

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**  
**SEVENTH CONGRESSIONAL DISTRICT REPUBLICAN PARTY OF MINNESOTA**

ADDRESS (number and street) **1811 COUNTY HIGHWAY 111**  
Check if different than previously reported. (ACC) **FERGUS FALLS MN 56537**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C C00380873** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  2022 through  /  /  2022

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 **NANSON, TIMOTHY, J, ,**

Signature of Treasurer **NANSON, TIMOTHY, J, ,** [Electronically Filed] Date  /  /  2022

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**SEVENTH CONGRESSIONAL DISTRICT REPUBLICAN PARTY OF MINNESOTA**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2022"/>	<input type="text" value="1054.46"/>	<input type="text" value="1054.46"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="8925.58"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="24950.00"/>	<input type="text" value="35607.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="33875.58"/>	<input type="text" value="36661.46"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="33775.00"/>	<input type="text" value="36560.88"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="100.58"/>	<input type="text" value="100.58"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

Write or Type Committee Name

**SEVENTH CONGRESSIONAL DISTRICT REPUBLICAN PARTY OF MINNESOTA**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A).....	18000.00	18725.00
(ii) Unitemized .....	0.00	4353.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	18000.00	23078.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	6950.00	12529.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	24950.00	35607.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	24950.00	35607.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	24950.00	35607.00

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	5475.00	8260.88
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	5475.00	8260.88
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	28300.00	28300.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	33775.00	36560.88
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	33775.00	36560.88

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	24950.00	35607.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	24950.00	35607.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	5475.00	8260.88
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	5475.00	8260.88

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

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

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

NAME OF COMMITTEE (In Full)  
**SEVENTH CONGRESSIONAL DISTRICT REPUBLICAN PARTY OF MINNESOTA**

**A. MERICKEL, THOMAS, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 423 THUMPER LODGE RD  
 City OTTERTAIL State MN Zip Code 56571  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TAYLOR CORP Occupation (for Individual) CSO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 02 / 2022  
**Transaction ID : SA11AI.4380**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

**B. NELSON, KENNETH, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 219 RIVERVIEW RD  
 City OTTERTAIL State MN Zip Code 56571  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) KLN BRANDS Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 10000.00

Date of Receipt 09 / 02 / 2022  
**Transaction ID : SA11AI.4384**  
 Amount of Each Receipt this Period 10000.00  
 Memo Item

**C. ROSEN, TOM, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO BOX 933  
 City FAIRMONT State MN Zip Code 56031  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ROSEN'S DIVERSIFIED INC Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 7500.00

Date of Receipt 09 / 02 / 2022  
**Transaction ID : SA11AI.4382**  
 Amount of Each Receipt this Period 7500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	18000.00
<b>TOTAL</b> This Period (last page this line number only).....	18000.00

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

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

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NAME OF COMMITTEE (In Full)  
**SEVENTH CONGRESSIONAL DISTRICT REPUBLICAN PARTY OF MINNESOTA**

**A. Hubbard County Republican Party**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 654

City Park Rapids	State MN	Zip Code 56470
---------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2022

**Transaction ID : SA11C.4369**

Amount of Each Receipt this Period  
500.00

Memo Item

**B. Hubbard County Republican Party**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 654

City Park Rapids	State MN	Zip Code 56470
---------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2022

**Transaction ID : SA11C.4371**

Amount of Each Receipt this Period  
500.00

Memo Item

**C. Lyon County Republicans**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
Mailing Address PO Box 643

City Marshall	State MN	Zip Code 56258
------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		15		2022

**Transaction ID : SA11C.4372**

Amount of Each Receipt this Period  
1000.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2000.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 11
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SEVENTH CONGRESSIONAL DISTRICT REPUBLICAN PARTY OF MINNESOTA**

**A. Marshall County Republicans**

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

Mailing Address 37156 140th Ave NW

City Newfolden	State MN	Zip Code 56738
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		05		2022

**Transaction ID : SA11C.4367**

Amount of Each Receipt this Period  
400.00

Memo Item

**B. McLeod County Republican Party**

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

Mailing Address 23808 Jet Ave

City Silver Lake	State MN	Zip Code 55381
---------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2022

**Transaction ID : SA11C.4374**

Amount of Each Receipt this Period  
800.00

Memo Item

**C. Morrison County Republican Party**

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

Mailing Address 11328 Hillton Rd

City Little Falls	State MN	Zip Code 56345
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FEC ID number of contributing federal political committee. **C**

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

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
700.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2022

**Transaction ID : SA11C.4378**

Amount of Each Receipt this Period  
1000.00

Memo Item

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



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 11
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**SEVENTH CONGRESSIONAL DISTRICT REPUBLICAN PARTY OF MINNESOTA**

**A. Pennington Co Republican GOP**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1900 Pennington Ave  
 City Thief River Falls State MN Zip Code 56701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt **07 / 26 / 2022**  
**Transaction ID : SA11C.4363**  
 Amount of Each Receipt this Period 750.00  
 Memo Item

**B. Republicans of Meeker County**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 776  
 City Litchfield State MN Zip Code 55355  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 29 / 2022**  
**Transaction ID : SA11C.4376**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Wilkin County Republicans**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 815 11th St N  
 City Breckenridge State MN Zip Code 56520  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Occupation (for Individual)  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **08 / 05 / 2022**  
**Transaction ID : SA11C.4365**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2750.00
<b>TOTAL</b> This Period (last page this line number only).....	6950.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**SEVENTH CONGRESSIONAL DISTRICT REPUBLICAN PARTY OF MINNESOTA**

Full Name (Last, First, Middle Initial)

**A. BECKER COUNTY REPUBLICANS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		13		2022

Mailing Address PO BOX 1551

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.4393**

Amount of Each Disbursement this Period

[REDACTED] 1800.00

Memo Item

City DETROIT LAKES State MN Zip Code 56502

Purpose of Disbursement OFFICE RENT

001
Category/Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. SILBERNAGER, JACKOB, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		05		2022

Mailing Address 214 12TH ST NW STE 1

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.4386**

Amount of Each Disbursement this Period

[REDACTED] 1050.00

Memo Item

City WEST FARGO State ND Zip Code 58078

Purpose of Disbursement OFFICE RENT

001
Category/Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. SILBERNAGER, JACKOB, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		13		2022

Mailing Address 214 12TH ST NW STE 1

FEC Identification Number

C [REDACTED]

**Transaction ID : SB21B.4392**

Amount of Each Disbursement this Period

[REDACTED] 2625.00

Memo Item

City WEST FARGO State ND Zip Code 58078

Purpose of Disbursement OFFICE RENT

001
Category/Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

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

[REDACTED] 5475.00

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

[REDACTED] 5475.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**SEVENTH CONGRESSIONAL DISTRICT REPUBLICAN PARTY OF MINNESOTA**

Full Name (Last, First, Middle Initial)

**A. KR SIGNS**

Mailing Address 8801 BASS LAKE RD

City  
NEW HOPE

State  
MN

Zip Code  
55428

Purpose of Disbursement  
SIGNS

004

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		20		2022

FEC Identification Number

C

Transaction ID : SB29.4395

Amount of Each Disbursement this Period

2562.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. SCREEN TECH**

Mailing Address 2272 3RD ST N  
STE A

City  
NORTH ST PAUL

State  
MN

Zip Code  
55109

Purpose of Disbursement  
SIGNS

004

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		13		2022

FEC Identification Number

C

Transaction ID : SB29.4391

Amount of Each Disbursement this Period

25738.00

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

28300.00

28300.00