA**

Mailing Address **1213 PARTRIDGE DRIVE**

City **PLAINFIELD** State **IL** Zip Code **60586**

Purpose of Disbursement  
**EVENT SPONSORSHIP**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
**10 / 11 / 2013**

Amount of Each Disbursement this Period  
**500.00**

Transaction ID : **SB17.I261**

Category/Type

Full Name (Last, First, Middle Initial)  
**B. HOLTZMAN VOGEL JOSEFIK PLLC**

Mailing Address **45 N HILL DR**

City **WARRENTON** State **VA** Zip Code **20186-2678**

Purpose of Disbursement  
**LEGAL SERVICES**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
**10 / 29 / 2013**

Amount of Each Disbursement this Period  
**4704.64**

Transaction ID : **SB17.I267**

Category/Type

Full Name (Last, First, Middle Initial)  
**C. HOLTZMAN VOGEL JOSEFIK PLLC**

Mailing Address **45 N HILL DR**

City **WARRENTON** State **VA** Zip Code **20186-2678**

Purpose of Disbursement  
**LEGAL SERVICES**

Candidate Name

Office Sought:  House  Senate  President

Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
**12 / 11 / 2013**

Amount of Each Disbursement this Period  
**1500.00**

Transaction ID : **SB17.I324**

Category/Type

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

**6704.64**

14020112456

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>A. HOLTZMAN VOGEL JOSEFIK PLLC</b>		Date of Disbursement MM / DD / YYYY 12 / 12 / 2013	
Mailing Address 45 N HILL DR		Amount of Each Disbursement this Period 1500.00	
City WARRENTON	State VA	Zip Code 20186-2678	Transaction ID : SB17.I350
Purpose of Disbursement LEGAL SERVICES		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) <b>B. LAZARD MIDDLE MARKET</b>		Date of Disbursement MM / DD / YYYY 10 / 29 / 2013	
Mailing Address 225 S 6TH ST 46TH FLOOR		Amount of Each Disbursement this Period 1000.00	
City MINNEAPOLIS	State MN	Zip Code 55402-4601	Transaction ID : SB17.I411
Purpose of Disbursement SCHEDULING		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

Full Name (Last, First, Middle Initial) <b>C. MERCHANT E-SOLUTIONS</b>		Date of Disbursement MM / DD / YYYY 10 / 03 / 2013	
Mailing Address 3600 BRIDGE PKWY SUITE 102		Amount of Each Disbursement this Period 1266.10	
City REDWOOD CITY	State CA	Zip Code 94065	Transaction ID : SB17.I251
Purpose of Disbursement CC PROCESSING		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State:	District:		

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

3766.10

14020112457

**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)

PAGE 215 OF 231

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial)  
**A. MERCHANT E-SOLUTIONS**

Mailing Address 3600 BRIDGE PKWY  
SUITE 102

City State Zip Code  
REDWOOD CITY CA 94065

Purpose of Disbursement  
CC PROCESSING

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
11 / 04 / 2013

Amount of Each Disbursement this Period

1137.54

Transaction ID : SB17.I305

Full Name (Last, First, Middle Initial)  
**B. MERCHANT E-SOLUTIONS**

Mailing Address 3600 BRIDGE PKWY  
SUITE 102

City State Zip Code  
REDWOOD CITY CA 94065

Purpose of Disbursement  
CC PROCESSING

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For: 2014  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
12 / 03 / 2013

Amount of Each Disbursement this Period

727.64

Transaction ID : SB17.I330

Full Name (Last, First, Middle Initial)  
**C. NORTH OAKS GOLF CLUB**

Mailing Address 54 E OAKS RD

City State Zip Code  
NORTH OAKS MN 55127

Purpose of Disbursement  
FOOD & BEVERAGES

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President  
Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y  
10 / 31 / 2013

Amount of Each Disbursement this Period

713.46

Transaction ID : SB17.I248

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

2578.64

14020112458

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>A. NORTH ROCK REPORTS LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 29 / 2013
Mailing Address 45 NORTH HILL DRIVE SUITE 100		Amount of Each Disbursement this Period 3146.00 Transaction ID : SB17.I268
City WARRENTON	State VA	
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. NORTH ROCK REPORTS LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 21 / 2013
Mailing Address 45 NORTH HILL DRIVE SUITE 100		Amount of Each Disbursement this Period 1671.48 Transaction ID : SB17.I318
City WARRENTON	State VA	
Purpose of Disbursement COMPLIANCE CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. OFFICE MAX</b>		Date of Disbursement MM / DD / YYYY 11 / 01 / 2013
Mailing Address 263 SHUMAN BLVD		Amount of Each Disbursement this Period 273.14 Transaction ID : SB17.I293
City NAPERVILLE	State IL	
Purpose of Disbursement OFFICE SUPPLIES		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	5090.62
<b>TOTAL</b> This Period (last page this line number only).....	

14020112459

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>A. OFFICE MAX</b>		Date of Disbursement MM / DD / YYYY 11 / 18 / 2013
Mailing Address 263 SHUMAN BLVD		Amount of Each Disbursement this Period 301.61 Transaction ID : SB17.I302
City NAPERVILLE	State IL	
Zip Code 60563-8147	Purpose of Disbursement OFFICE SUPPLIES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B. PINNACLE DIRECT, INC.</b>		Date of Disbursement MM / DD / YYYY 10 / 01 / 2013
Mailing Address 15260 113TH ST N		Amount of Each Disbursement this Period 17130.01 Transaction ID : SB17.I134
City STILLWATER	State MN	
Zip Code 55082-9575	Purpose of Disbursement DIRECT MAIL SERVICES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C. PINNACLE DIRECT, INC.</b>		Date of Disbursement MM / DD / YYYY 11 / 05 / 2013
Mailing Address 15260 113TH ST N		Amount of Each Disbursement this Period 4035.27 Transaction ID : SB17.I271
City STILLWATER	State MN	
Zip Code 55082-9575	Purpose of Disbursement DIRECT MAIL SERVICES	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	21466.89
<b>TOTAL</b> This Period (last page this line number only).....	

14020112460

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>A. PINNACLE DIRECT, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 13 / 2013	
Mailing Address 15260 113TH ST N		Amount of Each Disbursement this Period 31931.14	
City STILLWATER	State MN	Zip Code 55082-9575	Transaction ID : SB17.I314
Purpose of Disbursement DIRECT MAIL SERVICES		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. PINNACLE DIRECT, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 11 / 29 / 2013	
Mailing Address 15260 113TH ST N		Amount of Each Disbursement this Period 29240.90	
City STILLWATER	State MN	Zip Code 55082-9575	Transaction ID : SB17.I321
Purpose of Disbursement DIRECT MAIL SERVICES		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. PINNACLE DIRECT, INC.</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 02 / 2013	
Mailing Address 15260 113TH ST N		Amount of Each Disbursement this Period 11245.42	
City STILLWATER	State MN	Zip Code 55082-9575	Transaction ID : SB17.I325
Purpose of Disbursement DIRECT MAIL SERVICES		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	72417.46
<b>TOTAL</b> This Period (last page this line number only).....	

14020112461

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A. PIRYX**

Full Name (Last, First, Middle Initial)

Mailing Address 144 2ND ST

City SAN FRANCISCO State CA Zip Code 94105-3718

Purpose of Disbursement  
CC TRANSACTION FEES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
10 / 11 / 2013

Amount of Each Disbursement this Period: 2019.00

Transaction ID : SB17.I410

Category/Type

**B. RAPIT PRINTING**

Full Name (Last, First, Middle Initial)

Mailing Address 1415 1ST AVE NW

City NEW BRIGHTON State MN Zip Code 55112-1904

Purpose of Disbursement  
BUMPER STICKERS

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
10 / 01 / 2013

Amount of Each Disbursement this Period: 1760.11

Transaction ID : SB17.I135

Category/Type

**C. REALM PRODUCTIONS**

Full Name (Last, First, Middle Initial)

Mailing Address 7132 SHADY OAK RD

City EDEN PRAIRIE State MN Zip Code 55344

Purpose of Disbursement  
PRINTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: M M / D D / Y Y Y Y  
11 / 07 / 2013

Amount of Each Disbursement this Period: 2659.67

Transaction ID : SB17.I273

Category/Type

**SUBTOTAL** of Disbursements This Page (optional) ..... 6438.78

**TOTAL** This Period (last page this line number only) .....

14020112462

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>A. RIZZO DUKES GROUP LLC</b>		Date of Disbursement MM / DD / YYYY 11 / 13 / 2013
Mailing Address 1316 ALEXANDRIA AVE		Amount of Each Disbursement this Period 3000.00 Transaction ID : SB17.I315
City ALEXANDRIA	State VA	
Purpose of Disbursement FUNDRAISING CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. SOMETHING ELSE STRATEGIES, LLC</b>		Date of Disbursement MM / DD / YYYY 10 / 29 / 2013
Mailing Address 112 LANTERN RIDGE DR		Amount of Each Disbursement this Period 5000.00 Transaction ID : SB17.I270
City EASLEY	State SC	
Purpose of Disbursement COMMUNICATIONS CONSULTING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. SUN COUNTRY AIRLINES</b>		Date of Disbursement MM / DD / YYYY 12 / 04 / 2013
Mailing Address 1300 MENDOTA HEIGHTS ROAD		Amount of Each Disbursement this Period 282.80 Transaction ID : SB17.I334
City MENDOTA HEIGHTS	State MN	
Purpose of Disbursement TRAVEL - AIRFARE		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	8282.80
<b>TOTAL</b> This Period (last page this line number only) .....	

14020112463



**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>A. TOWN &amp; COUNTRY CLUB</b>		Date of Disbursement							
Mailing Address 300 MISSISSIPPI RIVER BLVD N		<table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td>04</td> <td>2013</td> </tr> </table>		M M	D D	Y Y Y Y	11	04	2013
M M	D D	Y Y Y Y							
11	04	2013							
City SAINT PAUL	State MN	Zip Code 55104	Amount of Each Disbursement this Period <table border="1"><tr><td>1772.05</td></tr></table>	1772.05					
1772.05									
Purpose of Disbursement FOOD & BEVERAGES		Category/Type							
Candidate Name		Transaction ID : SB17.I296							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)								
State: District:									

Full Name (Last, First, Middle Initial) <b>B. UNITED STATES POST OFFICE</b>		Date of Disbursement							
Mailing Address INDUSTRIAL STATION		<table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>10</td> <td>03</td> <td>2013</td> </tr> </table>		M M	D D	Y Y Y Y	10	03	2013
M M	D D	Y Y Y Y							
10	03	2013							
City SAINT PAUL	State MN	Zip Code 55104	Amount of Each Disbursement this Period <table border="1"><tr><td>268.00</td></tr></table>	268.00					
268.00									
Purpose of Disbursement POST OFFICE BOX RENEWAL FEES		Category/Type							
Candidate Name		Transaction ID : SB17.I137							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)								
State: District:									

Full Name (Last, First, Middle Initial) <b>C. USBANK</b>		Date of Disbursement							
Mailing Address 80 S 8TH ST STE 224		<table border="1"> <tr> <td>M M</td> <td>D D</td> <td>Y Y Y Y</td> </tr> <tr> <td>11</td> <td>18</td> <td>2013</td> </tr> </table>		M M	D D	Y Y Y Y	11	18	2013
M M	D D	Y Y Y Y							
11	18	2013							
City MINNEAPOLIS	State MN	Zip Code 55402	Amount of Each Disbursement this Period <table border="1"><tr><td>11527.65</td></tr></table>	11527.65					
11527.65									
Purpose of Disbursement CREDIT CARD BILL		Category/Type							
Candidate Name		Transaction ID : SB17.I292							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)								
State: District:									

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<table border="1"><tr><td>13567.70</td></tr></table>	13567.70
13567.70		
<b>TOTAL</b> This Period (last page this line number only).....	<table border="1"><tr><td></td></tr></table>	

14020112464

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>A. AT&amp;T</b>		Date of Disbursement MM / DD / YYYY 11 / 18 / 2013
Mailing Address 208 S AKARD ST		Amount of Each Disbursement this Period 557.04
City DALLAS	State TX	
Zip Code 75202	Purpose of Disbursement TELEPHONE SERVICE	Transaction ID : SB17.I439
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>B. BEST BUY</b>		Date of Disbursement MM / DD / YYYY 11 / 18 / 2013
Mailing Address 7601 PENN AVE S		Amount of Each Disbursement this Period 365.25
City MINNEAPOLIS	State MN	
Zip Code 55423	Purpose of Disbursement OFFICE EQUIPMENT	Transaction ID : SB17.I443
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

Full Name (Last, First, Middle Initial) <b>C. CMDI - CRIMSON</b>		Date of Disbursement MM / DD / YYYY 11 / 18 / 2013
Mailing Address 1593 SPRING HILL RD SUITE 400		Amount of Each Disbursement this Period 2500.00
City TYSONS CORNER	State VA	
Zip Code 22182-2245	Purpose of Disbursement COMPLIANCE SOFTWARE	Transaction ID : SB17.I437
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	[MEMO ITEM]
State: District:		

SUBTOTAL of Disbursements This Page (optional).....	0.00
TOTAL This Period (last page this line number only).....	

14020112465

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A. DELTA AIR LINES, INC.**

Full Name (Last, First, Middle Initial)  
Mailing Address 1030 DELTA BLVD

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement  
AIRFARE

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
11 / 18 / 2013

Amount of Each Disbursement this Period  
3611.50

Transaction ID : SB17.I434

[MEMO ITEM]

**B. FEDEX OFFICE**

Full Name (Last, First, Middle Initial)  
Mailing Address 1344 TOWN CENTRE DR

City EAGAN State MN Zip Code 55123-2310

Purpose of Disbursement  
SHIPPING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
11 / 18 / 2013

Amount of Each Disbursement this Period  
425.55

Transaction ID : SB17.I441

[MEMO ITEM]

**C. FOUR SEASONS**

Full Name (Last, First, Middle Initial)  
Mailing Address 2800 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20007

Purpose of Disbursement  
LODGING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement  
MM / DD / YYYY  
11 / 18 / 2013

Amount of Each Disbursement this Period  
687.30

Transaction ID : SB17.I440

[MEMO ITEM]

**SUBTOTAL** of Disbursements This Page (optional)..... 0.00

**TOTAL** This Period (last page this line number only).....

14020112466

**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)

PAGE 224 OF 231

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>A. OFFICE MAX</b>		Date of Disbursement MM / DD / YYYY 11 / 18 / 2013
Mailing Address 263 SHUMAN BLVD		Amount of Each Disbursement this Period 820.88
City NAPERVILLE	State IL	
Zip Code 60563-8147	Purpose of Disbursement OFFICE SUPPLIES	Transaction ID : SB17.I442
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. REALM PRODUCTIONS</b>		Date of Disbursement MM / DD / YYYY 11 / 18 / 2013
Mailing Address 7132 SHADY OAK RD		Amount of Each Disbursement this Period 1353.71
City EDEN PRAIRIE	State MN	
Zip Code 55344	Purpose of Disbursement MEDIA CONSULTING	Transaction ID : SB17.I438
Candidate Name	Category/ Type	[MEMO ITEM]
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. USPS</b>		Date of Disbursement MM / DD / YYYY 10 / 21 / 2013
Mailing Address 475 L'ENFANT PLZ		Amount of Each Disbursement this Period 203.95
City WASHINGTON	State DC	
Zip Code 20260	Purpose of Disbursement POSTAGE	Transaction ID : SB17.I250
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	203.95
<b>TOTAL</b> This Period (last page this line number only) .....	

14020112467

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial)

**A. USPS**

Mailing Address 475 L'ENFANT PLZ

Date of Disbursement

M M / D D / Y Y Y Y
11 / 11 / 2013

City State Zip Code  
WASHINGTON DC 20260

Amount of Each Disbursement this Period

1000.00
---------

Purpose of Disbursement  
POSTAGE

--

Transaction ID : SB17.I291

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**B. USPS**

Mailing Address 475 L'ENFANT PLZ

Date of Disbursement

M M / D D / Y Y Y Y
12 / 09 / 2013

City State Zip Code  
WASHINGTON DC 20260

Amount of Each Disbursement this Period

1500.00
---------

Purpose of Disbursement  
POSTAGE

--

Transaction ID : SB17.I391

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

**C. KRISTEN SHEEHAN**

Mailing Address 1117 MACEY WAY

Date of Disbursement

M M / D D / Y Y Y Y
10 / 02 / 2013

City State Zip Code  
STILLWATER MN 55082

Amount of Each Disbursement this Period

8659.00
---------

Purpose of Disbursement  
SALARY

--

Transaction ID : SB17.I367

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

**SUBTOTAL** of Disbursements This Page (optional).....

11159.00
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**TOTAL** This Period (last page this line number only).....

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14020112468

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

**A. KRISTEN SHEEHAN**

Full Name (Last, First, Middle Initial)

Mailing Address 1117 MACEY WAY

City STILLWATER State MN Zip Code 55082

Purpose of Disbursement SALARY

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 02 / 2013

Amount of Each Disbursement this Period: 2692.66

Transaction ID : SB17.I368

**B. KRISTEN SHEEHAN**

Full Name (Last, First, Middle Initial)

Mailing Address 1117 MACEY WAY

City STILLWATER State MN Zip Code 55082

Purpose of Disbursement SALARY

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 25 / 2013

Amount of Each Disbursement this Period: 2692.65

Transaction ID : SB17.I369

**C. KRISTEN SHEEHAN**

Full Name (Last, First, Middle Initial)

Mailing Address 1117 MACEY WAY

City STILLWATER State MN Zip Code 55082

Purpose of Disbursement SALARY

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 08 / 2013

Amount of Each Disbursement this Period: 2692.66

Transaction ID : SB17.I370

**SUBTOTAL** of Disbursements This Page (optional)..... 8077.97

**TOTAL** This Period (last page this line number only).....

14020112469

**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)

<input checked="" type="checkbox"/> 17 20a	<input type="checkbox"/> 18 20b	<input type="checkbox"/> 19a 20c	<input type="checkbox"/> 19b 21
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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>A. KRISTEN SHEEHAN</b>		Date of Disbursement MM / DD / YYYY 11 / 22 / 2013
Mailing Address 1117 MACEY WAY		Amount of Each Disbursement this Period 2692.67
City STILLWATER	State MN	
Zip Code 55082	Purpose of Disbursement SALARY	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. KRISTEN SHEEHAN</b>		Date of Disbursement MM / DD / YYYY 12 / 06 / 2013
Mailing Address 1117 MACEY WAY		Amount of Each Disbursement this Period 2692.65
City STILLWATER	State MN	
Zip Code 55082	Purpose of Disbursement SALARY	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. KRISTEN SHEEHAN</b>		Date of Disbursement MM / DD / YYYY 12 / 20 / 2013
Mailing Address 1117 MACEY WAY		Amount of Each Disbursement this Period 2692.66
City STILLWATER	State MN	
Zip Code 55082	Purpose of Disbursement SALARY	Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State:	District:	

**SUBTOTAL** of Disbursements This Page (optional).....

**TOTAL** This Period (last page this line number only).....

8077.98
---------

14020112470

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>A. SAMUEL L WINTER</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 4312 LINDEN HILLS BLVD APT 203		Amount of Each Disbursement this Period 526.35
City MINNEAPOLIS	State MN	
Zip Code 55410	Purpose of Disbursement SALARY	Transaction ID : SB17.I384
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. SAMUEL L WINTER</b>		Date of Disbursement M M / D D / Y Y Y Y 12 / 20 / 2013
Mailing Address 4312 LINDEN HILLS BLVD APT 203		Amount of Each Disbursement this Period 956.84
City MINNEAPOLIS	State MN	
Zip Code 55410	Purpose of Disbursement SALARY	Transaction ID : SB17.I385
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. AMERICAN EXPRESS</b>		Date of Disbursement M M / D D / Y Y Y Y 10 / 07 / 2013
Mailing Address 200 VESEY ST		Amount of Each Disbursement this Period 1782.70
City NEW YORK	State NY	
Zip Code 10281-1013	Purpose of Disbursement CC PROCESSING	Transaction ID : SB17.I253
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	3265.89
<b>TOTAL</b> This Period (last page this line number only).....	

14020112471



**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>A. AMERICAN EXPRESS</b>		Date of Disbursement
Mailing Address 200 VESEY ST		<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
City NEW YORK	State NY	Zip Code 10281-1013
Purpose of Disbursement CC PROCESSING	<input type="text" value="Category/Type"/>	Amount of Each Disbursement this Period <input type="text" value="3677.49"/>
Candidate Name		Transaction ID : SB17.I306
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. AMERICAN EXPRESS</b>		Date of Disbursement
Mailing Address 200 VESEY ST		<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
City NEW YORK	State NY	Zip Code 10281-1013
Purpose of Disbursement CC PROCESSING	<input type="text" value="Category/Type"/>	Amount of Each Disbursement this Period <input type="text" value="274.85"/>
Candidate Name		Transaction ID : SB17.I335
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. ANDRICAN &amp; PATTEN, PA</b>		Date of Disbursement
Mailing Address 6600 CITY WEST PKWY SUITE 201		<input type="text" value="MM"/> / <input type="text" value="DD"/> / <input type="text" value="YYYY"/>
City EDEN PRIARIE	State MN	Zip Code 55344
Purpose of Disbursement ACCOUNTING	<input type="text" value="Category/Type"/>	Amount of Each Disbursement this Period <input type="text" value="5000.00"/>
Candidate Name		Transaction ID : SB17.I263
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	<input type="text" value="8952.34"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text" value=""/>

14020112472

**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)

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 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.

NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial)  
**A. ARENA COMMUNICATIONS**

Mailing Address 1780 SEQUOIA VISTA CIRCLE

City SALT LAKE CITY State UT Zip Code 84104

Purpose of Disbursement PRINTING SERVICES

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 01 / 2013

Amount of Each Disbursement this Period: 472.50

Transaction ID : SB17.1136

Full Name (Last, First, Middle Initial)  
**B. ARENA COMMUNICATIONS**

Mailing Address 1780 SEQUOIA VISTA CIRCLE

City SALT LAKE CITY State UT Zip Code 84104

Purpose of Disbursement PRINTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 10 / 29 / 2013

Amount of Each Disbursement this Period: 2225.00

Transaction ID : SB17.1264

Full Name (Last, First, Middle Initial)  
**C. ARENA COMMUNICATIONS**

Mailing Address 1780 SEQUOIA VISTA CIRCLE

City SALT LAKE CITY State UT Zip Code 84104

Purpose of Disbursement PRINTING

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify)

State: District:

Date of Disbursement: 11 / 07 / 2013

Amount of Each Disbursement this Period: 1705.00

Transaction ID : SB17.1272

**SUBTOTAL** of Disbursements This Page (optional) ..... 4402.50

**TOTAL** This Period (last page this line number only) ..... 343682.08

14020112473

**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)

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)  
**McFadden for Senate**

Full Name (Last, First, Middle Initial) <b>A. CD6 GOP FEDERAL COMMITTEE</b>		Date of Disbursement MM / DD / YYYY 11 / 21 / 2013
Mailing Address 614 5TH AVE S		Amount of Each Disbursement this Period 425.00 Transaction ID : SB21.I317
City SARTELL	State MN	
Zip Code 56377	Purpose of Disbursement CONTRIBUTION	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Disbursement MM / DD / YYYY
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code	Purpose of Disbursement	Category/ Type
Candidate Name	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	425.00
<b>TOTAL</b> This Period (last page this line number only).....	425.00

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NANCY ERICKSON  
SECRETARY

DANA K. MCCALLUM  
SUPERINTENDENT  
HART SENATE OFFICE BUILDING  
SUITE 232  
WASHINGTON, DC 20510-7116  
PHONE: (202) 224-0322

# United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:

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Date of Receipt

USPS FIRST CLASS MAIL \_\_\_\_\_  
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USPS REGISTERED/CERTIFIED \_\_\_\_\_  
Postmark **1/31/14**

USPS PRIORITY MAIL \_\_\_\_\_  
Postmark

DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

### OVERNIGHT DELIVERY SERVICE:

	SHIPPING DATE	NEXT BUSINESS DAY DELIVERY
FEDERAL EXPRESS	_____	<input type="checkbox"/>
UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

RECEIVED FROM FEDERAL ELECTION COMMISSION \_\_\_\_\_  
Date of Receipt

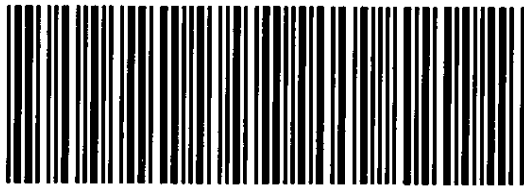
POSTMARK ILLEGIBLE  NO POSTMARK

FAX \_\_\_\_\_  
Date of Receipt

OTHER \_\_\_\_\_  
Date of Receipt or Postmark

PREPARER **DH** DATE PREPARED **2-5-14**

14020112476



14020112477